



FIDH – International Federation for Human Rights

THAILAND

Submission to the United Nations (UN) Special Rapporteur on the right to health

20 January 2025

This submission, prepared ahead of the UN Special Rapporteur’s official visit to Thailand from 18 to 28 February 2025, focuses on the right to health for individuals deprived of their liberty in Thailand.

FIDH documentation shows that Thai authorities have consistently failed to respect, protect, and fulfil the right of prisoners and detainees to the “enjoyment of the highest attainable standard of physical and mental health,” which is guaranteed by Article 12 of the International Covenant on Economic, Social and Cultural Rights (ICESCR). Thailand is a state party to the ICESCR.¹

In its General Comment No. 14 on Article 12 of the ICESCR, the UN Committee on Economic, Social and Cultural Rights (CESCR) states that the right to health extends to the “underlying determinants of health, such as access to safe and potable water and adequate sanitation, an adequate supply of safe food, nutrition and housing.”²

The FIDH’s assessment is based on interviews with 48 former inmates (36 men and 12 women) who had been detained in 22 prisons between 2021 and 2023 and five former detainees (three men and two women) who had been detained in three Immigration Detention Centers (IDCs) in Bangkok and were released at various times between 2020 and 2023.³ It is likely that the information gathered through these

¹ Article 12.2(d) of the ICESCR stipulates that steps to be taken by state parties to achieve the full realization of the right to health should include those necessary for the creation of conditions that would “assure to all medical service and medical attention in the event of sickness.” The UN CESCR’s General Comment No. 14 specifies that such steps include the provision of equal and timely access to basic preventive, curative, rehabilitative health services and health education; regular screening programs; appropriate treatment of prevalent diseases, illnesses, injuries and disabilities; the provision of essential drugs; and appropriate mental health treatment and care.

² CESCR, *General Comment No. 14: The Right to the Highest Attainable Standard of Health (Art. 12)*, 11 August 2000; para. 11; UN Document E/C.12/2000/4; <https://www.ohchr.org/sites/default/files/Documents/Issues/Women/WRGS/Health/GC14.pdf>

³ The 36 men interviewed by FIDH had been detained in: Bangkok Remand Prison in Bangkok; Central Special Treatment Center in Bangkok; Chiang Mai Central Prison in Chiang Mai Province; Kalasin Provincial Prison in Kalasin Province; Lamphun Provincial Prison in Lamphun Province; Nakhon Si Thammarat Central Prison in Nakhon Si Thammarat Province; Narathiwat Provincial Prison in Narathiwat Province; Nong Bua Lamphu Provincial Prison in Nong Bua Lamphu Province; Pattani Central Prison in Pattani Province; Phang-nga Provincial Prison in Phang-nga Province; Phatthalung Central Prison in Phatthalung Province; Rangsit Temporary Prison in Pathumthani Province; Ratchaburi Central Prison in Ratchaburi Province; Songkhla Provincial Prison in Songkhla Province; Thanyaburi District Prison in Pathumthani Province; and Thonburi Remand Prison in Bangkok. The 12 interviewed women had been detained in: Central Women’s Correctional Institution in Bangkok; Chiang Mai Women’s Correctional Institution in Chiang Mai Province; Khae Noi Temporary Prison in Petchabun Province; Ratchaburi Central Prison in Ratchaburi Province; Thanyaburi Women’s Correctional Institution for Drug Addicts in Pathumthani Province; and Thonburi Women’s Correctional Institution in Bangkok.

interviews is reflective of similar trends and conditions that exist across the other prisons and IDCs in the country.⁴

This submission also illustrates that the provision of healthcare for prisoners and detainees across the country fails to meet relevant international minimum standards, such as the UN Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules), the UN Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (the Bangkok Rules), and the Body of Principles for the Protection of All Persons under Any Form of Detention or Imprisonment.⁵

1. Overview: The situation of prisons and IDCs

1.1. Extremely high incarceration rates

Over the past decade, Thailand's incarceration rates have remained among the highest in the world and women have been imprisoned in proportions that have been surpassed by very few other countries in the world.

According to comparative statistics published by the Institute for Crime & Justice Policy Research (ICPR) at the end of 2023, Thailand had the world's tenth highest incarceration rate.⁶ As of October 2022, the country had the world's second highest incarceration rate of women.⁷ According to the most recent statistics by the Thai Ministry of Justice's Department of Corrections (DoC), as of 1 January 2025, Thailand had a total prison population of 280,790 inmates (246,173 men and 34,617 women).⁸ The female prison population of 34,617 constituted 12% of its total prison population.

The number of inmates imprisoned for drug-related offenses has consistently accounted for the vast majority of the total prison population. In January 2025, 203,222 inmates (180,173 men and 23,049 women), or 72% of the total prison population, were incarcerated for drug-related offenses.⁹

Drug-related offenses have also traditionally accounted for most of the crimes for which death sentences have been imposed. As of October 2024, 232 (66%) of the 348 inmates (313 men and 35 women) under

⁴ As of December 2024, the Thai prison system comprised 143 prisons and correctional facilities. In addition, as of September 2023, there were 22 IDCs in Thailand.

⁵ Particularly Rules 22 (on food and drinking water), 24, and 25 (on healthcare services) of the Nelson Mandela Rules, Rules 5 (on personal hygiene) and 6 to 18 (on healthcare services) of the Bangkok Rules, and Principles 24 and 26 (on medical care) of the Body of Principles for the Protection of All Persons under Any Form of Detention or Imprisonment. Rule 24(1) of the Nelson Mandela Rules stipulates that prisoners should enjoy the same standards of health care that are available in the community and should "have access to necessary healthcare services free of charge without discrimination on the grounds of their legal status."

⁶ ICPR, *Highest to Lowest - Prison Population Rate*, https://www.prisonstudies.org/highest-to-lowest/prison_population_rate?field_region_taxonomy_tid=All

⁷ ICPR, *World female prison population up by 60% since 2000*, 19 October 2022, <https://www.icpr.org.uk/news-events/2022/world-female-prison-population-60-2000>

⁸ Department of Corrections, *Statistics of detainees nationwide*, 1 January 2025, http://www.correct.go.th/rt103pdf/report_result.php?date=2025-01-01&report= [in Thai]

⁹ Department of Corrections, *Statistics of detainees under the Narcotics Act nationwide*, 1 January 2025, http://www.correct.go.th/rt103pdf/report_result.php?date=2025-01-01&report=drug [in Thai]

death sentence had been convicted of drug-related offenses.¹⁰ Nearly all (34 of 35, or 97%) of the female prisoners under death sentence had been convicted of drug-related offenses.¹¹

1.2. Facilities over capacity

Thai prisons remain severely overcrowded and the overall number of prisoners exceeds the official maximum capacity of the country's prison system. According to the latest available figures from the DoC, in January 2025, the total prison population of 280,790 exceeded by 13% the prison system's overall capacity, which stood at 248,330 (213,252 men and 35,078 women). The number of male inmates stood at 246,173, or 15% above the official capacity, while the number of female inmates stood at 34,617, or 98% of the official capacity.¹²

The latest statistics by the DoC showed that, as of January 2025, 110 (or 77%) of the 143 prisons nationwide operated above their intended capacity.¹³ Buriram Provincial Prison in Buriram Province, which operated at 413% of its official capacity, was the most overcrowded prison in Thailand, followed by the Pathumthani Detention Center in Pathumthani Province and the Phu Khiao District Prison in Chaiyaphum Province, which operated at 211% and 208% of their official capacity, respectively.

