

## FULFILLMENT OF THE RIGHT TO HEALTH SERVICES FOR PRISONERS IN OVERCROWDED CONDITIONS (CASE STUDY AT THE CLASS IIA CURUP CORRECTIONAL INSTITUTION)



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### ABSTRACT

*This study aims to examine the fulfillment of inmates' right to health services in overcrowded conditions at Lembaga Pemasyarakatan (Correctional Facility) Class IIA Curup. Data were gathered through in-depth interviews and observations involving both prisoners and prison staff, using a qualitative case study methodology. The results show that extreme overcrowding, with an occupancy rate higher than 286,4%, has a detrimental effect on the delivery of healthcare services. The issue is made worse by the dearth of medical personnel and the poor state of the healthcare system. Although the quality and coverage of these basic health treatments are still insufficient to satisfy the needs of all prisoners, they are nonetheless offered. These services include medical examinations and treatment for common ailments including scabies and respiratory infections.*

**Keywords:** Overcrowding; Healthcare service; Correctional Facility



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## INTRODUCTION

According to Law No. 22 of 2022 on Corrections, "Correctional System is an order regarding the direction and limits and methods of implementing the correctional function in an integrated manner." The Correctional System is expected to be able to improve the quality of personality and independence of Prisoners by providing guarantees of protection of the rights of Prisoners and Children and improve the quality of personality and independence of Prisoners by realizing mistakes, improving themselves so as not to repeat criminal acts and be accepted by society, live well, and based on applicable law. Prisoners undergo coaching programs implemented by correctional institutions in their daily lives, and they have rights that must be protected and fulfilled in accordance with the mandate of Law No. 22 of 2022 concerning Corrections. Article 9 regulates the rights of prisoners, including point d which states that prisoners are entitled to proper health services and sufficient food to meet their nutritional needs. Health can be considered a basic need as it is an essential component of human life and allows for a socially and economically productive life. According to Law No. 36 of 2009 on Health, health is a healthy physical, mental, spiritual, and social condition.

Along with the increasing awareness of the importance of health, health services are currently a top priority for the community. Prisoners' health is a very important right that must be fulfilled. Prisoners have the same rights as human beings. The right to health care equal to that of the general public is maintained for prisoners serving sentences. Correctional institutions are responsible for ensuring that health services are provided in accordance with applicable standards. This effort to fulfill health services by correctional institutions is a form of public service provided to prisoners in order to fulfill their human rights as citizens and humans.

Based on Law No. 25/2009 on Public Services, article 1 explains that public services are intended for the community, which includes all parties, both citizens and residents, both individually and in groups, as beneficiaries of public services, either directly or indirectly. In correctional institutions (Lapas), this group of public service beneficiaries is in the form of health services for prisoners. Health service standards in correctional facilities are regulated in the Decree of the Director General of Corrections Number PAS-32.PK.07.01, which describes the standardization of health services through four aspects of basic health services. First, promotive services, which are health services that focus on health promotion through various activities to improve health. Second, preventive services, which aim to prevent health problems. Third, curative services, which focus on treatment to improve conditions and relieve symptoms of disease. Finally, rehabilitative services, which aim to return inmates to the community so that they can be accepted again. Health service standards also include: 1) Receiving services and first aid from a doctor or nurse at the prison clinic, and 2) Being referred if the prisoner's health problems require further treatment.

To improve the health of prisoners, correctional institutions provide health services, medicines, and health training. However, health services in prisons still face several problems in practice. For example, law-justice.co media reports on the high death rate of prisoners as a result of poor health services. LBH Masyarakat's monitoring results over the past two years, from 2016 to 2017, recorded 302 deaths in prisons, detention centers and police custody rooms. Most of the deaths were caused by diseases that arose while the prisoners were serving their sentences, with a case rate of 47.5% in 2016 and 60.25% in 2017. Such events may indicate that health services provided in detention centers or prisons are ineffective due to a lack of medical manpower that hinders the provision of services.

