

# **Supporting Drug Treatment Services in Prisons**

## **Final Project Report**

Prepared by the Pompidou Group Secretariat for the  
«Fonds de lutte contre certaines formes de criminalité» of Luxembourg  
Co-operation Group to Combat Drug Abuse and Illicit Trafficking in Drugs



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*"The fundamental moral principles of our society should apply especially in prison"*  
Iuliana Curea, Moldovan prison manager

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# Final Project Report

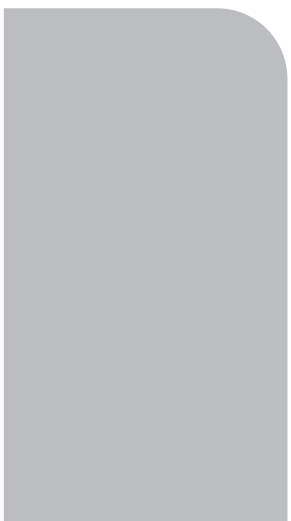
## Supporting Drug Treatment Services in Prisons

*Prepared by the Pompidou Group Secretariat for the  
« Fonds de lutte contre certaines formes de criminalité »  
of Luxembourg*

December 31<sup>st</sup> 2017

Prepared by the Council of Europe Pompidou Group's Secretariat





# Contents

<b>I</b>	<b>Executive Summary</b>	<b>7</b>
<b>II</b>	<b>Abbreviations</b>	<b>8</b>
<b>III</b>	<b>Introduction</b>	<b>9</b>
<b>1</b>	<b>Establishment of a Therapeutic Community in the Republic of Moldova</b>	<b>10</b>
1.1	Background	10
1.2	Actions	11
1.2.1	<i>Feasibility study in the Republic of Moldova</i>	11
1.2.2	<i>Training</i>	12
1.2.3	<i>Go-ahead for prison refurbishment in Moldova</i>	12
<b>2</b>	<b>Prison Policies and Juvenile Justice in Ukraine</b>	<b>13</b>
2.1	Background	13
2.2	Actions	14
2.2.1	<i>Improving the rehabilitation of juvenile prisoners</i>	14
2.2.1	<i>Prison Policy development</i>	15
<b>3</b>	<b>Study on Drug Treatment Systems in Prisons</b>	<b>17</b>
3.1	Background	17
3.2	Actions	18
3.2.1	<i>Feasibility study</i>	18
3.2.2	<i>Establishing a research team</i>	18
3.2.3	<i>Workshops</i>	18
3.2.4	<i>Finalisation of the research</i>	19
3.3	Results	19
<b>4</b>	<b>International Cooperation on Prison Health in Europe</b>	<b>20</b>
4.1	Background	20
4.2	Actions	21
4.2.1	<i>Expert conference</i>	21
4.2.2	<i>Awareness-raising and advocacy</i>	21
<b>IV</b>	<b>Conclusions</b>	<b>22</b>
<b>V</b>	<b>Financial Statement</b>	<b>23</b>



## Executive Summary

With the support of the 'Fonds de lutte contre certaines formes de criminalité' of Luxembourg, the Pompidou Group has implemented project activities in Ukraine, prepared targeted interventions in Moldova and Ukraine and improved international support and cooperation on prison health. This final report informs about the activities, results and financial implementation of the project. The project was designed to improve health in penitentiaries with respect for human rights. More specifically, it aimed to develop strategies of drug treatment and social reinsertion of drug-using detainees in eastern Europe to reduce recidivism and relapse after release. The project supported through-care of health and social programmes to sustain drug treatment efforts and guarantee continuing care for people entering and leaving prison. Most project activities were implemented in Ukraine and in the Republic of Moldova.

The project achieved the following outcomes:

- The quality of drug treatment services for drug dependent prisoners improved in the Republic of Moldova and Ukraine.
- A new drug treatment approach has been implemented Moldova: the first national prison-based Therapeutic Community opened in 2017.
- Drug prevention services for male and female juvenile prisoners improved in Ukraine. One new therapeutic tool (Family Conference) has been piloted in Ukraine.
- An international network of stakeholders has been established and is ready to promote and improve evidence-based good practices on the rehabilitation of drug users who are in contact with the criminal justice system.
- Research identified good practice examples in the prison systems of 9 eastern European countries and Kosovo\* and triggered an international drug policy debates about effective treatment interventions and adequate drug-control regimes in prison.

Based on desk reviews, site visit reports and seminar evaluations, the Pompidou Group concludes that the project has been successful in reaching its project goals.