Severe overcrowding has also characterized conditions in Thailand's IDCs. According to statistics from Thailand's Immigration Bureau, the official total capacity of the Thai immigration detention system stands at 1,100 detainees. As of 6 June 2024, there were a total of 1,710 adult (1,455 men and 255 women) and 131 children in IDCs across Thailand – an occupancy level of 155%.¹⁴

The severe overcrowding has had a negative impact on living conditions in both prisons and IDCs. Former prisoners interviewed by FIDH reported that inmates continued to lack sufficient sleeping space, which affected the quality of their accommodation.¹⁵ In IDCs, high numbers of detainees resulted in inadequate accommodation space and degrading living conditions. Most interviewed former detainees reported being kept in squalid cells where they were confined to a minimal personal living space.¹⁶

1.3. Access and monitoring severely restricted

The Thai government has failed to ensure systematic, effective, and independent monitoring and inspection of all prisons through regular visits by human rights organizations.

Access to Thai prisons for independent human rights organizations has continued to be tightly restricted. Prisons have remained inaccessible for independent monitors long after the relaxation of COVID-19

¹⁰ Department of Corrections, *Statistics of prisoners under death sentence – October 2024*, 13 December 2024, <http://www.correct.go.th/executed/filepdf/1734076170.pdf> [in Thai]

¹¹ Department of Corrections, *Statistics of prisoners under death sentence – October 2024*, 13 December 2024, <http://www.correct.go.th/executed/filepdf/1734076170.pdf> [in Thai]

¹² Department of Corrections, Report of the overcrowding situation in prisons/correctional facilities, 5 January 2025; http://www.correct.go.th/rt103pdf/crowded_pdf.php?filename=2025_2025-01-05 [in Thai]

¹³ Department of Corrections, Report of the overcrowding situation in prisons/correctional facilities, 5 January 2025; http://www.correct.go.th/rt103pdf/crowded_pdf.php?filename=2025_2025-01-05 [in Thai]

¹⁴ Division 3 of the Investigation Division under the Immigration Bureau, *Correspondence number 0029.843/5926: Request under the Official Information Act 1997*, 6 June 2024 [in Thai]

¹⁵ FIDH, *Thailand Annual Prison Report 2023 - Chapter 7.1.*, 9 March 2023

¹⁶ FIDH, *Out of sight - Human rights violations in Thailand's immigration detention centers - Chapter 5.1.*, 29 March 2023

measures in correctional facilities in 2022. In 2017, 2022, and 2023, the DoC denied FIDH access to both civilian and military detention facilities for documentation purposes. The National Human Rights Commission of Thailand (NHRCT), which is mandated to conduct visits to places of detention, is the only human rights organization that has been granted partial access to prisons to assess detention conditions and interview inmates.

Thailand's IDCs have traditionally been among the country's most secretive places of detention. They have been characterized by a lack of access for independent human right organizations and media and a scarcity of official information. This situation has been compounded by the reluctance of family members of the detainees to talk about their relatives' plight for fear of reprisals against the latter. All these factors have made the documentation of conditions in IDCs extremely difficult.

2. Failure to guarantee the right to health in prisons

Thai authorities have failed to guarantee all four essential elements of the right to health - i.e. availability, accessibility, acceptability, and quality, as defined in General Comment No. 14.¹⁷

Interviews with former prisoners revealed the Thai penitentiary system's ongoing failure to provide timely and quality physical and mental healthcare services that meet international minimum standards. Interviews with many former prisoners found that limited healthcare resources resulted in inmates not receiving appropriate treatment for their illnesses.¹⁸

2.1. No on-site doctors and nurses

Most of the prisons where interviewed former prisoners were detained did not have medical doctors or professional nurses on duty.¹⁹ Instead, prison staff with training in basic healthcare was available to provide on-site primary healthcare services and medicines to prisoners at the prison medical facility.²⁰ According to former inmates, prison healthcare staff were often insufficient in number compared to the prison population.²¹

Former prisoners noted that medical doctors from outside the prison visited the facilities at irregular intervals, depending on each prison.²² Inmates had to register in advance in order to see the doctor, which

¹⁷ CESCR, *General Comment No. 14: The Right to the Highest Attainable Standard of Health (Art. 12)*, 11 August 2000; para. 12; UN Document E/C.12/2000/4; <https://www.ohchr.org/sites/default/files/Documents/Issues/Women/WRGS/Health/GC14.pdf>

¹⁸ FIDH, *Thailand Annual Prison Report 2022 - Chapter 7.5.*, 24 March 2022; FIDH, *Thailand Annual Prison Report 2023 - Chapter 7.6.*, 9 March 2023

¹⁹ FIDH, *Thailand Annual Prison Report 2022 - Chapter 7.5.*, 24 March 2022; Rule 25 of the UN Standard Minimum Rules for the Treatment of Prisoners states: "1. Every prison shall have in place a healthcare service tasked with evaluating, promoting, protecting and improving the physical and mental health of prisoners, paying particular attention to prisoners with special healthcare needs or with health issues that hamper their rehabilitation.;2. The healthcare service shall consist of an interdisciplinary team with sufficient qualified personnel acting in full clinical independence and shall encompass sufficient expertise in psychology and psychiatry. The services of a qualified dentist shall be available to every prisoner."

