



Project Report 2016-2018

Improving Drug Treatment Systems in Prisons



Prepared in December 2018 by the Pompidou Group Secretariat for the attention of the
Fonds de lutte contre certaines formes de criminalité
of Luxembourg



Photo by Yon Savin

“Since I turned 13 years old, I used to turn off my feelings by using drugs, I turned off my fears. I was just taking drugs and living in my own world. Now I feel very well, I started feeling emotions that bring me joy and make me happier.”

Resident at the in-prison Therapeutic Community in the Republic of Moldova

Contents

I	Executive Summary	4
II	Introduction	5
	1. Supervising and Monitoring Therapeutic Community Implementation in Moldova	6
1.1	Summary	6
1.2	Background	7
1.3	Actions and results	10
1.3.1	Supervision and Monitoring	10
1.3.2	Testimony video and photo exhibition	10
1.3.3	Study visit to Norway	11
	2. HIV Prevention and Rehabilitation of Juveniles in Ukrainian Prisons	12
2.1	Summary	12
2.2	Background	12
2.3	Actions and results	14
2.3.1	Improving the rehabilitation of juvenile prisoners	14
2.3.2	Evaluation of Family Conferences	16
2.3.3	Workshops on HIV prevention and drug treatment in prisons	18
	3. International Co-operation on Prison Health in Europe	21
3.1	Summary	21
3.2	Background	21
3.3	Actions	22
3.3.1	World Health Organization (WHO) International Meeting on Prisons and Health	22
3.3.2	Prison Corner at the AIDS 2018 Conference	23
3.3.3	Preparation of the Second European Conference on Health Care in Prison	25
III	Conclusions	26

Executive Summary

With the financial support of the Fonds de lutte contre certaines formes de criminalité from Luxembourg, the Pompidou Group has, since 2012, finalised four projects which have 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 Systems in Prisons” (2013-2017) developed drug treatment strategies and social re-insertion of drug-using detainees in order to reduce relapse and recidivism in eastern European prisons. From 2016 to 2018 the Pompidou Group successfully implemented the project “Improving Drug Treatment Systems in Prisons”. This project report lays out the activities, results and financial implementation of this project. Using a human rights approach, the project aimed to improve public health and reduce drug dependence, drug harm and drug-related crime in prisons and in the community. To reach this level of impact, all project activities aimed at improving drug treatment systems in prisons through three main outputs. First, the project improved skills of health professionals working with drug dependent people who are incarcerated. Second, it contributed to the development of policies and programmes for the social re-integration of people who had been incarcerated. Third, the project helped to establish regular interaction between relevant stakeholders and project partners at regional and international level to multiply capacities and exchange good practices. Most project activities were implemented in Ukraine and in the Republic of Moldova.

The project achieved the following results:

- New drug treatment services for drug-dependent people who are incarcerated have been implemented in the Republic of Moldova and Ukraine.
- The first prison-based Therapeutic Community in the Republic of Moldova opened its doors for the first residents to go through a 6-month treatment programme.
- The therapeutic tool “Family Conference” which has been piloted and evaluated by the Pompidou Group with support from the Dutch non-profit organisation “Friends of Preluky” is institutionalised in all juvenile correctional institutions in Ukraine.
- An international network of stakeholders and organisations in the field of prison health and drug policy has been strengthened and was used to extend good practice examples in Europe.

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.

Introduction

Prisons are risky environments for both the people who are incarcerated and the staff working there. Prevalence of problematic drug use among people who are imprisoned is usually considerably higher than in the general population. Injecting drug users (IDU) are particularly 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, 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 poses one of the greatest challenges to the development, progress and stability of the countries of the region, including the Republic of Moldova and Ukraine. Research has consistently shown that not only is HIV prevalence very high in IDU populations, but that Hepatitis C (HCV) also occurs frequently.

Prisons also provide rare opportunities for many persons with risky behaviour to get access to health care, including timely diagnosis and treatment of drug use. Though incarceration itself is problematic for HIV prevention and control, prisons are places which facilitate detection, treatment and the initiation of continuous care for medically and socially marginalised persons, including for HIV/AIDS infected persons.