Data on the occupants of correctional units in Indonesia from 2019 to 2023 shows that the number of technical implementation units (UPT) increased from 523 units in 2019 to 526 units in 2023. The number of residents of detention centers and correctional institutions has also changed. In 2019, there were 260,752 people; then decreased to 252,037 in 2020, and increased again to 270,780 in 2022. However, in 2023, the number decreased slightly to 267,149 people. However, the capacity of correctional institutions each year is far below the number of inmates, leading to overcapacity. The capacity of correctional institutions increased slightly from 134,757 in 2019 to 137,246 in 2023, but was still less than 195.5% in 2023. In 2019, the overcapacity rate reached 193.5% and increased to 198.2% in 2022. Based on these data, the number of detainees and prisoners in prisons is not proportional to the existing occupancy capacity, which causes overcrowding. Overcrowding conditions in prisons occur when the number of prisoners or correctional prisoners is not proportional to or exceeds the available residential capacity, or when the density exceeds the limit. Increased overcrowding will impact health services and other more complex issues in prisons and detention centers, requiring special attention to this issue.

The number of prisoners requiring treatment increased from January to February 2024, from 423 in January to 436 in February. However, the Curup Prison Polyclinic has only one non-permanent doctor and two nurses. Each correctional institution should have at least one qualified medical officer with knowledge of psychiatry to perform diagnosis, especially for prisoners in need of mental health care, according to the concept of health services in the Regulatory Minimum Standards, section 24 point (1). Given the shortage of capacity in prisons, the current number of medical personnel - two nurses and one non-permanent doctor - is considered inadequate when compared to the number of prisoners to be served.

Based on the previous explanation, the author is interested in conducting research as an evaluation of the implementation of organizational duties and functions as well as improving services at the Class IIA Curup Correctional Facility. This study aims to examine in depth whether the health service rights of prisoners, as mandated by legislation, can be fulfilled optimally in overcrowded conditions.

## **LITERATURE REVIEW**

Based on Adilah's research (2022), health services are still lacking, such as a lack of medical personnel and facilities. This shows that the fulfillment of prisoners' health rights has not been optimal. This research focuses on secondary data and qualitative analysis. The health and human rights of prisoners must be protected in accordance with the law and humanity. To improve health services in prisons, there needs to be cooperation between prisons and health institutions, more medical personnel, and considering the capacity of prisons and inadequate facilities. Thus, to fulfill the human rights of prisoners, continuous efforts from various parties are needed to improve the quality of their health services.

Then, the research of Adawiyah and Tarmizi (2022) in which this research was conducted in Class IIA Rantau Prapat Correctional Facility, the purpose of this study was to explain the fulfillment of the health service rights of female prisoners in Class IIA Rantau Prapat Correctional Facility, the challenges faced by officers, and the efforts of Class IIA Rantau Prapat Correctional Facility to overcome these challenges. The results showed that female prisoners in class II A prisons still lack health service rights. The main factors affecting the health service budget include the lack of central government support

for the fulfillment of health service rights, shortage of personnel and human resources, security for female prisoners, and lack of medical infrastructure.

Bintara and Wibawa (2023) conducted research at the Class IIB Kudus Detention Center, the purpose of this study was to see how the implementation of public health services is provided to prisoners of Class IIB Kudus Detention Center and the problems that arise. The results showed that the implementation of health services is divided into two categories: health services that are carried out routinely and health services that are fast or immediate. Services that are carried out immediately and routinely at the Class IIB Kudus State Detention Center are not free from several obstacles, including a larger capacity to accommodate prisoners. This results in routine medical check-ups and treatment of urgent health conditions being neglected or not optimized. Limited budgetary resources result in a lack of medical staff, limited availability of medicine, and minimal medical equipment. Limited access to health facilities outside the detention center.

Research conducted by Hutasoit in 2018 aims to provide an overview of the Implementation of Health Services at State Detention Centers, Correctional Institutions, and Child Special Development Institutions and to find out how they cooperate with related institutions in providing health services at State Detention Centers, Correctional Institutions, and Child Special Development Institutions. The results showed that detainees, prisoners, and correctional students were satisfied with the health services provided, including promotive, preventive, curative, and rehabilitative health services.

Then, Sholehudin and Wibowo (2021) also conducted a study that aims to provide an overview of the Implementation of Health Services at State Detention Centers, Correctional Institutions, and Child Special Development Institutions and to find out how they cooperate with related institutions in providing health services at State Detention Centers, Correctional Institutions, and Child Special Development Institutions. The results showed that detainees, prisoners, and correctional students were satisfied with the health services provided, including promotive, preventive, curative, and rehabilitative health services.