²⁰ FIDH, *Thailand Annual Prison Report 2022 - Chapter 7.5.*, 24 March 2022; FIDH, *Thailand Annual Prison Report 2023 - Chapter 7.6.*, 9 March 2023

²¹ FIDH, *Thailand Annual Prison Report 2022 - Chapter 7.5.*, 24 March 2022; FIDH, *Thailand Annual Prison Report 2023 - Chapter 7.6.*, 9 March 2023

²² FIDH, *Thailand Annual Prison Report 2022 - Chapter 7.5.*, 24 March 2022; FIDH, *Thailand Annual Prison Report 2023 - Chapter 7.6.*, 9 March 2023; FIDH, *Thailand Annual Prison Report 2024 - Chapter 8.6.*, 19 March 2024

could take a long time due to the infrequency of the visits compared to the needs of the prison population.²³

2.2. “Paracetamol for everything”

Access to appropriate medical treatment and medicine was another primary challenge for prisoners, especially those with chronic illnesses.²⁴ All interviewed former inmates reported that paracetamol was the most common medicine given to prisoners to treat various illnesses.²⁵ “Paracetamol for everything,” commented a former prisoner at the Central Women’s Correctional Institution in Bangkok.²⁶ Many former inmates noted that medicine was not readily available, and the process to obtain it was slow.²⁷ Over-the-counter painkillers and anti-inflammatory medicines were especially “treasurable” and “precious,” and they could be sold for as much as 200 baht (about US\$6) per pill,²⁸ or traded with 30 bags of instant coffee.²⁹

2.3. Lack of specialized healthcare

The mental health of inmates and their mental disorders were among the most common and serious health concerns raised by many former prisoners interviewed by FIDH. In spite of that, mental healthcare or psychiatric care services in most of the prisons where interviewed former prisoners were detained were either unavailable or seriously inadequate.³⁰ Many interviewed former prisoners reported that mental health services were limited to the prescription of medication, rather than the promotion of the mental wellbeing of prisoners.³¹

In May 2022, the DoC reported that over 5,000 (or 2%) of the approximately 260,000 inmates nationwide were suffering from mental disorders, such as anxiety and depression.³² The DoC said mentally ill inmates were mostly found in Bangkok prisons.³³ The DoC said there were 31 psychologists for 10 prisons across the country and one psychiatrist at Bangkok’s Medical Correctional Institution.³⁴

Suicide, suicide attempts, and self-harm were also common among prisoners, according to many former prisoners interviewed by FIDH.³⁵

²³ FIDH, *Thailand Annual Prison Report 2024 - Chapter 8.6.*, 19 March 2024

²⁴ FIDH, *Thailand Annual Prison Report 2024 - Chapter 8.6.*, 19 March 2024

²⁵ FIDH, *Thailand Annual Prison Report 2022 - Chapter 7.5.*, 24 March 2022; FIDH, *Thailand Annual Prison Report 2023 - Chapter 7.6.*, 9 March 2023; FIDH, *Thailand Annual Prison Report 2024 - Chapter 8.6.*, 19 March 2024

²⁶ FIDH, *Interview with a former prisoner at the Central Women’s Correctional Institution*, 8 November 2023

²⁷ FIDH, *Thailand Annual Prison Report 2023 - Chapter 7.6.*, 9 March 2023

²⁸ FIDH, *Interview with a former prisoner at the Bangkok Remand Prison*, 1 December 2022

²⁹ FIDH, *Interview with a former prisoner at Narathiwat Provincial Prison*, 27 December 2022; FIDH, *Interview with a former prisoner at Narathiwat Provincial Prison*, 27 December 2022

³⁰ FIDH, *Thailand Annual Prison Report 2022 - Chapter 7.5.*, 24 March 2022; FIDH, *Thailand Annual Prison Report 2023 - Chapter 7.6.*, 9 March

³¹ FIDH, *Thailand Annual Prison Report 2024 - Chapter 8.6.*, 19 March 2024

³² Bangkok Post, *2% of inmates are mentally ill*, 24 May 2022

³³ Bangkok Post, *2% of inmates are mentally ill*, 24 May 2022

³⁴ Bangkok Post, *2% of inmates are mentally ill*, 24 May 2022

³⁵ FIDH, *Thailand Annual Prison Report 2022 - Chapter 7.5.*, 24 March 2022

Other specialized healthcare services such as dentistry, ophthalmology, or gynecology were either unavailable or extremely limited.³⁶ According to interviewed former prisoners, oral health diseases were very common among inmates. However, the provision of dental healthcare was seriously inadequate compared to the demand, resulting in very long waiting time.³⁷ Inspections conducted by the Ministry of Public Health at various times in 2022 found that the provision of dental services fell short of targets in several prisons, where only between 9% and 29% of prisoners who had oral health ailments received appropriate treatment.³⁸

Access to prison medical facilities was also a tightly regulated and bureaucratic process, which interviewed former prisoners said resulted in delayed diagnosis and medical treatment.³⁹ Inmates were unable to access the prison medical services by themselves without register their names to request a visit or asking for permission from prison guards or prisoner assistants to prison guards with no medical expertise, who had the discretionary power to determine whether a prisoner was sick and should be allowed to go to the medical facility in prison.⁴⁰

For prisoners with more serious pathologies or in critical conditions, they would be referred to local hospitals for additional treatment.⁴¹

2.4. Slow response to medical emergencies

The slow and bureaucratic process to access prison medical facilities is especially problematic in case of emergencies.

In cases of medical emergencies that occurred during the period of the afternoon and night, when prisoners are not allowed to leave their cells (usually from 3:00pm to 6:00am), former detainees reported that inmates could press a buzzer to call a prison guard. However, many former detainees said that prison officers often failed to respond urgently to emergency cases. Many interviewed former prisoners reported having witnessed the deaths of prisoners as a result of prison personnel's failure to respond urgently to medical emergencies.⁴²

³⁶ FIDH, *Thailand Annual Prison Report 2022 - Chapter 7.5.*, 24 March 2022; FIDH, *Thailand Annual Prison Report 2023 - Chapter 7.6.*, 9 March 2023

³⁷ FIDH, *Thailand Annual Prison Report 2023 - Chapter 7.6.*, 9 March 2023

³⁸ Ministry of Public Health (Health region 6), *Implementation of 'Ratchathan Pansuk' Corrections Department Sharing Happiness project in 2022*, July 2022, https://hpc6.anamai.moph.go.th/th/inspection65-2/download?id=89668&mid=36417&mkey=m_document&lang=th&did=31820 [in Thai]; Ministry of Public Health (Health region 1), *Implementation of 'Ratchathan Pansuk' Corrections Department Sharing Happiness project in 2022*, accessed on July 2022, https://inspection.moph.go.th/e-inspection/file_report_summary/2022-07-11-04-00-21.pdf [in Thai]

³⁹ FIDH, *Thailand Annual Prison Report 2023 - Chapter 7.6.*, 9 March 2023; FIDH, *Thailand Annual Prison Report 2024 - Chapter 8.6.*, 19 March 2024; Rule 27 of the UN Standard Minimum Rules for the Treatment of Prisoners states: "1. All prisons shall ensure prompt access to medical attention in urgent cases. Prisoners who require specialized treatment or surgery shall be transferred to specialized institutions or to civil hospitals. Where a prison service has its own hospital facilities, they shall be adequately staffed and equipped to provide prisoners referred to them with appropriate treatment and care.; 2. Clinical decisions may only be taken by the responsible health-care professionals and may not be overruled or ignored by non-medical prison staff."