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\* All references to Kosovo, whether the territory, institutions or population, in this text shall be understood in full compliance with United Nation's Security Council Resolution 1244 and without prejudice to the status of Kosovo.

# Abbreviations

COE	Council of Europe
CPT	European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment
DPI	Moldovan Department of Penitentiary Institutions
ECHR	European Court of Human Rights
GFATM	Global Fund to Fight AIDS, Tuberculosis and Malaria
IDU	Injecting Drug User
NAA	Romanian National Anti-Drug Agency
NGO	Non-Governmental Organisations
NPA	Romanian National Prison Administration
OAT	Opiate Agonist Treatment
PG	Pompidou Group
PWID	People who inject drugs
SPS	Ukrainian State Penitentiary Service
SDCS	Ukrainian State Drug Control Service
TB	Tuberculosis
ToT	Training of Trainers
UNODC	United Nations Office on Drugs and Crime
WHO	World Health Organisation

# Introduction

The health status of prisoners is regularly lower than the health status of people in liberty. Prisoners mostly come from poor and deprived segments of the population such as (illegal) migrants, ethnic minorities, people without employment, people with substance use disorders or sex workers. Many diseases concentrate in these underserved groups. Since prisons are often overcrowded and do not offer healthy living conditions – e.g. lack of fresh air, hygiene or light – the risks of disease in prisons are often much higher than outside. However, prisons are closely linked to communities. Prisoners go on leave, receive visitors and sometimes attend outside work placements or health care facilities. The vast majority of prisoners will eventually leave prison and reintegrate into society. Furthermore, prison staff constantly oscillates between prisons and their communities. Therefore, prison health risks contribute to the burden of disease in wider society. This calls for especially efficient measures of prevention and health care in prisons. However, in reality prisons often do not adequately meet the health needs of prisoners and do not sufficiently contribute to the protection of public health.

Drugs users, including injecting drug users (IDUs), are often overrepresented in prison populations and the incidence of drug use is increasing in many prisons throughout eastern Europe and the Balkans. Prisons are risky environments both for the prisoners and the staff. In particular, injecting drug users are exposed to various health risks; namely, overdosing, abscessed infections of injection sites, and the transmission of blood-borne diseases such as Hepatitis C or HIV. HIV prevalence in eastern Europe, and Central Asia and Russia has roughly doubled since the 1990s, making the region home to the world's most rapidly expanding epidemic. The HIV epidemic that is also IDU-driven poses one of the greatest challenges to the development, progress and stability of the countries of the region. Research has consistently shown that not only is HIV prevalence very high in IDU populations, but that Hepatitis C (HCV) also occurs frequently.

In addition to the high risks of the transmission of communicable diseases, detainees are often subject to stigmatisation due to their dependence. The fear of being caught for drug possession, as well as backlash from the side of other inmates often prevents drug dependent detainees from seeking help or complying with their drug treatment. Mental illness and drug addiction are mutually reinforcing, and both diseases are particularly prevalent in prison populations. Prison conditions can have negative effects on mental health. For instance: overcrowding, various forms of violence, enforced solitude or conversely a lack of privacy, a lack of meaningful activity, isolation from social networks, insecurity about the future and a lack of services providing psychosocial support accounts for prisons being a priority area for preventing problematic drug use.

Human rights and the right to health are indivisible and interrelated. The right to health contains both entitlements and freedoms. Entitlements include the right to prevention, treatment and control of diseases, and freedoms are the right to be free from non-consensual medical treatment, torture and other cruel, inhuman or degrading treatment or punishment<sup>1</sup>. Limiting the spread of communicable diseases in prison benefits both prisoners as well as society as a whole and reduces the burdens on a country's health system. The Pompidou Group's Drugs in Prison Programme in Eastern Europe recognises the need to promote health and tackle health inequalities in prison settings.

