Burma’s Prisons and Labour Camps: Silent Killing Fields

Summary

In October 2008, reports emerged from Burma that the military junta had ordered its courts to expedite the trials of political activists. Since then, 357 activists have been handed down harsh punishments, including sentences of up to 104 years. Shortly after sentencing, the regime began to systematically transfer political prisoners to prisons all around Burma, far from their families. This has a serious detrimental impact on both their physical and mental health. Medical supplies in prisons are wholly inadequate, and often only obtained through bribes to prison officials. It is left to the families to provide medicines, but prison transfers make it very difficult for them to visit their loved ones in jail. Prison transfers are also another form of psychological torture by the regime, aimed at both the prisoners and their families. Since November 2008, at least 228 political prisoners have been transferred to jails away from their families. The long-term consequences for the health of political prisoners recently transferred will be very serious.

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1 AAPP, 30 April 2009.
2 AAPP, 30 April 2009.
At least 127 political prisoners are currently in poor health. At least 19 of them are in urgent need of proper medical treatment. Political prisoners’ right to healthcare is systematically denied by the regime. Burma’s healthcare system in prisons is completely inadequate, especially in jails in remote areas. There are 44 prisons across Burma, and at least 50 labour camps. Some of them do not have a prison hospital, and at least 12 of the prisons do not even have a prison doctor.

The regime’s treatment of political prisoners directly contravenes the 1957 UN standard minimum rules for the treatment of prisoners. The International Committee of the Red Cross (ICRC) carried out its last prison visit in Burma in November 2005. In January 2006 the ICRC suspended prison visits in the country, as it was not allowed to fulfil its independent, impartial mandate.

Since 1988 at least 139 political prisoners have died in detention, as a direct result of severe torture, denial of medical treatment, and inadequate medical care. Many, like Htay Lwin Oo, were suffering from curable diseases such as tuberculosis. He died in Mandalay Prison in December 2008. He had been due for release in December this year.

1. Political Prisoners In Poor Health

There are currently at least 127 political prisoners known to be in poor health.

The health of the following political prisoners is of particular concern. They are in urgent need of proper ongoing medical treatment. Many of them are being held in remote prisons, far from their families.

Case: Aung San Suu Kyi, leader of the National League for Democracy and 1991 Nobel Peace Prize winner, held under house arrest for 13 of the past 19 years.

On Friday 8 May 2009 Aung San Suu Kyi was placed on a drip by her doctor’s assistant because she has low blood pressure, and is dehydrated and unable to eat. The authorities have so far refused to allow the assistant access to her home for follow-up treatment. On Thursday 7 May, her family doctor Tin Myo Win had been denied permission to enter the house after waiting several hours to carry out a regular medical check-up. He was arrested later that evening, and his whereabouts are currently unknown.

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3 The number of active labour camps fluctuates according to the regime’s current infrastructure projects, which prisoners held in labour camps are forced to work on without compensation.
4 AAPP, 30 April 2009.
5 AAPP, 30 April 2009.
6 The Irrawaddy, 9 May 2009.
Case: Min Ko Naing, leader of the 88 Generation Students group and former political prisoner. Currently held in Kengtung Prison, Shan State

Min Ko Naing suffers from a deteriorating eye condition, high blood pressure and numbness in his hands. He is currently held in solitary confinement and is not allowed to exercise. He is suffering from a medical condition which means he is unable to sweat, and is in pain. There is no regular doctor in the prison.7

Case: Htay Kywe, leader of the 88 Generation Students group and former political prisoner. Currently held in Buthidaung Prison, Arakan State

Htay Kywe has been tortured in Buthidaung Prison. He has also been denied food and the right to exercise. He has not been allowed to bathe regularly and has developed scabies as a result. He suffers from high blood pressure. He is currently held in solitary confinement. There is no doctor at the prison, which is over 700 miles from his family in Rangoon.8

Case: Hla Myo Naung, leading member of the 88 Generation Students group and former political prisoner. Currently held in Myitkyina Prison, Kachin State

Hla Myo Naung is already blind in one eye. He is now experiencing similar symptoms in his good eye to those he experienced before he lost the sight in his other eye, and is at serious risk of going blind. He urgently needs specialist treatment. Myitkyina Prison is over 900 miles from Rangoon where his family lives, and there is no prison doctor there.9

Case: Ko Ko Gyi, leader of the 88 Generation Students group and former political prisoner. Currently held in Monghsat Prison, Shan State