⁴⁰ FIDH, *Thailand Annual Prison Report 2022 - Chapter 7.5.*, 24 March 2022; FIDH, *Thailand Annual Prison Report 2023 - Chapter 7.6.*, 9 March 2023; *Thailand Annual Prison Report 2024 - Chapter 8.6.*, 19 March 2024

⁴¹ FIDH, *Thailand Annual Prison Report 2024 - Chapter 8.6.*, 19 March 2024

⁴² FIDH, *Interview with a former prisoner at the Bangkok Remand Prison*, 28 November; FIDH, *Interview with a former prisoner at the Bangkok Remand Prison*, 28 November 2022; FIDH, *Interview with a former prisoner at the Bangkok Remand Prison*, 29 November 2022; FIDH, *Interview with a former prisoner at the Bangkok Remand Prison*, 1 December 2022

The referral process to an outside hospital was also overly complicated and tightly managed by prison staff, according to many former inmates. Some former prisoners also reported instances in which security considerations interfered with the decisions to make referrals to hospitals.

Many interviewed former prisoners said the slow processes and strict security considerations routinely led to the failure to urgently respond and provide medical attention to cases of medical emergency at night.⁴³

The fatal consequences of the inadequate response to medical emergencies in prisons was illustrated by the death of an imprisoned woman human rights defender, Netiporn Sanesangkhom (aka Bung), on 14 May 2024.⁴⁴ Netiporn was reported to have suffered a cardiac arrest while in custody of the DoC on the morning of 14 May 2024. She became unconscious at the DoC Hospital in Bangkok before being transferred to Thammasat University Hospital in Pathumthani Province, where she was later pronounced dead at 11:22am. Netiporn had been detained at the Central Women’s Correctional Institution in Bangkok since 25 January 2024, after the Bangkok South Criminal Court found her guilty of contempt of court and sentenced her to one month in prison in relation to a physical altercation with the court’s security personnel on 19 October 2023. On 27 January 2024, Netiporn commenced a dry hunger strike to demand judicial reform and the cessation of imprisonment of individuals for expressing dissenting opinions. Due to her deteriorating health, she was transferred to medical facilities several times. She resumed drinking water in February 2024 and eating in April 2024. Prior to her death, on 4 April 2024, she had been receiving treatment at the DoC Hospital in Bangkok for her deteriorating health as a result of the hunger strike.⁴⁵ To date, the investigation into Netiporn’s death remains pending.⁴⁶

The authorities’ handling of Netiporn’s case stood in stark contrast with the treatment of former Thai Prime Minister Thaksin Shinawatra, which drew attention to the issue of inequalities and double standards in the treatment of prisoners, including the provision of healthcare, in the country [See below, 2.5. *Discrimination and privileges abound*].⁴⁷

Upon his return to Thailand from self-imposed exile on 22 August 2023, Thaksin was held at the Bangkok Remand Prison, where he was expected to serve an eight-year prison term stemming from his past convictions in three separate criminal cases.⁴⁸ Thaksin spent about 13 hours in Zone 7 - the prison’s health

⁴³ FIDH, *Thailand Annual Prison Report 2024 - Chapter 8.6.*, 19 March 2024; Rule 27 of the UN Standard Minimum Rules for the Treatment of Prisoners states: “1. All prisons shall ensure prompt access to medical attention in urgent cases. Prisoners who require specialized treatment or surgery shall be transferred to specialized institutions or to civil hospitals. Where a prison service has its own hospital facilities, they shall be adequately staffed and equipped to provide prisoners referred to them with appropriate treatment and care. 2. Clinical decisions may only be taken by the responsible health-care professionals and may not be overruled or ignored by non-medical prison staff.”

⁴⁴ Netiporn was a prominent activist who advocated for LGBTIQ+ and youth rights in 2020-2021. She then joined the pro-democracy group Thalu Wang (“shattering the palace”), with which she actively engaged in conducting public opinion polls regarding the Thai monarchy. Her political activism was met with repeated prosecutions since 2021, including two cases under Article 112 of Thailand’s Criminal Code (lèse-majesté).

⁴⁵ FIDH, *Thailand: Death in detention of pro-democracy activist Netiporn “Bung” Sanesangkhom*, 16 May 2024

⁴⁶ Thai Enquirer, 14 January 2024, https://www.facebook.com/ThaiEnquirer/photos/the-hearing-on-the-death-of-political-activist-netiporn-bung-thaluwang-sanesangk/1067140145423906/?_rdr

⁴⁷ Rule 24 of the UN Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules) states that prisoners should have access to necessary healthcare services “without discrimination on the grounds of their legal status.”

⁴⁸ Nation, *Former PM moved to hospital after health scare*, 23 August 2023

facility.⁴⁹ Minutes after midnight, he was transferred to the Police General Hospital in central Bangkok, after complaining of chest tightness and insomnia.⁵⁰ According to the DoC, Thaksin was suffering from heart disease, lung disease, high blood pressure, and a herniated disk.⁵¹

Thaksin was accommodated in a private suite on the Police General Hospital's 14th floor, which houses a "premium" ward for special patients.⁵² Very few other details emerged about Thaksin's condition and the circumstances surrounding his stay at the Police General Hospital.⁵³ The former Prime Minister remained in the Police General Hospital for six months until 18 February 2024, when he was released on parole after serving six months of his prison term, which had been reduced to one year in a royal pardon granted to him by King Rama X on 31 August 2023.⁵⁴

2.5. Discrimination and privileges abound

Most of the interviewed former prisoners underscored the issue of discriminatory treatment of inmates, depending on their socio-economic status, ethnicity, and/or the crimes for which they had been convicted.⁵⁵

In general, wealthy, well-known, or influential prisoners enjoyed a wide range of privileges over the general prison population, including sleeping dormitories with fewer occupants, better quality mattresses for sleeping, and priority in receiving meals that were more nutritious.⁵⁶

One former prisoner at the Bangkok Remand Prison commented: "Food was the best indicator of inequality [in prison]. When it's time to eat, those with power, money, and visiting relatives wouldn't eat the food provided by the government. [...] But those with no money or family, which accounted for over 80% of the [prison] population, had to eat whatever was given to them."⁵⁷

2.6. Abusive medical practices

A few reports emerged of unethical conduct by medical personnel in prisons.