The health status of imprisoned people is regularly lower than the health status of the free population. People who are incarcerated often come from poor and deprived segments of the population and include migrants, ethnic minorities, people without employment, people with substance use disorders or sex workers. Many diseases concentrate in these vulnerable and 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. Incarcerated people go on leave, receive visitors and sometimes attend outside work placements or health care facilities.

The vast majority of people who are incarcerated 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 prevention and health care measures in prisons. Unfortunately, prisons often do not adequately meet the health needs of prisoners and do not sufficiently contribute to the protection of public health.

In addition to the high risks of the transmission of communicable diseases, people who are detained are often subject to stigmatisation due to their dependence. The fear of being caught for drug possession, as well as backlash from 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.

The Pompidou Group promotes a human rights-based approach to drug policy encompassing all areas, from drug policy development through implementation and monitoring to evaluation. 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 include the right to be free from non-consensual medical treatment, torture and other cruel, inhuman or degrading treatment or punishment. 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. Supervising and monitoring Therapeutic Community Implementation in Moldova

1.1 Summary

A monitoring and supervision system was established in the framework of the project to support a smooth implementation of the new in-prison Therapeutic Community (TC) "Catharsis" which was established in the previous project cycle. Regulations were approved by the National Administration of Penitentiaries of the Republic of Moldova (ANP) which allowed the first patients (residents) to enter the treatment programme in July 2018. By the end of 2018, 25 residents were enrolled in the treatment programme. Experts from Norway and Romania visited the prison and provided supervision and advice.

1) Declaration on Prison Health as part of public health
http://www.euro.who.int/__data/assets/pdf_file/0007/98971/E94242.pdf

The Moldovan non-governmental organisation “Positive Initiative” was supported by the project to run regular seminars and therapeutic sessions in the Therapeutic Community. The NGO also runs a Therapeutic Community in a village where people released from prison can go. With support from the Pompidou Group, the NGO also implemented a small animal breeding project in the TC to enrich the therapeutic programme for the patients. The NGO produced a documentary video about this programme. Also, a short testimony video featuring an interview of one of the residents of “Catharsis” was produced and shown at the Ministerial Conference of the Pompidou Group in Stavanger in Norway on 27 November 2018. After the conference, a study visit to Norway was organised for a group of Moldovan prison specialists to learn more about the Norwegian experience with drug-free treatment programmes.

1.2 Background

The Republic of Moldova is recognised as an example of good practice due to its successful in-prison HIV programmes. In the early 2000s Moldova introduced Opiate Substitution Treatment (OST) and a Needle and Syringe Exchange Programme (NSP) in most of its prisons. As a result, HIV among prisoners dropped by over 50 percent.



Photo by Yon Savin

Needle and syringe exchange programme in Moldovan prisons

This was expected, because research consistently shows that OST 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, even at the highest security standards, 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.

Today, opiate-dependent people who are incarcerated can receive liquid methadone, a medication that reduces cravings for drugs and consequently the risk of infections through injecting. Since 2010, to increase the impact and coverage of these programmes, the Pompidou Group has 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 has improved. In 2013 Moldova joined the Pompidou Group as a full member state, thanks to the Pompidou Group's consistent support for 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 to 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 toolkit 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. As a first step, the Pompidou Group agreed to assess the feasibility and costs of establishing Therapeutic Communities in prisons.

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 in-prison TCs. Following a SWOT analysis the team concluded that establishing TCs in Moldovan prisons is feasible.

The Pompidou Group and the Department of Penitentiary Institutions of the Republic of Moldova signed a Memorandum of Understanding (MoU) on 29 May 2015 with the aim of consolidating effective co-operation between the two parties in the implementation of the activity "Establishing Therapeutic Communities in Prisons".