Ko Ko Gyi has recently been suffering from a weak digestive system. In the past he has also suffered from liver stones and hepatitis B. After he was released in 2005, he received some treatment for his liver problems.10

7 AAPP, April 2009.
8 AAPP, 30 April 2009.
9 AAPP, 30 April 2009.
10 This is a very isolated prison in North-eastern Burma, also in an active conflict zone.
11 AAPP, 30 April 2009.
Case: Su Su Nway, National League for Democracy youth member, labour activist and former political prisoner. Currently held in Kale Prison, Sagaing Division

Su Su Nway suffers from a congenital heart condition. She was recently admitted to the general hospital in Kale. She has now been transferred back to prison. She is very weak and is unable to walk unaided. In the past, Su Su Nway has been moved to solitary confinement as a punishment for asking prison authorities for better medical care. There is no prison doctor in the prison, which is 680 miles from Rangoon.12

Case: Win Mya Mya, National League for Democracy Division Organiser. Currently held in Puta-O Prison, Northern Kachin State

Win Mya Mya suffers from low blood pressure. She also has a nerve condition, caused by injuries she sustained during the May 2003 Depayin massacre. There is no doctor in Puta-O Prison, which is over 500 miles from Mandalay, her home town.13

Case: Pyae Phyo Hlaing, student activist, currently held in Buthidaung Prison in Arakan State

Pyae Phyo Hlaing is currently unable to eat, because of stomach pain. There is no doctor at Buthidaung prison, which is over 700 miles from Rangoon.14

Case: Thu Rein Aung, labour activist, currently held in Kyaukpyu Prison in Arakan State

Thu Rein Aung is suffering from an eye condition, and has recently lost a lot of weight due to a gastric problem.15

12 AAPP, April 2009.  
13 AAPP, April 2009.  
14 AAPP, April 2009.  
15 AAPP, April 2009.
Case: Wai Lin, labour activist, currently held in Myitkyina Prison in Kachin State.

Wai Lin is suffering from tuberculosis and his health is rapidly deteriorating. There is no prison doctor at the prison, which is over 900 miles from Rangoon.\(^{16}\)

Case: Tun Tun Oo, National League for Democracy youth member, member of the Human Rights Defenders and Promoters Network, currently held in Meiktila Prison, Mandalay Division

Tun Tun Oo is currently experiencing pain in his body, due to muscular tension. The prison is over 300 miles from Rangoon, where his family live.\(^{17}\)

Case: Myint Naing, member of the Human Rights Defenders and Promoters Network, currently held in Kale Prison in Sagaing Division.

Myint Naing is suffering from a hernia and persistent headaches. There is no doctor at the prison, which is 680 miles from Rangoon.\(^{18}\)

Case: Aung Thu, member of the 88 Generation Students group and former political prisoner. Currently held in Puta-O Prison, Northern Kachin State.

The muscles in one of Aung Thu’s legs have seized, and he cannot stand up or move properly. His tongue is retracted, and he is showing signs of nerve damage, which could lead to paralysis. He has not received the specialist medical treatment he needs.\(^{19}\)

\(^{16}\) AAPP, April 2009.  
\(^{17}\) AAPP, April 2009.  
\(^{18}\) AAPP, April 2009.  
Case: Myo Yan Naung Thein, member of the 88 Generation Students group and a former political prisoner. Currently held in Thandwe Prison, Arakan State

He was badly tortured under interrogation following his arrest in December 2007. He is now suffering from paralysis and cannot walk unaided. He has not received proper medical treatment, and is currently held in Thandwe Prison in Arakan State, where there are no neural medical specialists.20

Case: U Thura aka Zarganar, comedian, film-maker, and former political prisoner. Currently held in Myitkyina Prison, Northern Kachin State, over 900 miles from Rangoon

Zarganar has been suffering from liver problems, spondylitis [inflammation of a vertebra], hypertension and heart disease. After losing consciousness for several hours on 16 April, he was finally allowed hospital treatment eleven days later on 27 April. According to ECG test results, his heart is swelling. He needs proper ongoing medical care.21

Case: Than Naing, National League for Democracy Youth member, currently held in Maubin Prison.

Than Naing has HIV and requires proper ongoing medical treatment.22

Case: Kyaw Kyaw Thant, Weekly Eleven journal editor and Cyclone Nargis volunteer, currently held in Insein Prison.