In June 2022, a detained female political activist reported being threatened and verbally harassed by a male volunteer doctor while receiving medical attention at the Central Women's Correctional Institution in Bangkok.⁵⁸ In addition, the NHRCT investigated a complaint made in 2021 about a medical professional

⁴⁹ Nation, *Former PM moved to hospital after health scare*, 23 August 2023; Bangkok Post, *Thaksin's out-of-prison hospital stay extended*, 21 October 2023

⁵⁰ Bangkok Post, *Thaksin moved to Police Hospital*, 23 August 2023

⁵¹ Nation, *Thaksin diagnosed with four co-morbidities, under close watch in prison hospital*, 22 August 2023;

⁵² Nation, *Thaksin gets VIP treatment at hospital, no police security presence seen*, 23 August 2023; Bangkok Post, *Thaksin moved to Police Hospital*, 23 August 2023; Thai PBS, *MP questions DPM Phumtham's defence of Thaksin's treatment*, 22 December 2023

⁵³ Bangkok Post, *Thaksin case tests faith*, 18 December 2023

⁵⁴ AP, *Former Thai PM Thaksin released on parole after serving 6 months in hospital*, 18 February 2024; Public Relations Department, *Royal Pardon Reducing Thaksin Shinawatra's Jail Term to One Year*, 1 September 2023

⁵⁵ FIDH, *Thailand Annual Prison Report 2024 - Chapter 8.3.*, 19 March 2024; UN CECR's General Comment No. 14 makes it clear that state parties to the ICESCR "are under the obligation to respect the right to health by, inter alia, refraining from denying or limiting equal access for all persons, including prisoners or detainees."

⁵⁶ FIDH, *Thailand Annual Prison Report 2024 - Chapters 8.3. and 8.5.*, 19 March 2024

⁵⁷ FIDH, *Interview with a former prisoner at the Bangkok Remand Prison*, 29 November 2022

⁵⁸ Observatory for the Protection of Human Rights Defenders, *Thailand: Deteriorating health and arbitrary detention of two pro-democracy activists*, 7 July 2022

who imposed disciplinary sanctions on a prisoner for being rude while receiving treatment. In 2022, the NHRCT found that the medical professional's behavior amounted to a human rights violation, because it said that medical professionals had no authority to impose disciplinary measures on prisoners.⁵⁹

2.7. Female prisoners lack adequate gender-specific sanitary and hygiene products

Former female prisoners reported the lack of availability of necessities for their specific hygiene needs, especially sanitary pads and underwear, which seriously undermined their right to health.⁶⁰ For example, many interviewed former female prisoners reported that the number of sanitary pads distributed in prison were insufficient. As a result, most female prisoners had to buy more sanitary pads at the prison shop at higher prices than outside the prison or receive them through visiting family members.⁶¹

The shortage of sanitary pads seriously affected the personal hygiene of female prisoners. Many former female prisoners reported witnessing other female prisoners having to wash and reuse the same sanitary pad many times.⁶²

A former prisoner at the Central Women's Correctional Institution reported that those who could not afford to buy sanitary pads from the prison shop were eligible to receive more pads only if they could prove to the prison officers that they really had no money or any support from their families.⁶³

2.8. Pregnant prisoners face additional challenges

FIDH's interviews with former female inmates showed that the limited availability of specialized medical treatment negatively affected pregnant women prisoners.⁶⁴ For example, at the Central Women's Correctional Institution, specialist doctors were scheduled to visit the prison on different days of the week: "If a pregnant prisoner has a pain on Monday, she has to wait until Thursday to see a gynecologist," recalled a former prisoner.⁶⁵ According to FIDH's interviews, at the Central Women's Correctional Institution, pregnant prisoners gave birth at outside hospitals and received postnatal care at the prison clinic.⁶⁶ In addition, there was a special dormitory for inmates with infants in the prison.⁶⁷

⁵⁹ Department of Corrections, *Letter on ensuring professional ethics relevant to the roles of prisons' health professionals*, 9 December 2022, <http://www.correct.go.th/infosaraban65/letter/filepdf/1669963378.pdf> [in Thai]

⁶⁰ Rule 5 of the UN Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders states: "The accommodation of women prisoners shall have facilities and materials required to meet women's special hygiene needs, including sanitary towels provided free of charge and a regular supply of water to be made available for the personal care of children and women, in particular women involved in cooking and those who are pregnant, breastfeeding or menstruating."

⁶¹ Prachatai, *Rung-Sai-Feminist Liberation Front donate sanitary pads and underwear to female prisoners in the Central Women's Correctional Institution*, 26 January 2021; iLaw, "Prison within prison": *The lives of inmates during the third wave of COVID-19*, 27 July 2021

⁶² FIDH, *Interview with a former prisoner at Chiang Mai Women's Correctional Institution*, 22 September 2021

⁶³ FIDH, *Interview with a former prisoner at the Central Women's Correctional Institution*, 25 August 2021

⁶⁴ FIDH, *Interview with a former prisoner at Central Women's Correctional Institution*, 23 November 2023; FIDH, *Interview with a former prisoner at the Central Women's Correctional Institution*, 25 August 2021

⁶⁵ FIDH, *Interview with a former prisoner at the Central Women's Correctional Institution*, 25 August 2021

⁶⁶ FIDH, *Interview with a former prisoner at the Central Women's Correctional Institution*, 29 November 2022; FIDH, *Interview with a former prisoner at the Central Women's Correctional Institution*, 1 December 2022

⁶⁷ FIDH, *Interview with a former prisoner at the Central Women's Correctional Institution*, 29 November 2022; FIDH, *Interview with a former prisoner at the Central Women's Correctional Institution*, 1 December 2022

2.9. Terrible food and unclean drinking water

All interviewed former prisoners raised consistent concerns about food and drinking water in prison. Former prisoners described the prison food as being of terrible quality, consisting of small portions, tasteless, and lacking in variety and nutritional value.⁶⁸

Former prisoners reported that because of the extremely poor quality of food, prisoners preferred to eat food sent from their visiting families, and those with money opted to buy their own meals from the prison shop, which was often overpriced.⁶⁹

In addition, some former prisoners reported not being provided proper and clean plates and cutlery for eating.⁷⁰

Former prisoners reported that inmates got their drinking water for free from steel water tanks in the prison buildings. However, many former prisoners complained that the water provided was unclean and believed it was unsafe for consumption.⁷¹ As a result of the poor quality of water, all former prisoners said that inmates preferred to receive bottled water from visitors or buy it from the prison shop, although not all prisoners could afford it.⁷²

3. Situation in IDCs critical

With regard to IDCs, interviewed former detainees reported the unavailability of timely and adequate physical and mental healthcare. Article 54 of Thailand's Immigration Act implies that detainees must bear the cost of medical care they receive outside of the IDCs.⁷³ One former detainee confirmed that detainees had to bear the costs of treatment received at hospitals outside the IDC.⁷⁴

Specialized treatment, medication, and follow-up care were unavailable, according to all interviewed former detainees.⁷⁵ Dentistry and psychological counseling services were not provided by the authorities. Detainees who were under treatment for pre-existing medical conditions had to interrupt the treatment while they were being detained.⁷⁶ An interviewed former detainee at the Detention Center for Mothers

⁶⁸ FIDH, *Thailand Annual Prison Report 2022 - Chapter 7.5.*, 24 March 2022; FIDH, *Thailand Annual Prison Report 2023 - Chapter 7.5.*, 9 March 2023; FIDH, *Thailand Annual Prison Report 2024 - Chapter 8.5.*, 19 March 2024; Rule 22 of the UN Standard Minimum Rules on the Treatment of Prisoners states: "1. Every prisoner shall be provided by the prison administration at the usual hours with food of nutritional value adequate for health and strength, of wholesome quality and well prepared and served.; 2. Drinking water shall be available to every prisoner whenever he or she needs it."