1 The Right to Health (Fact Sheet No. 31). Geneva, Office of the United Nations High Commissioner for Human Rights/World Health Organisation, 2008  
www.ohchr.org/Documents/Publications/Factsheet31.pdf, accessed 20 September 2011

# Establishment of a Therapeutic Community in the Republic of Moldova

## 1.1 Background

The Republic of Moldova is recognised as an example of good practice due to its successful HIV programmes. In the early 2000s Moldova introduced Opiate Agonist Therapy (OAT) and a Needle and Syringe Exchange Programme (NSP) in its prisons. As a consequence, HIV among prisoners dropped by over 50 percent. This was expected, because research consistently shows that OAT and NSP are effective in curbing the spread of HIV and other blood-borne diseases in the community and in prisons. The top leadership in Moldova's penitentiary system acknowledges that - like in other prison systems around the world - drug control measures can only reduce illegal drugs entering prisons and not fully prevent the drug trade in their facilities. Injecting drug use continues behind bars and drug-dependent prisoners are at high risk of infecting themselves with HIV or hepatitis C if they share injection equipment with other inmates. Providing clean needles and syringes to prisoners was a both pragmatic and successful solution that was introduced in Moldova in 1999: The Department of Penitentiary Institutions expanded the range of drug prevention and treatment services in prisons and introduced OAT. From this date, opiate-dependent prisoners could receive liquid methadone, a medication that reduces cravings for drugs and consequently the risk of infections through injecting. In order to increase the impact and coverage of these programmes, the Pompidou Group organised a series of workshops and conferences in Moldova, some in cooperation with the United Nations Office on Drugs and Crime (UNODC). The professional skills of the health care staff at the Department of Penitentiary Institutions improved. In 2013 Moldova joined the Pompidou Group as a full member state, thanks to its consistent support to Moldova and the country's strong commitment to contribute to international drug policy cooperation. But this was just the beginning. During a workshop in Chisinau organised by the Pompidou Group in 2013, the leadership of the Moldovan Department of Penitentiary Institutions concluded that harm reduction alone would not cater for the needs of all drug-dependent persons in prisons.

The Republic of Moldova issued a formal request in June 2013 asking the Pompidou Group for assistance in establishing Therapeutic Communities in their prisons. They were interested in extending their tool kit in the fight against drug dependence in their prisons and in the community by adding more psycho-social support programmes to their drug treatment system. It agreed to assess the feasibility and costs of establishing Therapeutic Communities in two or more prisons as a first step.

## 1.2 Actions

### 1.2.1 Feasibility study in the Republic of Moldova

A team consisting of two Norwegian NGO leaders working at Phoenix Haga, a successful Therapeutic Community in Norway, and the Principal Project Consultant of the Pompidou Group visited Moldova on 26-28 November 2013 in order to assess the feasibility of establishing two TCs: one in a male prison (Prison No.18, Brănești) and one in a female prison (Prison No.7, Rusca). The assessment team visited the two prisons and discussed implementation criteria with the Moldovan prison authorities of the Department of Penitentiary Institutions (DPI), health staff and NGOs. Following a SWOT analysis the team concluded that establishing TCs in Moldovan prisons is feasible.

The Therapeutic Community model is a well-developed methodology for treating drug addiction. It is a methodology that has been introduced worldwide and modified to suit local cultures and traditions. A Therapeutic Community consists of a wide range of behavioural and psychological interventions to help the resident change from a dependent lifestyle to a life without drugs. The Therapeutic Community represents a social microcosm, a miniature society in which residents live together 24/7 and experience all aspects of life's challenges in a safe environment. The client has an opportunity to investigate the challenges and to change his or her perception and behavior in response to these challenges. Therapeutic Communities proved to be an effective methodology for treating substance use disorders when supplemented by a rehabilitation-oriented aftercare programme. Some of the basic elements of a Therapeutic Community are:

- Mutual self-help
- Common philosophy
- Common values
- A daily schedule
- Clear responsibilities
- Hierarchic structure
- Role modelling
- Clear expectations

Further reading: *The Therapeutic Community. Theory, Model, and Method*. George de Leon and Springer Publishing Company, New York 2000.

### 1.2.2 Training

The Pompidou Group and the Department of Penitentiary Institutions of the Republic of Moldova, represented by Ms Ana Dabija, signed on 29 May 2015 a Memorandum of Understanding (MoU) with the aim of consolidating effective co-operation between the two parties in the implementation of the activity “Establishing Therapeutic Communities in Prisons”. Between 2015 and December 2016 the Pompidou Group trained a multidisciplinary team consisting of 50 prison managers, doctors, psychologists, NGO specialists. In a series of four in-depth trainings over a period of two years they acquired the knowledge to run a Therapeutic Community in a prison. The training course was conducted by Norwegian and Romanian trainers. The Norwegian NGO Phoenix Haga contributed as a full project partner to the success of this training by providing expertise and guidance.

### 1.2.3 Go-ahead for prison refurbishment in Moldova

The Pompidou Group granted 58.000 Euros to the Department of Penitentiary Institutions (DPI) for the refurbishment of a prison ward which accommodates the Therapeutic Community. The refurbished area has space for 25 drug dependent prisoners and fulfils European standards as regards to space, equipment and living conditions.