Kyaw Kyaw Thant is currently in poor health, and has been denied adequate treatment. In March this year he reported having breathing difficulties, after being kept in a small cell and denied regular exercise, according to family members. On 24 April 2009 he reported experiencing chest pains, but his family have not been given permission to take him to a specialist.23

21 AAPP, 30 April 2009. Mizzima 28 April 2009
Case: U Than Lwin, National League for Democracy MP, currently held in Loikaw Prison, Kayah State.

U Than Lwin is over 70 years old and suffers from cataracts. He is blind in one eye and needs ongoing medical treatment.\(^\text{24}\)

Case: Khun Tun Oo, Shan National League for Democracy MP, currently held in Puta-O Prison, Northern Kachin State.

66 year-old Khun Tun Oo is suffering from hypertension and his diabetes is getting worse. He has not received proper treatment since his arrest and imprisonment in 2005.\(^\text{25}\)

The main health problems experienced by political prisoners are:

- **Dysentery** – bacterial or viral infection, from unhygienic conditions and overcrowding
- **Scabies** – from unhygienic conditions
- **Cholera** – from contaminated water
- **Malaria** – no mosquito nets, no medication
- **Piles / Haemorrhoids** – cold hard surfaces
- **Anaemia** – lack of nutrients
- **Hypertension** – sometimes stress-induced
- **Heart disease** – sometimes stress-induced
- **Stroke** – sometimes stress-induced
- **Paralysis** – from injuries received during torture
- **Eye problems** – prolonged periods in poorly lit, damp conditions
- **Tuberculosis** – damp, bad ventilation and over-crowding\(^\text{26}\)

\(^{26}\) The Darkness We See: Torture in Burma’s Interrogation Centres and Prisons, AAPP 2006.
2. Prison transfers

One of the major concerns for Burma’s political prisoners right now is the impact of prison transfers. The medium to long-term effect of prison transfers on political prisoners’ health is likely to be very serious, and may directly result in more deaths in prisons.

Since October 2008, at least 228 political prisoners have been transferred to remote jails, far from their families. Prison transfers have a direct impact on healthcare for prisoners. Within the prison system, there is no reliable way for political prisoners to obtain the correct medicines they need from prison authorities. Medical supplies are wholly inadequate, and often only obtained through bribes to prison officials.

Families are therefore the main provider of medicines and food, and when a prisoner is transferred to a remote area it is very difficult for the family to provide medicine when it is needed. Pro-democracy activists are usually the main breadwinners for their families, so when they are arrested, the family’s income is drastically reduced.

Travel and accommodation costs for prison visits are often prohibitive. In many cases, prisons are hundreds of miles from the political prisoner’s hometown, and the infrastructure and public transport system are poor.27

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27 Only close family members in possession of their ‘family registration’ document provided by local authorities are allowed to visit political prisoners in prison. This document is an official record of family members resident at the same address. This means that others – for example friends or extended family members based in the areas closer to the prison - are not allowed to visit.
Case: Shwe Maung, National League for Democracy member. Currently held in Pyapon Prison, Irrawaddy Division.

"I gave him some medicines, but we are living in constant fear for his health. When he was in Insein jail, I was able to see him once a month. Now I can't even do it one in two months." Than Than Win, Shwe Maung’s wife. He is suffering from gastric illness.\(^{28}\)

In addition, in January 2009 many family members reported that there was a ban on visits to political prisoners for the whole month. In some cases family members were only informed of the ban after they had travelled hundreds of miles to see their loved ones. This increases the suffering for political prisoners and their families, and also impacts on healthcare. This type of ban is another form of punishment for prisoners and their families.

Case: Nilar Thein, leading member of 88 Generation Students group and former political prisoner. Currently held in Thayet Prison, Magwe Division, 340 miles from Rangoon.

"We could not meet her for nearly two months and don't know about her health condition. Now we are worried about her health after hearing she is vomiting almost daily. She is said to have a peptic ulcer and is being kept in solitary confinement.” Mother-in-law of Nilar Thein.\(^{29}\)

Case: Thin Thin Aye aka Mie Mie, leading member of 88 Generation Students group and a former political prisoner. Currently held in Bassein Prison, Irrawaddy Division, 140 miles from Rangoon.