## **METHOD**

This research uses a case study approach with qualitative methods to examine the fulfillment of health services for prisoners in the Class IIA Curup Correctional Facility which is overcrowded. This research design is a strategy that aims to achieve research objectives and guides its implementation. Through this approach, researchers conducted direct observations and in-depth interviews with prisoners and related officers. This case study helps researchers gain a deeper understanding of the conditions that occur in the field.

The data sources in this study are divided into primary data and secondary data. Primary data was collected through in-depth interviews with 7 informants, who were selected using purposive non-random sampling technique. Secondary data was obtained from various relevant sources such as documents, scientific articles, literature, and reports of prisoner visits to the polyclinic. This secondary data was used to complement and enrich the research results. The data collection process was conducted through three main techniques, namely interviews, field observations, and documentation. Interviews were conducted using a structured list of questions to obtain information directly from informants. Field observations were conducted for 10 days to observe overcrowded conditions in prisons, health facilities, and prisoners' activities. Documentation includes

collecting data from prisoner visit reports, articles, and other documents related to the research.

Researchers used triangulation techniques to ensure data validity, namely data, method, and time triangulation. Data triangulation involves collecting information from multiple sources, while method triangulation uses multiple research methods such as case studies and text analysis to validate findings. Time triangulation is done by collecting data at several different points in time to see changes or patterns. In data analysis techniques, researchers use qualitative descriptive analysis. The stages of analysis include data collection, data reduction, data presentation, and conclusion drawing. Data collected through observations, interviews, and documentation were reduced to simplify existing information, and then presented systematically to make it understandable. Conclusions were drawn based on the researcher's interpretation of the analyzed data, with the aim of answering research problems and providing relevant solutions.

## **RESULTS AND DISCUSSION**

### **Informant Characteristics**

Informants for this study were selected based on certain criteria, including an in-depth understanding of the information needed and the ability to share information with others. Three parties were responsible for health services at Class IIA Curup prison and four prisoners were informants. Individual informants had diverse characteristics. The first informant, FS, is the head of the Sub-Section of Community Guidance and Care (Bimkemaswat). He is a Bachelor of Law graduate and has worked at Class IIA Curup prison since 2005. The second, ET, is a 42-year-old woman who has worked as a nurse at the prison since 2010. She has a bachelor's degree in nursing. In addition, her partner works in the finance and personnel section of the same prison. The third informant, DA, is a 30-year-old non-permanent doctor who is present at the prison during weekends. Since 2020 he has been responsible for providing medical care to prisoners.

Furthermore, four prisoners also became informants. SAN, a 48-year-old man, was convicted of child sexual abuse with a sentence of 11 years and 6 months and has served more than 5 years of his sentence. He often sought treatment at the polyclinic for a skin disease he suffered while in prison. BS, a 68-year-old man, was sentenced to 8 years and 4 months for corruption. Previously, he had undergone major surgery due to an accident that resulted in lung swelling. RP, a 44-year-old man, served 7 years and 5 months for narcotics and experienced health problems such as shortness of breath and skin diseases while in prison. NK, a 25-year-old man, is serving a sentence of 11 years and 2 months for child sexual abuse. He often experiences respiratory problems triggered by his lifestyle in prison and his smoking habit. All of these informants were selected because they have characteristics that are relevant to the research, both in terms of their position in health services and their experience as service recipients at Class IIA Curup prison.

### **Fulfillment of the right to health services in a state of overcrowding in Curup Correctional Facility**

The Decree of the Director General of Corrections of the Ministry of Law and Human Rights of the Republic of Indonesia Number PAS-14.OT.02.02 of 2014 concerning Correctional Service Standards for Class IIA Curup Prisoners is a special effort to fulfill the human rights of prisoners in Class IIA Curup Prison. The provision stipulates that newly arrived prisoners must undergo an initial medical examination at the polyclinic. The Penitentiary Polyclinic is used to treat sick prisoners. If an inmate requires



emergency aid and medical treatment, they are provided immediately. Inmates may be referred to a hospital outside the prison if they cannot be treated at the prison.