Photo: Refurbished prison area in Pruncul prison in Moldova

# Prison policies and juvenile justice in Ukraine

## 2.1 Background

In Ukraine, as elsewhere in the world, HIV, injection drug use and incarceration are syndemic: being affected by one increases the risk of and/or compounds the effects of the other two. Thus, effective HIV prevention and treatment must address all three problems.<sup>2</sup>

Worldwide, a significant proportion of people going through criminal justice systems are drug dependent or use drugs, and a considerable proportion of IDUs are imprisoned during their lifetime.<sup>3</sup> Ukraine, like other countries grappling with a transnational epidemic, has a large percentage of prisoners incarcerated for crimes associated with substance use. In Ukraine, 15% of all inmates have been incarcerated for drug-related offences, excluding crimes committed to finance their drug use.<sup>4</sup> These data are confirmed by the statistics of the State Penitentiary System of Ukraine (SPSU): on 1 September 2014, 10 300 prisoners had been incarcerated because of violation of drug laws (14% of all sentenced prisoners).<sup>5</sup> A subsequent nationwide study suggested that 47% of prisoners returning to the community were IDUs.<sup>6</sup>

According to Pompidou Group experts, the Ukrainian approach to the care and treatment of inmates with drug related problems showed a number of inconsistencies. Despite the HIV epidemic, mostly fuelled by intravenous drug use, which swept through Ukraine's prison system in the past decade, harm reduction programmes such as syringe exchange and opiate substitution treatment have not yet been introduced in prisons. Furthermore, drug dependence treatment is very limited in prisons and in pre-trial detention.

In addition, the Pompidou Group identified juvenile prisoners (boys and girls) in Ukraine as particularly vulnerable. Many of the young people incarcerated in Ukrainian institutions come from disadvantaged families where alcohol and drug use is common. Due to limited training and resources there are only few services available that may prevent the young people from becoming drug dependent.

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<sup>2</sup> Altice et al. (2010).

<sup>3</sup> Jürgens et al. (2010).

<sup>4</sup> Bewley-Taylor, Hallam and Allen (2009).

<sup>5</sup> SPSU official site, available at [www.kvs.gov.ua/peniten/control/main/uk/publish/article/628075](http://www.kvs.gov.ua/peniten/control/main/uk/publish/article/628075) [in Ukrainian], accessed 8 October 2016.

<sup>6</sup> Azbel et al. (2013).

## 2.2 Actions

### 2.2.1 Improving the rehabilitation of juvenile prisoners

Since 2013 the Pompidou Group supports the training of prison staff working in institutions for juvenile delinquents in Ukraine. Thanks to the project this support could be intensified in 2015 and 2016. Together with the Dutch non-profit organisation Foundation Friends of Pryluky and international experts specialised in juvenile justice and psychology a series of four workshops targeting 50 prison managers of two juvenile prisons (female and male) was implemented. The participants acquired practical and theoretical tools on how to implement Family Therapy methodology, risk assessment tools and drug prevention. The techniques discussed during the workshops enable educators and psychologists to further improve their therapeutic and analytical skills and they learned more about risk assessment and drug prevention tools. Due to the criminal justice reforms in Ukraine, fewer juveniles are incarcerated and consequently many juvenile institutions will be closed. However, the Ukrainian prison administration announced recently that the juvenile institution where the training took place will remain.

One of the skills taught was the organisation of a Family Conference. A Family Conference is an opportunity for family members to get together to jointly develop a plan with their child which addresses the problems - often drug use or alcohol problems - identified by professionals who know the child such as the teacher in the correctional institution and/or a social worker. After the training programs in the two correctional institutions (Melitopol and Pryluky) both institutions successfully organised several Family Conferences.

A documentary was produced by the Pompidou Group to explain the implementation and show the results of a Family Conference in Pryluky. The documentary is available on the YouTube channel of the Pompidou Group.



Photo : Family conference implementation in Melitopol, female juvenile prison

The Ukrainian prison administration and the Pompidou Group agreed to build a solid evidence-base for the implementation and proper use of system approach and Family Conference in Ukrainian prisons. An independent expert commissioned by the Pompidou Group in the framework of the project “Supporting Drug Treatment Systems in Prisons” started in 2017 an evaluation of the application of Family Conference in the colonies of Melitopol and Pryluky. The results of this research will be ready and presented to the top leadership of the Ukrainian prison administration in 2018. The continuity of this research activity has been secured through the follow-up project “Improving Drug Treatment Systems in Prisons” (2016-2018) which is also financed by the Fonds de lutte contre certaines formes de criminalité » of Luxembourg.