“I wanted to see her and ask her about her health situation face to face. The prison authorities said she is in good health. But I’m really worried because she has been suffering from gout. Anyway, I will keep coming back to visit her with my daughter, even if they say they won’t allow visits.” Hla Moe, Mie Mie’s husband.\(^{30}\)

\(^{28}\) Democratic Voice of Burma, 4 March 2009.
\(^{29}\) Mizzima, 20 January 2009
\(^{30}\) Democratic Voice of Burma, 18 January 2009.
Case: U Thura aka Zarganar, comedian, film-maker, and former political prisoner. Currently held in Myitkyina Prison, Northern Kachin State, over 900 miles from Rangoon

"Myitkyina prison jailor U Hla Shwe had promised me that I could see Ko Zargana one day before my departure from Rangoon. But he didn't let me meet him when I arrived there. I requested them to let me meet him but they refused. So I did not leave the food parcels and other packages that I brought from Rangoon with the jailors as I was not certain it would reach Ko Zargana," Ma Nyein, Zarganar’s sister-in-law. Zarganar has been suffering from liver problems, spondilytis, hypertension and heart disease.31

High-profile political prisoners are more likely to be sent to the most remote prisons, where the weather is harsh. In some cases the weather is very cold for long periods. Prisoners are then more susceptible to illness.

In other cases the weather is very hot and humid, and mosquitoes are prevalent. No measures are taken to prevent malaria spreading through mosquito bites. Political prisoners are not allowed mosquito coils or mosquito nets, nor are they given any preventative medicine. Thus, they easily contract malaria. The rainy season is fast approaching and malaria is a major health concern for many of Burma’s political prisoners.

Malaria, HIV and tuberculosis (including drug-resistant strains of TB) are all prevalent in Burma. Prison populations are particularly vulnerable to these three diseases, due to overcrowding and lack of adequate medical care.

According to the World Health Organisation, morbidity rates for malaria in Burma are highest in Arakan, Kachin, Karen, and Kayah states, and Sagaing and Tenasserim Divisions.32 All are border areas in Burma. During the recent prison transfers, high-profile political prisoners have been moved to prisons in these areas.

31 Mizzima, 8 April 2009, and AAPP 30 April 2009.
32 World Health Organisation, Regional Office for South East Asia. Figures from 2006
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<th>No. of political prisoners held there</th>
<th>High-profile political prisoners held there</th>
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| Khamti      | Sagaing Division        | At least 15                           | U Gambira, leader of the All Burma Monks’ Alliance  
De Nyein Lin, leader of the All Burma Federation of Student Unions  
General Soe Ten, Chairman of the Shan State Peace Council  
Htin Kyaw, solo protestor and founder of the Myanmar Development Committee |
| Kale        | Sagaing Division        | At least 44                           | U Ohn Than, solo protestor  
Su Su Nway, labour activist |
| Buthidaung  | Arakan State            | At least 25                           | Htay Kywe, leader of the 88 Generation Students group  
Sithu Maung, leader of the All Burma Federation of Student Unions |
| Kyaukpyu    | Arakan State            | At least 17                           | Sai Hla Aung, Shan National League for Democracy |
| Sittwe      | Arakan State            | At least 31                           | Than Tin aka Kyi Than, 88 Generation Students group member  
Thu Rein Aung, labour activist |
| Kawthaung    | Tenasserim Division     | At least 14                           | Htay Win Aung aka Pyone Cho, 88 Generation Students leader  
Kyaw Kyaw aka Zayar Thaw, rapper and leader of Generation Wave |
| Tavoy       | Tenasserim Division     | At least 8                            | Zaya aka Kalama, 88 Generation Students group |
| Mergui      | Tenasserim Division     | At least 17                           | Kyaw Kyaw Htwe aka Marky, 88 Generation Students group |
| Puta-O      | Northern Kachin State   | At least 12                           | Khun Tun Oo, elected MP from the Shan National League for Democracy |
In the past, political prisoners have died as a direct result of being moved to a prison with high rates of malaria infection, and subsequently being denied adequate treatment.

Case: Thet Win Aung, leading member of the Basic Education Students’ Union, who died in Mandalay Prison in October 2006

Thet Win Aung was sentenced to a total of 60 years. He was very badly tortured under interrogation. He was first held in Kale Prison, Sagaing Division, where he took part in a hunger strike calling for political prisoners’ rights. He was then transferred to Khamti prison, where he contracted cerebral malaria. He was denied medical treatment for a long time. Eventually, he was transferred to Mandalay Prison for treatment, but it was too late. He died there in October 2006.34

Prisoner transfers are decided by three groups of people; the Judiciary, Ministry of Home Affairs and Prisons Department. Doctors or medics will have little or no say in the decision to move a prisoner. Therefore a prisoner may be moved while they are very ill or in the middle of treatment.