**Table 1**  
**Officers and Residents at Curup Correctional Facility February 2023**

No	Data	Amount
1	Number of Residents	712
2	Capacity	250
3	Overcrowded	286,4 %

Source: KPLP staff of Class IIA Curup Correctional, 2024

Like other correctional institutions, Class IIA Curup Correctional Institution faces the problem of overcrowding. Correctional Database System data shows that on April 14, 2024, Class IIA Curup Correctional Institution had a capacity of 250 people, with 716 prisoners and inmates, which led to an overcrowded of 286.4%. This is because the grounds are overcrowded, which results in problems fulfilling the right to health services for prisoners. The limited number of medical personnel, consisting of two nurses and one non-permanent doctor, exacerbates this. Conditions are not proportional to the number of inmates. This can be presented in the following table:

**Table 2**  
**Conditions of Sick Prisoners at Class IIA Curup Correctional Institution Sick**

Condition of Prisoners								
Scabies	Cephalpia	Febris	ISPA	Diabetes Mellitus	Gingivitis	Hypertensi on	Others	Amount
106	25	15	117	13	21	15	112	423

Source: Health Service Workforce Report, 2024

The data shows that 423 inmates were sick from January to March 2024, with 106 cases of scabies and 117 cases of ARI. *Sarcoptes scabiei* ticks cause scabies. ARI stands for Acute Respiratory Tract Infection caused by several viruses indicating poor hygiene, which can be caused by too large a capacity of inmates living in correctional institutions. This research was conducted through interviews and observations of inmates suffering from scabies and ARI. The author aimed to find out and study how the Pratama prison clinic provides health rights to prisoners. The authors sought to obtain as much information as possible from various parties in their research in order for them to gain better information and understanding. With its status as a primary clinic, there are enough medical services to fulfill basic medical needs. However, in practice, there are many challenges that hinder the fulfillment of health rights.

The health BAP is the first health service that prisoners receive when they arrive at the prison. It is provided by a health worker to check their health condition and determine if they require additional treatment at a later date. This process is crucial as it not only identifies illnesses that may already exist, but also collects basic health information needed to plan treatment. In addition, the health BAP aims to prevent the spread of infectious or severe diseases that could threaten the lives of prisoners, thus creating a healthier and safer prison environment. Prison authorities can safeguard the

health of prisoners and reduce the risk of disease outbreaks by conducting thorough health checks.

In addition to the physical examination, the health officer also assesses the mental state of the prisoner; this is an often overlooked but very important aspect. A prisoner's physical health and behavior while serving a sentence can be affected by poor mental state, such as stress, depression, or other psychological disorders. Health workers can plan interventions or referrals to additional medical and psychological care by identifying early signs. Physically and mentally healthy prisoners are better able to adapt to the stressful detention environment, so this measure also helps maintain security and order in prisons.

Preventive efforts that run in Curup prison are in the form of counseling on prisoner blocks, this counseling is carried out in each block. This is based on the following excerpt from the health worker's interview:

*"...we hold counseling every 2 or 3 months in each of the blocks, we gather them ..."*  
(Interview with a health worker, taken on April 01, 2024.)

Preventive efforts in Curup class IIA prison include health counseling. This is done to prevent infectious and non-communicable diseases in the prison environment. According to health workers, block hygiene counseling has been quite effective for its own implementation, as follows:

*"For the content of the counseling itself, we usually fill it with always maintaining the cleanliness of the place of residence, either the block or cell environment".*  
(Interview with health officer, taken on April 01, 2024.)

With the large number of prisoners, health problems should be given more attention. Small things such as health counseling for prisoners should be prioritized, because only once every 3 months is certainly not enough. Health counseling is carried out with the aim of increasing public awareness about how to lead a healthier lifestyle that can improve physical and mental health. To maintain the health of prisoners, meeting their nutritional needs is also important. Efforts to meet nutritional needs in Curup Class IIA prison are made through the provision of well-planned daily meals. These are designed with the nutritional needs of inmates in mind. The menu ensures that prisoners get the amount of protein, carbohydrates, vitamins, and minerals they need. To avoid boredom and meet different nutritional needs, this feeding program concentrates on food quality and menu diversity.