Photo by Yon Savin

Therapeutic Community Catharsis in Pruncul prison

Between 2015 and December 2016 the Pompidou Group trained a multidisciplinary team consisting of 50 prison managers, doctors, psychologists and 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.

In 2017 the Pompidou Group granted 58,000 Euros to the Department of Penitentiary Institutions (DPI) for the refurbishment of a prison ward to accommodate the Therapeutic Community. The refurbished area has space for 25 drug-dependent prisoners and satisfies European standards as regards to space, equipment and living conditions.

The first in-prison Therapeutic Community in the Republic of Moldova was officially opened in Pruncul prison in November 2018. Today, “Catharsis” is home to 25 residents coping with drug problems, who are learning skills there that will help them to live a healthy and stable life after release from prison.

1.3 Actions and results

1.3.1 Supervision and monitoring

After the official opening of the Therapeutic Community in November 2018, the National Administration of Penitentiary Institutions ²⁾ of Moldova (ANP) drafted and adopted regulations for the selection and treatment of inmates who are to be enrolled in the treatment programme of the TC. These regulations are based on the principles and recommendations for running a TC provided by Pompidou Group experts. The treatment programmes of “Catharsis” are based on a well-developed methodology for treating drug dependence. It is an evidence-based methodology that has been successfully introduced worldwide and adapted to suit local cultures and traditions. The prison staff and therapists working in the TC provide a wide range of behavioural and psychological interventions to help the resident change from a dependent lifestyle to a life without drugs.

The resident has an opportunity to investigate the challenges and to change his or her perception and behaviour in response to these challenges. “Catharsis” is closely linked to rehabilitation-oriented aftercare programmes such as the programmes run by the NGO Positive Initiative and other NGOs. In addition, it allows the resident to earn some money through the breeding of quails and selling their meat and eggs. The income is used to cover costs for necessary improvements in the facility. In July 2017, the first 10 incarcerated persons entered the treatment programme and became the first residents. The NGO Positive Initiative and the ANP together developed a daily programme including therapeutic sessions. To support this critical first phase of TC implementation and to provide advice on practical and medical issues, a supervision and monitoring system was established by the Pompidou Group. Norwegian and Romanian TC experts now travel every four months to Moldova to assess the progress and give recommendations to prison managers and NGO staff involved in the daily programme of the TC.

1.3.2 Testimony video and photo exhibition

To inform the public and interested stakeholders about the results and innovativeness of the new in-prison Therapeutic Community in Moldova, a resident of the treatment programme was interviewed and filmed. A five-minute testimony video was then produced by a Moldovan film company. In addition, a photographer shot photos of the social and medical environment for drug-dependent people who are incarcerated in Moldovan prisons. The photos were then printed on large canvases and presented at the Ministerial Conference of the Pompidou Group in Stavanger in Norway on 27 November 2018.

²⁾ In 2017 the Department of Penitentiary Institutions changed its name to National Administration of Penitentiary Institutions (ANP)

The testimony video was presented to the high-level representatives of the 39 member states of the Pompidou Group and also shared through different communication channels, such as social media and the website. The video can be watched on the YouTube page of the Pompidou Group.

1.3.3 Study Visit to Norway



Photo by Phoenix Haga

Phonix Haga rehabilitation centre

The Pompidou Group organised a study visit to Norway for Moldovan prison specialists. The Moldovan delegation visited the Therapeutic Community (TC) “*Phoenix Haga*” and met with staff and residents of this drug-free drug dependence treatment programme.

The delegation consisted of the deputy director of the National Administration of Penitentiaries of the Republic of Moldova, two prison directors, the head of the in-prison TC “Catharsis” and a therapist representing the NGO „Positive Initiative” that supports the implementation of activities in “Catharsis”. “*Phoenix Haga*” is a residential drug-free treatment centre located outside Oslo with a long tradition of good treatment results. On the next day, the delegation visited *ARKEN*, a treatment programme for women. The participants used the study visit to discuss and learn from Norwegian experiences on how to improve and monitor the development of drug treatment services in the Moldovan prison system.