### 2.2.2 Prison Policy development

The Pompidou Group made an essential contribution to the drafting and implementation of the new Ukrainian Drug Strategy that was adopted by the Ukrainian parliament in September 2013. The Drug Strategy covers the period up to 2020 and proclaims a human-centred approach of the state and society to tackle the problems associated with drugs in Ukraine, including those in its prisons. Moreover, the policy paper declares a balanced and integrated approach and identifies treatment and preventive measures as priorities in prison. Although due to budgetary constraints Ukraine is not yet a member of the Pompidou Group, its drugs strategy is now in line with Council of Europe standards and Pompidou Group recommendations. The following actions contributed to this result.



Photo: Reforms of prison policies improve

- Regular meetings at Ministerial Conferences and Permanent Correspondents' meetings of the Pompidou Group and training sessions for representatives of the Ukrainian State Service for Drug Control which took place twice each year (May and September) from 2011 to 2014 in the framework of Executive Training for Drug Policy Managers prepared Ukrainian policy makers for the drafting of the Drug Strategy.
- Representatives of Ministries, high-level stakeholders and practitioners participated at the International Conference on Reducing the Demand for Drugs, Improving Human Life – Support for the Implementation of the Ukrainian Drug Strategy, 11-12 September 2014. At the conference one workshop was dedicated solely to prison policies.
- Regular meetings and joint actions in conjunction with international stakeholders such as UNODC, UNICEF, The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM), and local organisations such as HIV Alliance, Aids-Foundation East-West (AFEW) and Foundation Vita Valens sustained advocacy activities and guaranteed coordinated efforts of all organisations involved aimed at improving drug policies in Ukraine and its penitentiaries. This included also joined advocacy activities for Opioid Agonist Treatment in Ukrainian prisons.



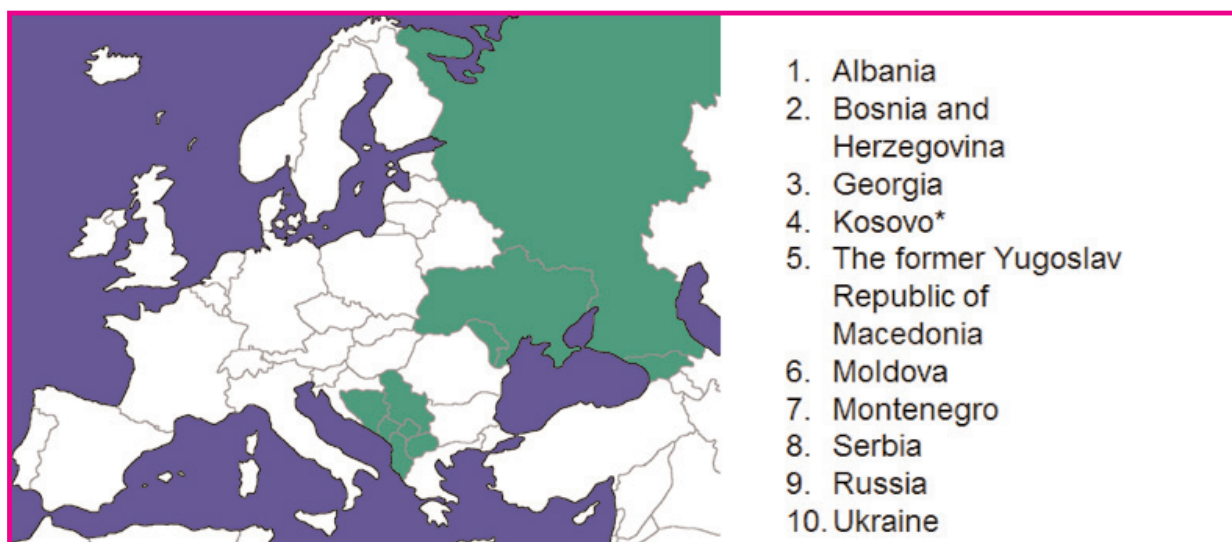
Photo: International Conference on Reducing the Demand for Drugs, 11-12 September 2014

# Study on Drug Treatment Systems in Prisons

## 3.1 Background

An international research activity was conducted between 2013 and 2016, and is a first attempt to collect relevant data on drug use among prison populations and the related responses in the nine eastern European countries and Kosovo\*. The research looks in detail into the situation of drug users among criminal justice populations and the corresponding health-care responses in nine countries in Eastern and South-East Europe – Albania, Bosnia-Herzegovina, Georgia, Moldova, Montenegro, Russia, Serbia, “the former Yugoslav Republic of Macedonia” and Ukraine – and Kosovo\*. The research resulted in two publications in 2017: “Drug-treatment systems in prisons in Eastern and South-East Europe” and “Drug-treatment systems in prisons in Eastern and South-East Europe - Country Reports”.