In addition to ensuring inmates meet their nutritional needs and keeping food hygienic, inmates are also educated on the importance of maintaining a healthy diet. The aim of this program is to increase their knowledge on how healthy food consumption can help their health in the long run. Information is provided in this education on the importance of maintaining nutritional balance, managing food portions, and the adverse effects of unhealthy eating habits, such as consuming fatty foods or not enough fiber. By providing inmates with this understanding, it is hoped that they can adopt a healthier food lifestyle not only during their incarceration but also when they return to society.

Each portion of food meets ideal nutritional needs, and the menu is carefully designed. The prison works closely with the health department to ensure that the food served is clean and hygienic. The health and hygiene of the catering service has been tested by the Rejang Lebong district government health office. During this process, the food ingredients used, the way they are served and the cleanliness of the kitchen are considered. The hygiene and sanitation certificate of the food service indicates that the

nutritional adequacy of the prison is very good, and the Rejang health office has a letter of good nutritional quality. In addition to good nutrition, an additional health factor is the environment. There are several blocks that do not maintain cleanliness, causing mold to appear in the prison environment. The prison itself has provided healthy living training. Indeed, some of these prisoners have not realized the importance of maintaining a healthy lifestyle. In addition to providing the basic needs of prisoners, additional efforts are needed to ensure that they remain healthy, such as conducting periodic health screenings. One type of preventive health service is health screening, which is usually carried out to determine the general health condition of prisoners such as blood sugar and blood pressure. Curup Prison itself conducts health screenings regularly, and the time spent doing so is once a month. The clinic employs inmates to help provide medical care at Curup class IIA prison. Health cadres are talented and well-behaved health companion inmates. These health cadres are assigned to assist the available health workers.

Health cadres serve as an extension of the limited number of health workers in the prison. They are assigned to visit inmates in each block. This task is promotive in nature, as they only conduct surveillance and prevention of diseases such as scabies without providing direct treatment. Scabies is highly contagious, especially in unsanitary places. The author interviewed a 45-year-old inmate who developed scabies, which appeared after entering prison. At first, the inmate did not suffer from scabies. However, due to the damp, poorly ventilated and overcrowded environment, his condition worsened during his sentence. He developed a skin disease that spread from his feet to his hands and back. The disease is thought to have been caused by a lack of room hygiene, which included the use of unclean toilet slippers.

Scabies is a skin disease caused by tiny mites that burrow into the skin and create extremely itchy pits. Due to the crowded and sometimes unhygienic conditions of prisons, the risk of scabies transmission increases. In the case recounted by the 45-year-old inmate interviewed by the author, scabies started to appear after he entered the prison, although he had never suffered from this disease before. The damp conditions of the prison, the lack of ventilation, and the dense prison population made matters worse, allowing scabies to spread from the feet to the hands and back. In addition, this inmate argued that another factor contributing to the spread of the disease was poor hygiene levels, including the use of unclean toilet slippers. Cleanliness of bedrooms and surrounding areas is very important in

Health cadres also monitor inmates and teach them about the importance of maintaining personal and environmental hygiene to prevent diseases such as scabies. This education includes how the mites that cause scabies can thrive in damp and dirty environments and how to prevent them from spreading. Health cadres encourage prisoners to always wash their hands, keep their bodies clean by bathing regularly, and keep their clothes and bedding clean. They also often emphasize the use of clean toilet slippers and bathroom hygiene.

The main factors that caused the 45-year-old inmate's condition to worsen were the high humidity and lack of ventilation in the prison. To take preventive measures, health employees remind prisoners to maintain good air circulation in their rooms; they can open doors or windows if possible. Limited facilities are often an insurmountable obstacle in confined settings such as prisons. As a result, health cadres and prison officials work together to create a healthier environment and support hygiene, although these efforts may require more time and resources. Health cadres are also responsible for monitoring the progress of diseases such as scabies, especially for prisoners who are



already infected. Health cadres can report cases that require further medical attention to authorized health officials, even if they do not provide direct treatment. This ensures that inmates who need medical care are given it immediately. Health cadres in crowded and vulnerable environments such as prisons are crucial to maintaining the overall health of prisoners through promotion, prevention and education.