Prisoners may be transferred to prisons where there is no healthcare, or transferred when they have been given permission to have medical treatment. Thus prison transfers are also used as a way to stop political prisoners getting the medical treatment they need.

Case: Hla Myo Naung, leading member of the 88 Generation Students group and former political prisoner. Currently held in Myitkyina Prison, Kachin State

Hla Myo Naung has been blind in one eye since October 2007. He is currently experiencing similar symptoms in his good eye to those he experienced before he lost the sight in his other eye, and

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<td>Hla Myo Naung, 88 Generation Students group</td>
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33 All figures from AAPP, 30 April 2009
34 AAPP, October 2006.
is at serious risk of going blind. He urgently needs specialist treatment, but he is in Myitkyina Prison, over 900 miles from Rangoon where his family lives, and there is no prison doctor there. "The people there don’t know much. Even in Rangoon there are only two eye specialists who can treat this kind of ailment. There are no proper medical instruments there [in prison] either. They just looked at his eye and prescribed eye drops,” Aye Aye Mar, Hla Myo Naung’s wife.\(^{35}\)

In remote areas, prisons are less likely to have a hospital ward or a doctor in regular attendance.

**Case: Min Ko Naing, leader of the 88 Generation Students group and former political prisoner. Currently held in solitary confinement, Kengtung Prison, Shan State.**

“I am mainly concerned that he might have a stroke due to the high blood pressure. I left with him some medicines. It would be better if there is a regular doctor at the prison.” Kyi Kyi Nyunt, Min Ko Naing’s sister. She was allowed only 20 minutes to talk with her brother, having travelled hundreds of miles from Rangoon to reach Kengtung in eastern Burma.\(^{36}\)

**Case: Thein Than Tun, member of the 88 Generation Students group. Currently held in Thandwe Prison, Arakan State.**

“I am worried about his health because there are no medics or doctors in Thandwe prison in Arakan State. It is very difficult to get here because the roads are so bad.” Wife of Thein Than Tun.\(^{37}\)

2.1. **Current Situation in Myitkyina Prison, Kachin State** (over 900 miles from Rangoon)

There are currently at least 26 political prisoners held in Myitkyina Prison, one of the most remote prisons in Burma. 13 of them are unable to receive visits from family members, due to the prohibitive costs and distances involved.\(^{38}\) A round trip from Rangoon to Myitkyina costs approximately 48,000 kyats ($48) per person. This does not

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36 Democratic Voice of Burma, 4 March 2009.
37 Radio Free Asia, 19 February 2009
38 AAPP, February 2009.
include accommodation, food or local transportation costs. In many cases this exceeds a family’s monthly income, as the average worker in Burma earns a little over a $1 a day.

There are serious concerns for the health and well-being of those 13 political prisoners. As they are unable to receive family visits, they will not get supplementary food or medicines. And their mental health is likely to suffer due to the lack of contact and moral support from their families.

2.2. Current Situation in Puta-O Prison, Northern Kachin State (over 1,100 miles from Rangoon)

There are currently at least 12 political prisoners in Puta-O Prison, one of the most remote prisons in Burma. 11 of them are unable to receive family visits; there are serious concerns for their health and well-being. A round trip by public transport to Puta-O Prison can take up to 14 days, due to the poor infrastructure. It is extremely difficult for family members to visit.

Case: Aung Thu, member of the 88 Generation Students group and former political prisoner. Currently held in Puta-O Prison, Northern Kachin State.

The muscles in one of Aung Thu’s legs have seized, and he cannot stand up or move properly. One of the reasons for his condition is that during his prison transfer, he was held in iron shackles. “His tongue is retracted, his nerves are damaged, and his leg muscles are wasting away. I’m really worried that these are all symptoms leading to paralysis. A doctor visits him every two weeks, but there is no specialist there. I worry that the doctor will not understand his symptoms, and misdiagnose him.” Myat Myat Tun, Aung Thu’s wife.