⁶⁹ FIDH, *Thailand Annual Prison Report 2022 - Chapter 7.5.*, 24 March 2022; FIDH, *Thailand Annual Prison Report 2023 - Chapter 7.5.*, 9 March 2023; FIDH, *Thailand Annual Prison Report 2024 - Chapter 8.5.*, 19 March 2024

⁷⁰ FIDH, *Thailand Annual Prison Report 2022 - Chapter 7.5.*, 24 March 2022; FIDH, *Thailand Annual Prison Report 2023 - Chapter 7.5.*, 9 March 2023

⁷¹ FIDH, *Thailand Annual Prison Report 2022 - Chapter 7.5.*, 24 March 2022; FIDH, *Thailand Annual Prison Report 2023 - Chapter 7.5.*, 9 March 2023; FIDH, *Thailand Annual Prison Report 2024 - Chapter 8.5.*, 19 March 2024

⁷² FIDH, *Thailand Annual Prison Report 2022 - Chapter 7.5.*, 24 March 2022; FIDH, *Thailand Annual Prison Report 2023 - Chapter 7.5.*, 9 March 2023; FIDH, *Thailand Annual Prison Report 2024 - Chapter 8.5.*, 19 March 2024

⁷³ Principle 24 of the Body of Principles for the Protection of All Persons under Any Form of Detention or Imprisonment states that "a proper medical examination shall be offered to a detained or imprisoned person as promptly as possible after his admission to the place of detention or imprisonment, and thereafter medical care and treatment shall be provided whenever necessary. This care and treatment shall be provided free of charge."

⁷⁴ FIDH, *Interview with former detainee at Suan Phlu IDC*, 7 June 2024

⁷⁵ FIDH, *Out of sight - Human rights violations in Thailand's immigration detention centers - Chapter 5.6.*, 29 March 2023

⁷⁶ FIDH, *Out of sight - Human rights violations in Thailand's immigration detention centers - Chapter 5.6.*, 29 March 2023

and Children in Bangkok said that her two female relatives, who were eight and nine months pregnant and were detained in the same facility, did not receive any prenatal care, except for receiving a mattress to sleep on, and were not allowed to be visited by the outside hospital's doctor.⁷⁷

It was not uncommon for detainees to develop serious health conditions or to experience a worsening of pre-existing conditions, including chronic illnesses.⁷⁸

While there had been increasing numbers of IDC detainees with mental health issues,⁷⁹ interviewed former detainees reported a lack of psychiatric services and mental healthcare.⁸⁰

Interviewed former detainees stressed the IDC officers' failure to handle medical emergencies.⁸¹ In some cases, the lack of timely and adequate medical care resulted in the death of detainees. Between 2014 and 2024, there were at least nine documented cases of detainees who died in IDCs as a result of inadequate medical care or the authorities' failure to respond to medical emergencies in a timely manner.⁸² Among them, Abdullah Abduweli, a three-year-old boy, died at a local hospital after suffering from tuberculosis for about two months at Sadao IDC in Songkhla Province.⁸³ In 2023, two Uyghur detainees died from pneumonia and liver failure after being detained at Bangkok's Suan Phlu IDC for more than nine years. Their medical conditions were consistently neglected by the Thai authorities.⁸⁴

Female detainees faced particular challenges to sustain menstrual hygiene due to the lack of privacy while using bathroom and inadequate supply of water and menstrual products. A former detainee at the Detention Center for Mothers and Children reported that she only received four pieces of sanitary pads per month, supplied by NGOs, which were not enough to cover her whole cycle.⁸⁵

In addition, all interviewed former detainees complained about the food, saying it was of poor quality and nutritionally inadequate.⁸⁶ No halal food for Muslim detainees was provided,⁸⁷ but some IDCs may allow outsiders to send halal food to Muslim detainees during Ramadan.⁸⁸

⁷⁷ FIDH, *Out of sight - Human rights violations in Thailand's immigration detention centers - Chapter 5.6.*, 29 March 2023

⁷⁸ OHCHR, *AL THA 2/2024*, 22 February 2024,

<https://spcommreports.ohchr.org/TMResultsBase/DownloadPublicCommunicationFile?gld=28775>

⁷⁹ NHRCT, *NHRCT calls the indefinite detention of Uyghur detainees, which resulted in illnesses and death among them, the human rights violation and calls on actions from relevant authorities*, 26 October 2023, <https://www.nhrc.or.th/th/NHRC-News-and-Important-Events/10375> [in Thai]

⁸⁰ FIDH, *Out of sight - Human rights violations in Thailand's immigration detention centers - Chapter 5.6.*, 29 March 2023

⁸¹ FIDH, *Out of sight - Human rights violations in Thailand's immigration detention centers - Chapter 5.6.*, 29 March 2023

⁸² FIDH and UCL, *Joint submission for the United Nations Committee Against Torture (CAT), 81st session*, 30 September 2024, <https://www.fidh.org/en/region/asia/thailand/thailand-report-on-torture-and-ill-treatment-submitted-to-un-body>

⁸³ Radio Free Asia, *Illnesses, Deaths among Uyghurs Refugees in Thai Detention Centers*, 7 January 2015 [in Thai]

⁸⁴ Al Jazeera, *Uyghur refugee dies after nine years in detention in Thailand*, 27 April 2023

⁸⁵ FIDH, *Out of sight - Human rights violations in Thailand's immigration detention centers - Chapter 5.4.*, 29 March 2023

⁸⁶ FIDH, *Out of sight - Human rights violations in Thailand's immigration detention centers - Chapter 5.5.*, 29 March 2023

⁸⁷ Refugee Rights Network in Thailand, *Joint Submission for the Universal Periodic Review of Thailand - Third Cycle 3*, 15 June 2021

⁸⁸ Refugee Rights Network in Thailand, *Joint Submission for the Universal Periodic Review of Thailand - Third Cycle*, 15 June 2021; NHRCT, *Examination report No.167/2566 on right to life and health regarding the call for investigation of the death of Uyghur detainees who died at the Immigration Detention Center*, 24 October 2023, <https://static.nhrc.or.th/file/content/pdf/31321/167-1725528565.pdf> [in Thai]

According to most of the interviewed former detainees, drinking water was available from a dispenser in the cells.⁸⁹

4. COVID-19 exposes failure to tackle epidemics in prisons and IDCs

The existing failure of the healthcare system in Thailand's prisons and IDCs was further exposed by the spread of COVID-19 in such facilities across the country, particularly during the surge of infections in 2021.