The results show that prisoners at the Class IIA Curup Correctional Institution have fairly good access to health services, but the quality still needs to be improved. Four types of health services: promotive, preventive, curative, and rehabilitative are some of the elements related to the fulfillment of the right. Through counseling and health-related readings, promotive services aim to increase prisoners' knowledge about their health. Preventive services, on the other hand, concentrate on preventing diseases, such as conducting initial examinations for new inmates, isolating inmates suffering from infectious diseases, and monitoring environmental hygiene and nutritional intake. In addition, raids and urine tests are conducted to prevent drug abuse. Curative services include basic treatment for sick prisoners, temporary inpatient care, and referrals for prisoners who require additional treatment outside the prison polyclinic. Meanwhile, rehabilitative services focus on restoring physical and mental health, as well as rehabilitating drug dependence so that prisoners can return to functioning properly in society. Rehabilitative services are provided at the prison polyclinic to help prisoners associate themselves better.

Two factors influence the provision of health care: environmental factors and behavioral factors. Environmental factors relate to prison buildings, clean water and waste disposal facilities, environmental hygiene, worship facilities, and sports facilities that provide food and drink. Behavioral factors are related to how prisoners lead a clean and healthy lifestyle, which has an impact on environmental factors. If the behavior of prisoners does not support the right to health services, any efforts will fail. One environmental factor that affects efforts to provide health care rights is overcrowded conditions in correctional institutions. Research has shown that overcrowded conditions in correctional institutions cause health service rights to be disrupted. The high occupancy rate of correctional institutions interferes with the implementation of the right to health services, such as hampering the creation of a clean and healthy environment, and inadequate health service efforts due to the limited number of facilities and infrastructure to meet all the needs of prisoners who exceed the capacity of the correctional institution. Thus, various health service activities must be optimized to meet the needs of prisoners. In general, health services for prisoners in overcrowded conditions have been running well at the Class IIA Curup Correctional Institution. However, there are still some obstacles that must be improved by the Correctional Institution.

Overcrowding, which is an imbalance between the number of occupants and the capacity of the building, can make prisoners more vulnerable to infectious diseases. Poor sanitation, which creates an unhealthy environment, exacerbates this condition. According to "Repositioning and Revitalizing Corrections in Indonesia's Criminal Justice System", there is a correlation between overcapacity and higher death rates of prisoners. This is due to the fact that too much capacity impedes service delivery and guidance, which is the responsibility of the correctional system. Overcapacity has negative consequences, including an increase in infectious and contagious diseases, poor disease management due to limited facilities, poor entitlement services, and psychosocial and security issues that can lead to conflict between inmates. The Indonesian Constitution and the Universal Declaration of Human Rights (UDHR) guarantee that all people have

access to good health services. In accordance with Article 25 of the UDHR, everyone has the right to a standard of living adequate for health and well-being, which includes food, clothing, shelter, and health care. Article 12 paragraph (1) of the International Convention on Economic, Social and Cultural Rights, adopted by the United Nations on 16 December 1966, recognizes the right of everyone to the enjoyment of the best standard of physical and mental health. One of the human rights is the right to health, which is essential for living a good life. Fulfilling the rights of prisoners is one of the goals of the correctional system. Law No. 12 of 1995 on Corrections describes the rights of prisoners, especially Article 14 paragraph (1) point (d), which states that prisoners are entitled to adequate food and health care. To implement these rights, correctional institutions (Lapas) are responsible. Nevertheless, many prisons in Indonesia suffer from overcapacity as a result of the increasing age of sentences and the number of prisons. As a result, space that should meet health standards is no longer adequate as the number of people living there exceeds capacity.

## CONCLUSION AND SUGGESTION

Based on the results of the research and discussion that has been carried out, it can be concluded that prisoners at the Class IIA Curup Correctional Institution have fairly good access to health services. However, some challenges need to be addressed. These include needing more health extension officers and better healthcare facilities, as well as more health-related literature. It is especially important to inform newly incarcerated prisoners on how to improve the health of themselves and their environment. In addition, the need for psychologist assistance for mental health checks and the availability of environmental health facilities should be considered. Conversely, continuous counseling is needed to increase prisoners' awareness of environmental hygiene.

Based on the above conclusions, several suggestions can be made, so that prisoners at the Class IIA Curup Correctional Institution can obtain better health services. First, it is necessary to improve health service facilities and infrastructure. Second, it is recommended to increase human resources in health services, including not only doctors and nurses, through training promotive and preventive health workers in the recruitment of correctional officers. Third, the health service budget should be prioritized for providers and not just for buying basic medicines.

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