3. Brutal torture at interrogation centres and prisons

Torture is state policy in Burma, and common practice at interrogation centres and prisons. Common forms of torture include sleep deprivation, beatings and stress positions. Prisoner punishments - such as solitary confinement and placing prisoners in punishment cells - exacerbate existing injuries and creates additional health problems. Solitary confinement cells are worse than a regular cell. They are smaller in size and the prisoner is placed in shackles. They must sleep on a cold concrete floor without any blanket or mat, which can lead to tuberculosis, and makes existing injuries more painful.

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39 AAPP, February 2009.
40 Source: AAPP, February 2009.
Prisoners are not allowed to shower and the small pots used as toilets are not emptied, as a result excrement remains uncovered and gives rise to maggots and a foul stench.

Many 88 Generation Students group members currently in prison are former political prisoners who have already spent long periods in solitary confinement. Some of them are being held in solitary confinement now, along with monk leader U Gambira.

When political activists are first detained, they are often subjected to brutal torture during the interrogation period that can result in their death or leave them with permanent injuries. After they have been tortured they are denied medical assistance and treatment for the injuries they have received.

Case: Myo Yan Naung Thein, member of the 88 Generation Students group and a former political prisoner. Currently held in Thandwe Prison, Arakan State

He was badly tortured under interrogation following his arrest in December 2007. He is now suffering from paralysis and cannot walk unaided. He has not received proper medical treatment, and is currently held in Thandwe Prison in Arakan State, where there are no neural medical specialists.42

Torture often continues in prison. Sometimes after a prisoner has been tortured the authorities try to hide the injuries by denying family visits.

Case: Aung Kyaw Oo, National League for Democracy member. Currently held in Puta-O Prison, Northern Kachin State

He was beaten by five wardens, the prison chief and the prison administrator. His wife went to visit but was unable to see him. "When I went to the prison on 3 January, the prison authorities did not allow me to see him as he was in bad shape. His face was black and blue and he had some minor damage to his ribs. The prison officials told me to come back on 13 [January]".43

Many injuries sustained as a result of torture then become permanent and political prisoners carry the injuries their whole life.

43 Democratic Voice of Burma, 8 January 2009.
Case: Aung Kyaw Oo, former political prisoner, held in Insein & Tharawaddy Prisons from 1991 – 2005

“When I was in Insein Prison, I wanted to stand up for prisoners’ rights. I defied the prison jailer’s orders to do ‘poun-zan’ [assume a stress position with the head bowed down] in front of the jailer and prison authorities. The jailer beat me. I saw about ten other guards watching what was happening. Then the jailer put iron shackles on my feet and placed a hood over my head. After that I don’t know how many guards beat me. The next day the jailer and guards tried to make me do poun-zan again. I refused, and the same thing happened again. After those beatings, my left ear was bleeding. Now I cannot hear properly in that ear.”

4. Long-term imprisonment and prolonged detention

Prolonged detention means that a political prisoner’s health deteriorates over time and s/he becomes more and more susceptible to illness. In Burma’s prisons, a long jail term sentence is like a drawn out death sentence. The combination of torture, harsh prison conditions, lack of healthcare, and poor hygiene has a severely detrimental impact on the physical and mental health of the prisoner. This increases the likelihood that a prisoner will contract a serious illness such as tuberculosis or malaria, from which they will be unable to recover or suffer from permanent health problems.

Of the activists sentenced since October last year, over 30% were handed down sentences of 10 years or more. Twenty-three members of the 88 Generation Students group were sentenced to at least 65 years in prison. Of those twenty-three members, twenty of them have already spent time in prison due to their political activism. There are serious concerns for the health of at least four of them, Min Ko Naing, Htay Kywe, Hla Myo Naung, and Ko Ko Gyi. All suffer from chronic health problems caused by prolonged periods in detention.

Case: Htay Aung, former political prisoner, held in Insein & Bassein Prisons from 1996 – 2002

“I contracted tuberculosis in Bassein Prison. At the time I couldn’t tell the prison guards about my condition, because I had already lost my voice after several years of exposure to the cold concrete floor I slept on. So, I coughed up enough blood to fill a small cup. When the superintendent came around for his weekly..."
inspection I showed him. They just transferred me to the leprosy ward. I didn’t get any proper treatment from the authorities. My mother visited me in prison every two weeks, and brought me tuberculosis medicine. If she hadn’t done that, I don’t think I would be alive today.”