The inadequate response to the outbreak of COVID-19 puts into questions the Thai authorities' ability to comply with their obligations under Article 12.2(c) of the ICESCR, should another epidemic spread to correctional facilities and IDCs. Article 12.2(c) stipulates that state parties to the ICESCR should take the necessary steps for the prevention, treatment, and control of epidemic diseases.

Despite alarms raised by non-governmental organizations at the beginning of the pandemic over the inadequacy of the measures adopted by the government to tackle the spread of COVID-19 in the prison system, including the release of certain categories of prisoners,⁹⁰ more than a year later authorities were caught unprepared by the surge of infections.

The slow and inadequate response to the COVID-19 pandemic in prisons led to the virus spreading to correctional facilities across the country. In many prisons, outbreaks affected a significant part of their populations – in some cases representing up to more than half of the prisoners.⁹¹

Persistent overcrowding made physical distancing practically impossible to enforce.⁹² Cramped and unhygienic living conditions in prisons were major contributing factors for the rapid outbreaks and spread of COVID-19.

The DoC's measures aimed at preventing the spread of the virus did not go far enough to protect the health and wellbeing of prisoners and failed to control the spread of the virus in prisons.⁹³ Despite the DoC's claim that it could "control the situation" and that every prison had "strict measures,"⁹⁴ these measures largely failed to contain the spread of COVID-19 due to the chronic and severe overcrowding and sub-standard conditions in correctional facilities.⁹⁵

Screening and quarantine rules for prisoners were not carried out regularly and systematically for all inmates.⁹⁶ Some former prisoners said they were placed in solitary confinement as part of the isolation measures.⁹⁷

⁸⁹ FIDH, *Out of sight - Human rights violations in Thailand's immigration detention centers - Chapter 5.5.*, 29 March 2023

⁹⁰ FIDH, *Thailand - COVID-19: Release prisoners, ensure the health and safety of all those in detention facilities*, 15 April 2020

⁹¹ Prachatai, *2,835 people infected with Covid-19 inside Bangkok prison complex*, 13 May 2021; Bangkok Post, *Prison sealed off after more Covid cases found*, 19 September 2021

⁹² Inter-Agency Standing Committee, *Interim Guidance on COVID-19: focus on persons deprived of their liberty*, March 2020

⁹³ FIDH, *Thailand Annual Prison Report 2022 - Chapter 3.1.*, 24 March 2022

⁹⁴ Channel News Asia, *COVID-19: Provisional release on the cards for some inmates in Thailand amid overcrowding*, 26 May 2021

⁹⁵ FIDH, *Thailand Annual Prison Report 2022 - Chapter 3.2.*, 24 March 2022

⁹⁶ FIDH, *Thailand Annual Prison Report 2022 - Chapter 3.1.*, 24 March 2022

⁹⁷ iLaw, *Chukiat 'Justin Thailand': The fight for change is a shared responsibility*, 27 January 2022

Access to protective equipment such as face masks and hand sanitizers was seriously inadequate as well, according to most interviewed former prisoners.⁹⁸

Amid the spread of COVID-19 across prisons, some prisoners reported difficulties in having prompt and direct access to doctors and medicines.⁹⁹ Prisoners who tested positive for COVID-19 reported that they were given paracetamol and green chiretta (a local herbal remedy)¹⁰⁰ to treat the symptoms.¹⁰¹

The delayed access to healthcare services and medicine put the health and lives of infected prisoners at heightened risk of suffering the potentially fatal effects of COVID-19.¹⁰²

While elderly prisoners, inmates with underlying medical conditions, or those whose symptoms reached critical levels were transferred to hospitals outside the prison for treatment,¹⁰³ in some cases, prison officials refused to transfer infected prisoners to such facilities.¹⁰⁴

On many occasions, families of infected prisoners were not notified or able to obtain information about their health conditions from the prison authorities.¹⁰⁵ All interviewed former prisoners raised the issue of the lack of accurate, transparent, and timely information on the virus and preventive health measures for detained people.¹⁰⁶ According to former prisoners, inmates were unaware of the seriousness of the disease, the situation of the pandemic outside the prison, and how to effectively protect themselves.¹⁰⁷

Inadequate budgetary allocation may have also contributed to the lack of an effective response to the COVID-19 crisis in prisons. In May 2021, the DoC admitted that the budget allocated for COVID-19 prevention was inadequate, in light of the surge in cases across prisons nationwide.¹⁰⁸

In addition, despite the Justice Minister's proclamation that the administration of vaccines to inmates and correctional officers was a top priority,¹⁰⁹ the COVID-19 vaccination rollout in prisons started late and proceeded at a slow pace.¹¹⁰ Inoculation of the prison population began in late May 2021, about three months after the government began vaccinating others belonging to priority and at-risk categories among the general population.¹¹¹

⁹⁸ FIDH, *Thailand Annual Prison Report 2022 - Chapter 3.1.*, 24 March 2022

⁹⁹ FIDH, *Thailand Annual Prison Report 2022 - Chapter 7.5.*, 24 March 2022

¹⁰⁰ Conversation, *Thailand inmates are taking green chiretta to fight mild COVID – here's what we know about this herbal drug*, 18 October 2021

¹⁰¹ Department of Corrections, *A Year of Quick Wins "365 days towards success of the Department of Corrections"*, 30 December 2021, <http://www.correct.go.th/?p=100789> [in Thai]

¹⁰² FIDH, *Thailand Annual Prison Report 2022 - Chapter 3.2.*, 24 March 2022

¹⁰³ Thai PBS, *71% of inmates in Phitsanulok prison found infected with COVID-19*, 14 December 2021; Thai Lawyers for Human Rights, *A report of Covid-19 situation in the prison, 30 political prisoners are found to have tested positive for Covid-19 amidst shoddy access to treatment*, 27 January 2021

¹⁰⁴ Bangkok Post, *No bail for protest leader 'Penguin' with Covid-19*, 19 August 2021