**Figure: Countries participating in the research project**



\* All references to Kosovo, whether the territory, institutions or population, in this text shall be understood in full compliance with United Nation's Security Council Resolution 1244 and without prejudice to the status of Kosovo.

## 3.2 Actions

### 3.2.1 Feasibility Study

In 2013 the Pompidou Group commissioned the Public Health expert, Professor Heino Stöver, to conduct a feasibility study to assess whether there were enough data to draw up a detailed inventory of the drug situation in the aforementioned countries, and if not, to suggest experts to (i) help with such an inventory and (ii) elaborate on recommendations how to overcome existing barriers in implementing European standards of health care for drug-using prisoners. The feasibility study assessed existing information in the 10 countries and outlined obstacles and risks that could possibly occur. Professor Stöver concluded that the foreseen methodology and project framework would be effective in painting a clear picture of the respective country situation in order to improve drug treatment systems in the region. Some literature on country-specific situations in prisons did exist. Hence, the study would not start from scratch.

### 3.2.2 Establishing a research team

Professor Stöver identified 10 researchers, one expert per country, based on their expertise, ability and willingness to be involved in the research process. Several experts were known to the author from previous studies and collaborations. The working relationships were reliable and productive and the experts had sufficient linguistic skills. The authorities in the member states of the Pompidou Group were informed about the choice of experts and invited to comment on their respective country report. The researchers were instructed to present scientific findings that were objective, impartial and unbiased.

### 3.2.3 Workshops

Two workshops were held in the European Youth Centre of the Council of Europe in Budapest, on 19 February and 15 September. All 10 researchers from the 10 countries attended both workshops. During the first workshop they defined the research objective, produced a methodology and agreed on a timeframe. Moreover, definitions of specific drugs and prison-related terms were discussed. All participants were very motivated and appreciated the participatory team approach. At the second workshop the 10 researchers presented their preliminary results, talked about obstacles they encountered during the research and developed a set of comparable data for the summary chapter of the publication. They submitted first drafts of their country reports on 15 October 2014 and after editing they updated this information in 2016.



Photo: Researcher from 10 different countries met in Bucharest, 2014 and 2015

### 3.2.4 Finalisation of the research

Professor Heino Stöver and Robert Teltzrow, the principal project consultant for the Criminal Justice and Prison Programme of the Pompidou Group met regularly in Frankfurt (Main), in Strasbourg and Berlin discuss the research papers provided by the contributing authors and provide detailed comments and suggestions to them. Furthermore, they aggregated the main results of the study.

## 3.3 Results

Looking at the (often limited) data on the health status of prisoners in these nine countries and Kosovo\*, almost all diseases are over-represented in prisons compared to the general population. The same is true for illicit drug use and dependence in prisons, which are disproportionally higher than in the community.

The prevalence of infectious diseases – particularly human immunodeficiency virus (HIV) and AIDS, hepatitis B and C, and tuberculosis (TB) – is also often much higher in prisons than outside. Apart from TB, transmission of communicable diseases is mostly driven by the sharing of drug injecting equipment. Estimates of HIV prevalence range from <1% to 20%, which is disproportionally higher than in the community.

High rates of injecting drug use, if coupled with lack of access to evidence-based prevention measures, can result in a rapid spread of HIV and hepatitis B and C. Within the places studied there is much evidence that high-risk behaviour is continuing in prisons: studies indicate that more than half of the drug injecting population report in-prison injection drug use, of whom the majority shared injection equipment with several prisoners.

In many places there is an almost complete unavailability of effective addiction treatment – e.g. opiate substitution or agonist treatment (OAT) – or the potential of such treatment has not yet been fully exploited. Detoxification treatment alone or short-term continuation and interruption of treatment can have negative effects on the health of drug-dependent persons. However, some places have been applying state-of-the-art addiction treatment for quite some time (e.g. “the former Yugoslav Republic of Macedonia”).