Visit to “*Phoenix Haga*”: “*Phoenix Haga*” is a Therapeutic Community in south eastern Norway, approximately 68 kilometres from Oslo. The organisation has an independent board of directors and is a registered not-for-profit foundation. “*Phoenix Haga*” is approved as a multidisciplinary specialist health treatment centre, within national substance abuse treatment regulations.

The Regional Health Area Authority for the South Eastern Region contracts for 26 treatment places in the primary residential setting. Other treatment places are purchased by various other regional health authorities throughout the country. An evaluation undertaken at “*Phoenix Haga*” found that almost 70% of persons remained drug-free at follow-up.³⁾ This concerned all persons admitted to treatment during the period 1997-2002.

Visit to „Women’s Treatment Centre *ARKEN*“: *ARKEN* is a residential treatment programme that has existed since 1987. Treatment lasts for 6-9 months. The centre is only for women, in order to create a safe place for them. *ARKEN*’s methodology is based on a 12-step treatment programme, consisting of daily group therapy and individual therapy. Therapists at *ARKEN* have an interdisciplinary, medical and psychological approach. Opiate Substitution Treatment is not allowed. *ARKEN* also focuses on aftercare, which includes participation at AA / NA 12-step meetings. The entire *ARKEN* philosophy is based on helping women return to lasting freedom from drug dependence and to a respectable life.

2. HIV Prevention and Rehabilitation of Juveniles in Ukrainian Prisons

2.1 Summary

In 2018, Ukraine started developing a roadmap for Opiate Substitution Treatment in its prisons. In this context, the Pompidou Group of the Council of Europe organised two high-level workshops following a request by the Ukrainian Ministry of Justice to provide prison staff with the necessary technical assistance and advice on how. Moreover, staff of three juvenile prisons were trained on the implementation of Family Conference methodology. A scientific paper on the piloting of Family Conference in Ukrainian juvenile prisons was drafted and published. In 2018, Family Conference methodology became one of the standard therapeutic tools that is mainstreamed in all juvenile prisons in Ukraine.

2.2 Background

Ukraine is a country with a relatively high prison population rate (332.4 per 100,000 in 2012; 276.0 per 100,000 in 2014). A significant proportion of people going through criminal systems worldwide are drug-dependent or use drugs, as a considerable proportion of people who inject drugs are imprisoned during their lifetimes.

3) AimResearchBasedConsulting, pub, 2006

15% of all inmates in Ukraine have been incarcerated for drug-related offences, excluding crimes committed to finance their drug use. These data are confirmed by the statistics of the State Penitentiary Service of Ukraine (2011): the number of prisoners incarcerated because of drug law violations constituted 10,300 persons (14% of all sentenced prisoners) on 1 September 2014. A more recent nation-wide study suggested that 47% of prisoners transitioning to the community were people who inject drugs (PWID).

According to the WHO, new HIV infections in the general population of Ukraine increased from 9,500 in 2010 to 15,680 in 2017. 4) There is no clear picture regarding the prevalence of HIV and HBV/HCV in prison systems. Documented cases or data are limited, accurate data are difficult to access, and mandatory virus tests are not carried out on incarcerated people. Different surveys suggest that 8-20% of inmates in Ukraine are HIV-positive.

Pompidou Group experts stated, that the Ukrainian approach to the care and treatment of inmates with drug-related problems showed a number of shortcomings. 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 pre-trial detention. Life-saving medications such as Naloxone that are effective in reversing overdose symptoms are also not available in prisons.

Juveniles who are incarcerated in Ukraine are particularly vulnerable to substance use disorders and related social and health problems in prison and after release. 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 a few services available that may prevent the young people from becoming drug-dependent. Since 2013, the Pompidou Group has supported the training of prison staff working in institutions for juvenile delinquents in Ukraine. Thanks to the two projects "Supporting Drug Treatment Systems" and "Improving Drug Treatment Systems" this support could be intensified from 2015 to 2017.

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 to learn more about risk assessment and drug prevention tools.