¹⁰⁵ BBC Thai, *Son of 'Hia Song' recounts his father's delayed release procedures leading to ICU treatment*, 19 May 2021 [in Thai]; Prachatai, *Detained activist's family member denied access to medical information*, 2 September 2021

¹⁰⁶ FIDH, *Thailand Annual Prison Report 2022 - Chapter 3.2.*, 24 March 2022

¹⁰⁷ FIDH, *Thailand Annual Prison Report 2022 - Chapter 3.2.*, 24 March 2022

¹⁰⁸ FIDH, *Thailand Annual Prison Report 2022 - Chapter 3.3.*, 24 March 2022

¹⁰⁹ Bangkok Post, *Govt considers releasing 50,000 inmates as Covid hits prisons*, 18 May 2021; Channel News Asia, *COVID-19: Provisional release on the cards for some inmates in Thailand amid overcrowding*, 26 May 2021

¹¹⁰ Bangkok Post, *Govt considers releasing 50,000 inmates as Covid hits prisons*, 18 May 2021

¹¹¹ FIDH, *Thailand Annual Prison Report 2022 - Chapter 3.4.*, 24 March 2022

Prisoners' contact with family members were extremely limited, following the suspension of in-person visits that was imposed nationwide from March 2020 in an attempt to tackle the spread of COVID-19. On 10 May 2022, the DoC announced the resumption of in-person family visits on an appointment basis, citing the improving COVID-19 situation and effective infection prevention and control measures in prisons.¹¹² As a result of the prolonged imposition of COVID-19 measures, prisoners were subject to increased isolation, less social contact, and fewer purposeful activities.¹¹³ Extended periods of limited contact with the outside world during the COVID-19 pandemic seriously affected inmates' mental wellbeing and exacerbated their existing vulnerability to emotional and psychological stress.¹¹⁴ Former prisoners also reported that the lack of social contact and activity as well as the uncertainty and inconsistency of the COVID-19 measures contributed to the deteriorating mental health of inmates.¹¹⁵ The suspension of in-person visits also affected prisoners' access to basic necessities, for which many relied on their family members.¹¹⁶

IDCs, like other places of detention in Thailand, were not spared by severe outbreaks of COVID-19, and immigration authorities failed to take adequate measures to prevent the spread of infection in such facilities.¹¹⁷ Authorities continued to detain unauthorized immigrants and failed to adopt non-custodial alternatives to detention.¹¹⁸ Only detainees with serious medical conditions and migrant children and their mothers were able to obtain a release on bail.¹¹⁹

5. Recommendations

FIDH calls on the UN Special Rapporteur on the right to health to urge the Thai government to:

- Address and resolve the issue of overcrowding in prisons and IDCs by implementing sustainable and effective measures to reduce their population.
- Improve conditions in prisons and IDCs to be in line with the UN Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules) and the UN Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (the Bangkok Rules).
- Ensure conditions in prisons and IDCs comply with Thailand's obligations under international human rights treaties to which it is a state party, including ICCPR, ICESCR, and CEDAW.
- Allow independent inspection bodies, including the NHRCT, unfettered access to all prisons and IDCs.
- Allow non-governmental organizations with a relevant mandate to conduct visits to prisons and IDCs, interview inmates, and assess conditions without undue hindrance.
- Ensure that staff in all prisons and IDCs receive adequate training on international standards, notably the Nelson Mandela Rules and the Bangkok Rules.
- Extend an invitation for a country visit to relevant special procedures of the UN Human Rights Council, including: the Special Rapporteur on Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment; the Working Group on Arbitrary Detention (WGAD); the Special Rapporteur on the right to food; the Special Rapporteur on the human rights to safe drinking water and sanitation; the Special

¹¹² Department of Corrections, *Daily report of COVID-19 situation: normal family visits resumed, except for prisons with outbreaks, as over 92.14 % of prisoners are fully vaccinated*, 18 May 2022, <http://www.correct.go.th/?p=103986> [in Thai]

¹¹³ FIDH, *Thailand Annual Prison Report 2022 - Chapter 7.7.*, 24 March 2022

¹¹⁴ FIDH, *Thailand Annual Prison Report 2022 - Chapter 7.7.*, 24 March 2022

¹¹⁵ FIDH, *Thailand Annual Prison Report 2022 - Chapter 3.2.*, 24 March 2022

¹¹⁶ FIDH, *Thailand Annual Prison Report 2022 - Chapters 7.3. and 7.7.*, 24 March 2022

¹¹⁷ FIDH, *Out of sight - Human rights violations in Thailand's immigration detention centers - Chapter 5.6.*, 29 March 2023

¹¹⁸ International Detention Coalition, *Covid-19 Impacts on Immigration Detention Global Responses*, 2020

¹¹⁹ International Detention Coalition, *Covid-19 Impacts on Immigration Detention Global Responses*, 2020

Rapporteur on the right to adequate housing; the Independent Expert on sexual orientation and gender identity; the Independent Expert on the enjoyment of all human rights by older persons; and the Special Rapporteur on the rights of persons with disabilities.

- Ensure cells in prisons and IDCs have sufficient natural light, adequate ventilation supplied by fresh air, and cooling systems.
- Ensure prisoners and detainees are provided with clean and sufficient bedding suitable for the climate.
- Ensure the health and the psychological needs of prisoners and detainees with physical and mental disabilities are addressed and met.
- Ensure female prisoners and detainees are provided with the necessary items to meet their specific hygiene needs, particularly an adequate provision of sanitary pads that are of decent quality and free of charge.
- Improve the overall quality and nutritional value of food served to prisoners and detainees.
- Ensure that food is provided to all prisoners and detainees in accordance with their medical needs and religious and cultural principles.
- Ensure prisoners and detainees are provided with clean eating utensils that are similar to those used outside prisons and IDCs.
- Ensure clean drinking water in prisons and IDCs is available from a tap or a container continuously 24 hours a day.
- Conduct regular inspections to prisons and IDCs with the assistance of physicians or competent public health officials to examine and address issues that may impact the health of prisoners and detainees, including: the quantity, quality, preparation and service of food; the hygiene and cleanliness of the facility and the prisoners and detainees; and the sanitation, temperature, lighting, ventilation, and bedding arrangements of the facilities.
- Ensure that prisoners and detainees have immediate access to medical attention in urgent cases, and that prisoners and detainees who require specialized treatment are transferred to institutions or hospitals outside prisons.
- Ensure the provision of adequate specialized medical services, including dental, psychological, and psychiatric care, for prisoners and detainees.
- Ensure that the provision of mental healthcare entails the treatment of mental illness, the promotion of mental well-being of prisoners and detainees, and the prevention of violence, self-harm, and suicide.
- Establish an effective and urgent medical care system to prevent, treat, and control epidemic diseases in prisons and IDCs.