In most cases, the prevention and treatment of infectious diseases clearly lack harm-reduction interventions. Among the places considered in this study, Moldova is the only country with existing harm-reduction measures in prisons (e.g. prison-based needle-exchange programmes).

Models of good practice already exist in some of the places covered by this study. Nevertheless, an extra effort is needed to learn from one another by exchanging and encouraging best policies and practices in the countries.

The experts' general recommendation is to support drug-treatment interventions, and continue prison-based drug policy debates in the places covered by this research project, and introduce reforms that would re-focus current drug-control regimes towards a more balanced approach. That would include amending existing drug legislation and making sure that prisons are not filled with people sentenced for drug use per se or for possession of small amounts for personal use.

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\* All references to Kosovo, whether the territory, institutions or population, in this text shall be understood in full compliance with United Nation's Security Council Resolution 1244 and without prejudice to the status of Kosovo.

# International cooperation on prison health in Europe

## 4.1 Background

As a steering group member of the WHO Health in Prison Project (HIPP), the Pompidou Group of the Council of Europe supports international efforts to improve drug treatment systems in prisons. Project coordination with other international partners is important in order to improve target intervention and create synergies in the beneficiary countries. In the framework of the project 'Supporting Drug Treatment Services in Prisons' the Pompidou Group cooperated in particular with the following international organisations:

- WHO/Europe
- UNODC
- EMCDDA
- Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM)
- Aids Foundation East-West (AFEW)

### The Health in Prisons Programme of WHO/Europe

In 1995, the WHO Regional Office for Europe launched its Health in Prisons Programme (HIPP). Its aim to improve of health in prisons through policy changes initiated by recommendations based on international standards and good practices. From the start, other key organisations have partnered HIPP, such as the Pompidou Group of the Council of Europe CoE, the International Council of the Red Cross ICRC, the United Nations Office on Drugs and Crime UNODC and others.

In the beginning HIPP devoted a lot of resources to the problem of drugs in prisons, which had become a major issue for many prisons, and a concern for public health. On the basis of fundamental international standards delegates present at a joint World Health Organisation/Russian Federation International Meeting on Prison Health and Public Health, held in Moscow on 23 and 24 October 2003, declared the need for a close link between public health and the provision of health care to those in prison.

Ten years later, at an international meeting on prison health, held in London on 15-16 October 2013, WHO and UNODC jointly launched the document Good governance for prison health in the 21st century. A policy brief on the organisation of prison health. The document drew two main conclusions about institutional arrangements for prison health that would lead to better health and well-being for prisoners as part of better public health:

1. Managing and coordinating all relevant agencies and resources contributing to the health and well-being of prisoners is a whole-of-government responsibility.
2. Health ministries should provide and be accountable for health care services and advocate healthy conditions in prisons.

The Health in Prisons Programme of WHO/Europe and the Pompidou Group decided to organise a joint expert meeting with the purpose of outlining the current institutional landscape of prison health in Europe, and to explore ways of achieving a stronger commitment from health authorities to the health of prisoners. WHO/Europe and the PG agreed that in spite of an impressive body of international law, regulations, recommendations and standards to protect the health of prisoners according to assessed needs and professional and ethical standards equivalent to those in wider society, practices are often at odds with these norms and only weak mechanisms are available to hold states accountable to their human rights obligations. Hence it would need joint efforts to counteract unnecessary and avoidable health inequities in societies.

## **4.2 Actions**

### **4.2.1 Expert conference**

The meeting that took place in Strasbourg in 2014 and brought together high-level representatives of international organisations as well as representatives from the European Court of Human Rights, the European Committee for the Prevention of Torture and the Criminal Law Cooperation Unit of the Council of Europe in order to explore ways of achieving a stronger commitment from health authorities to the health of prisoners. It was agreed that the existing body of international rules and standards for the protection and promotion of the health and well-being of prisoners must be subject to continuous evaluation and development and must take into account the latest developments and scientific evidence in the fields of human rights protection, medical ethics, prevention of torture and ill-treatment and public health. The meeting was also an opportunity to launch together with WHO the new version of the prison health handbook *Prisons and Health*. Moreover, the participants endorsed the meeting's conclusion ("Strasbourg Conclusions 2014").

### **4.2.2 Awareness-raising and advocacy**

A brochure has been produced to share the experiences and lessons learned in the context of the Pompidou Groups criminal justice and prison activities with partners and stakeholders. The publication gives a voice to both leading experts and people who have survived drug dependence and experienced hardship in prison. It presents the approach the Pompidou Group to link research, practice and policy and show how to develop and improve national legal frameworks (policy) and to enhance the professional skills (practice) and knowledge (research) of our partners.