Prison authorities and/or military intelligence often keep political prisoners in jail beyond the date they should have been released, even if they are in poor health. This can cause severe mental suffering. There have been cases where political prisoners have been kept in prison after completing their original sentence and denied medical treatment, and have died as a result.

**Case: National League for Democracy Minhla Branch Chairperson Aung May Thu, who died in Tharawaddy Prison in September 2002**

Although Aung May Thu completed his 10 year prison term in November 1999, he continued to be detained under Section 10(A) of the State Protection Law. He suffered from a persistent fever for two weeks in September 2002, and was eventually hospitalized in Tharawaddy Prison. He died two days later.

Currently, at least 19 political prisoners are known to be held in labour camps. Imprisonment in labour camps is tantamount to a death sentence. Conditions in labour camps are particularly harsh. Prisoners are forced to do heavy work and given very little food.

**5. Denial of medical treatment**

When high profile political prisoners are imprisoned, Burmese Intelligence (Military Intelligence, Special Branch Police, the Office of Military Affairs Security (OMAS)) will receive daily reports from prison authorities. The reports include health concerns. Thus, if the prisoner requests medical help the Intelligence personnel will be informed. Ultimately the Intelligence personnel will decide if the political prisoner can receive medical care.

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49 AAPP, April 2009. In October 1990, many monks participated in the boycott, pattam nikkujana kamma or “overturning the bowl”, refusing to accept alms from members of the armed forces and their families. As punishment some were transferred to labour camps, and 19 monks died there.
Case: Kyaw Kyaw Thant, Weekly Eleven journal editor and Cyclone Nargis volunteer, currently held in Insein Prison.

Kyaw Kyaw Thant is currently in poor health, and has been denied adequate treatment. In March this year he reported having breathing difficulties, after being kept in a small cell and denied regular exercise, according to family members. On 24 April 2009 he reported experiencing chest pains, but his family have not been given permission to take him to a specialist.50

Military Intelligence have denied requests for medical care to seriously unwell prisoners, made by prison doctors or prison authorities. As a result, political prisoners have died.


He suffered from hypertension, heart disease, malaria, urinary tract problems, and haemorrhoids. He and his family repeatedly requested the prison authorities, the International Committee of the Red Cross, and intelligence personnel to allow for treatment in a township hospital. The prison Chief Warden also reported his case to the Prison Department five times. The prison doctor recommended that he needed to have proper treatment. However, he was not allowed to go to the hospital.51

6. Inadequate medical care

There are 44 prisons across Burma, and at least 50 labour camps. Some of them do not have a prison hospital, and at least 12 of the prisons do not even have a prison doctor.52

Even the prisons which have a hospital have an insufficient number of skilled medical staff in relation to the number of prisoners. For example, Insein prison holds up to 10,000 prisoners, yet there are a maximum of three doctors to look after many prisoners with serious health problems.53

52 AAPP, 30 April 2009
53 AAPP, 30 April 2009
In some cases, instead of qualified medical doctors, the prisons have medical “staff”. But they have had minimal training. A former political prisoner related the situation in Shwebo prison.

“There is no hospital in Shwebo prison, Sagaing division. There are only three medics who had medical training for just three months. When prisoners need hospital treatment, they are transferred to Shwebo Township hospital, but only if they have money to pay for treatment. The worst thing is that there is no guard ward in the hospital. The police aren’t able to take care of security for prisoners, so instead prisoners have to be handcuffed to their bed by the hand and/or legs until they left hospital.”

Prisons with no hospital will also use criminal prisoners trained by medics, or political prisoners with limited medical knowledge. They do not have sufficient training to properly diagnose illness.

**Case: Kay Thi Aung, student activist, currently held in Tavoy Prison, Tenasserim Division**

In January 2009, 23 year-old Kay Thi Aung suffered a miscarriage in prison, due to lack of adequate medical care. She was pregnant at the time of her arrest in September 2008. In March 2009 she was transferred to Tavoy Prison in Tenasserim Division, almost 400 miles from her family in Rangoon.

**Case: Than Naing, National League for Democracy Youth member, currently held in Maubin Prison, Irrawaddy Division.**

In December 2008, his wife reported that Than Naing has HIV and his health is deteriorating. She stated that prison authorities haven’t given him proper treatment.

Prison hospitals have very limited supplies of medicine. Even when proper medication is provided, it is rarely provided in sufficient amounts. Medications have a set dosage that must be taken for a certain number of days in order to have any effect. Frequently,

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54 Former political prisoner released from Shwebo Prison in June 2007. AAPP interview conducted December 2008.
prisoners will have their receipt of medications ended far short of the required time, leaving the condition unimproved.

Before January 2006, when the International Committee of the Red Cross was still able to visit prisons in Burma, it donated medicine in an effort to improve prison conditions. However ICRC donated medicine was confiscated by prison authorities and sold back to the prisoners.

“The ICRC visited Mandalay prison three times while I was there. During these times, conditions did improve to a certain extent. However, we found out that though the ICRC had donated much medicine to the prisons, the authorities kept it to themselves to sell, while giving the prisoners poorer quality medicine.”

“Though the ICRC provided the prisons with the appropriate medicine, all these medicines were kept by the authorities and then sold. Prisoners had to pay for the medicines they received, or rely on families for the proper medicine.”

7. Poor nutrition

Prison officials do not comply with the regime’s own jail manual regulations on ‘daily allowances of articles of diet, per head, for the various classes of C class prisoners’ (C class prisoners are the lowest class of prisoner). According to prisoner testimonies political prisoners receive very low quality food from prison authorities. The rice is often over or undercooked so as to lose any nutritional value. The fish paste is of the lowest quality, and the curries are little more than water with a few pieces of unwashed vegetables. Insects, stones and sand are often mixed into the curries. Despite a weekly ration of meat, it is usually only about a one inch cube and is only served boiled. The lack of sufficient nutritious food in the prisons contributes to a weakened immune system, leaving a prisoner susceptible to illness and disease.

It is left to the families of political prisoners to provide the essential food items. However, they do not always reach prisoners.

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57 The Darkness We See: Torture in Burma’s Interrogation Centers and Prisons, AAPP, 2006.
58 The Darkness We See: Torture in Burma’s Interrogation Centers and Prisons, AAPP, 2006.
59 Jail Manual, Chapter 17, Clause 1077, P447.
Case: Tun Tun Naing, National League for Democracy member, currently held in Meiktila Prison, Mandalay Division.

"I brought some fish sauce and vegetables like cabbage to him as he had asked for them before in a letter he sent me. But the prison officials refused to accept those items for him; they said cabbage was prohibited as it might damage the inmates' health because a lot of insecticides were used in growing them. They said instant noodles were also prohibited as the prison had no hot water to give the inmates to prepare them. Instant coffee mix packs bought from outside were not allowed either – only those sold by prison officials were allowed." Wife of Tun Tun Naing.  

Many prisoners in Insein prison suffered from additional health problems after Cyclone Nargis struck on 2 and 3 May last year. The cyclone ripped the roof off the food warehouse, and rice stores were soaked. Although the International Committee of the Red Cross replaced the rice as soon as they found out about the situation, prisoners were only fed the new rice for three days. Authorities then fed prisoners mouldy, inedible rice. As a result many prisoners suffered from diarrhoea, dysentery, vomiting, dizziness, skin allergies and typhoid. Female prisoners in the women’s compound of the prison are known to have suffered more than others. The prison authorities did provide adequate medical care to those who fell ill as a direct result of their neglect.

**Conclusion & Recommendations**

The regime’s policies and practices of torture; harsh sentences handed down by kangaroo courts; systematic transfers to remote prisons; and systematic denial of healthcare are all designed to ensure that political prisoners never leave prison. The regime’s policies and practices have already resulted in the needless deaths of at least 139 political prisoners in Burma’s interrogation centres, jails and labour camps since 1988.

Overcrowding in prisons exacerbates the spread of communicable diseases like malaria, tuberculosis and HIV. Together with corruption within the prison system, the lack of proper medical care (when it is granted) and poor nutrition, these factors are contributing to a growing health crisis for Burma’s current political prisoners and the prison population as a whole.

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60 Democratic Voice of Burma, 8 January 2009
Recommendations

1. The UN Special Rapporteur on the human rights situation in Myanmar must carry out an independent investigation into the systematic denial of healthcare for political prisoners.

2. The UN Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health should carry out an independent investigation into the health conditions in Burma’s prisons and labour camps.

3. Any organisation working on the three diseases of HIV, tuberculosis and malaria in Burma should not ignore the situation in prisons and labour camps.

4. The UN Security Council should exert pressure on the military regime to grant the International Committee of the Red Cross full and unrestricted access to fulfil its independent, impartial mandate to inspect prisons.