# Conclusions

With the financial support of the « Fonds de lutte contre certaines formes de criminalité » from Luxembourg, the Pompidou Group finalised three projects which effectively tackled health issues and inequalities in prison settings. The project “Treatment and Harm Reduction in Prisons” in Moldova (2010-2011) provided training and improved working relations between doctors and security guards in prisons. The project “Preventing Drug Trafficking and Abuse in Prisons” (2012-2013) raised awareness about drug users in prisons and improved the skills of therapists who provide counselling and drug prevention in prisons. The project “Supporting Drug Treatment Services in Prisons” (2013-2017) developing strategies of drug treatment and social re-insertion of drug-using detainees in order to reduce relapse and recidivism in eastern European prisons.

Based on desk reviews, participants’ evaluations and expert opinions, the “Supporting Drug Treatment Services in Prisons” (2013-2017) has been highly relevant to the beneficiaries of this project. The Moldovan and Ukrainian counterparts appreciated that project activities were implemented in a flexible manner and adapted to local needs. The project objectives were matched with the Council of Europe’s broader objectives in improving human rights and public health in penitentiaries. The training seminars, workshops and conferences and round tables were well reflected by mass media and clearly and regularly communicated to relevant stakeholders. The Pompidou Group is confident that the project made a difference in the prison health care environment in the project countries. Governmental and non-governmental partners showed much interest in the project activities and the subjects dealt with during the seminars.

# Financial Statement

The Pompidou Group has the honour of submitting this audited financial report to the Fonds de lutte contre certaines formes de criminalité. This submission is made in conformity with Financial Regulations of the Council of Europe. The financial documents, contracts and checks are available at the Pompidou Group Secretariat and can be accessed upon request.

PROJECT ACTIVITIES	COST IN EURO
<b>Moldova</b>	
Production and dissemination of a country report on Moldovan drug policies including drug treatment in prison	1270
Assessment mission on identifying suitable location for establishing a Therapeutic Community in prison	2300,16
Refurbishment of a prison ward that accommodates a Therapeutic Community (Pruncul prison)	43844,27
<b>Ukraine</b>	
Organisation of the workshop Drug Rehabilitation in Juvenile Prison, Melitopol, 13-15 November 2013	9430,19
Development of a training project and organisation of a workshop on treatment methodologies and drug prevention in juvenile prisons in Pryluky, 23-24 April 2015	20565,49
Expert participation at the international conference on HIV, jointly prepared with UNODC in Kiev, 1-2 July 2015	3348,93
Expert participation at the international conference on HIV & Harm Reduction in Prisons, Kiev, 9-10 July 2015	3952,57
<b>Belarus</b>	
Expert participation at a drug policy and prison conference in Minsk, 29-30 June 2016	3758,97
Training of psychologists in female juvenile prison in Melitopol	3 050

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PROJECT ACTIVITIES	COST IN EURO
<b>Research project "Study on drug treatment systems in prisons"</b>	
Research meetings and activities	38358,17
Editing and proofreading	4605,00
Layout and printing	3935,00
<b>Production of information and documentation materials</b>	
Reproduction of 100 DVDs "Methadone in prisons" (2014)	400,00
Production of the Drugs in Prisons Brochure (2016)	9700,00
Production of the final report of the project on "Supporting drug treatment systems in Eastern Europe (2017)	1500,00
<b>International Activities</b>	
Organisation of a side-event on drugs in prisons at the 58 <sup>th</sup> conference of the Commission on Narcotic Drugs, Vienna, 12 March 2015	1296,94
Expert participation at the International Congress on Addictions, Centros de Integración Juvenil, Mexico, 2-6 November 2015	2562,73
Steering group meeting of WHO Health in prisons, Lisbon, 19-20 May 2016	1006,78
Expert participation and presentation at the Conference of Prisons Directors in Zaantam, 13 June 2016	442,53
<b>Overall project coordination (fees, substance, travel)</b>	
Fees, substance, travel	70414,75
Administrative Assistant - 3 months in 2016 +2 months in 2017	20287,21
<b>Subtotal Direct Project Costs</b>	<b>242979,69</b>
Administrative fees	5750,00
<b>TOTAL EXPENDITURE</b>	<b>248729,69</b>
<b>Income (Contribution from the Fonds de Lutte contre certaines formes de criminalité, Luxembourg)</b>	<b>250 000</b>
<b>Balance</b>	<b>1270,31</b>