4) UNAIDS 'Global AIDS Monitoring 2018: Ukraine Summary'

Family Conference

„A Family Conference is a guided meeting between detained juveniles and their parents or other relatives with the aim to restore relations, in order to make plans to guide and support the juvenile during the incarceration or after release. The juvenile can focus on a particular question (s)he wants to address with the persons (s) he chooses. In addition to parents and siblings, extended family members or other related people may be invited. The root causes of the criminal behaviour and problems often get attention too. The Family Conference is coordinated by a trained staff member who makes sure that preconditions are met to have a meeting that is safe and well prepared. The plan made during the Family Conference can be used to improve family relations and to support re-socialisation and re-integration of the juveniles into society. Central to the success of the Family Conference is the aim to create space for the juvenile’s initiatives and participation in his or her future plans.”

A documentary was produced in 2016 by the Pompidou Group to explain the implementation and show the results of a Family Conference in Preluky prison. The documentary is available on the YouTube channel of the Pompidou Group. At the end of 2016, the Ukrainian prison administration and the Pompidou Group agreed to build a solid evidence-base for the implementation and proper use of a systematic approach and Family Conferences in Ukrainian prisons. In 2017, an independent expert commissioned by the Pompidou Group in the framework of the project “Supporting Drug Treatment Systems in Prisons” started an evaluation of the application of Family Conferences in the prisons of Melitopol and Preluky. This research project was continued in 2017 in the framework of the new project “Improving Drug Treatment Systems in Prisons (2016-2018).

2.3 Actions and results

2.3.1 Improving the rehabilitation of juvenile prisoners

Family Conference

In 2017 four training sessions were organised for the staff of Preluky and Melitopol prisons. Due to the high interest of the Ukrainian Criminal Executive Service ⁵⁾ in Family Conferences, these workshops focused on providing the practical know-how and recommendations for the implementation of this therapeutic tool. Three correctional institutions (Melitopol, Preluky and Kremenchug) successfully piloted more than 40 Family Conferences in 2017.

5) Formerly named Ukrainian State Penitentiary Service



Photo by Pompidou Group

A Family Conference participant with his daughter and girlfriend

The following three institutions are based in different small cities in Ukraine.

Preluky: Currently 48 boys incarcerated, in the past up to 200-250. Those in the current group are serving relatively long term sentences for serious crimes. Around 30 Family Conferences were carried out by the end of 2017.

Kremenchuk: In the past up to 1000 boys were incarcerated in this facility, and at the time of writing, the number stands at 59 boys. In 2018 about 30 boys from Kharkiv were transferred to Kremenchuk. The boys are between 15 and 22 years old. They started participating in Family Conferences in April 2017.

Melitopol: This is the only correctional institution for girls in the country. Previously up to 200 girls were incarcerated in this facility, but now only 10. The facility has also been made suitable for adult women in part. 11 Family Conferences were carried out here by December 2017.

2.3.2 Evaluation of Family Conferences

The evaluation of the Family Conference pilot project in Ukraine started in the framework of the previous Pompidou Group project “Supporting Drug Treatment Systems in Prisons” and was continued with the project “Improving Drug Treatment Systems in Prisons” (2016-2018).

The literature research showed that a systematic approach is crucial when working with youth, especially when they have taken the path of criminal behaviour. A young person’s family and other close circles are crucial for him or her to grow up in a safe and positive environment. A systematic approach that focuses on a person’s network can also assist juveniles who have been detained to move towards a good and solid reintegration. It is therefore often used as a tool in juvenile correctional institutions in many countries.

Risk assessment tools and family structure methods turn out to be effective in prevention of crime, but also during detention to prevent wrongful future behaviour. The use of restorative justice in prisons and closed facilities for juveniles is also increasing worldwide. Diverse programmes aim to educate inmates about victim awareness. In some situations, offenders can work towards a meeting with the victim and if people from both networks join, it may result in a Conference. Meta-studies show positive satisfaction rates of the participants, higher feelings of justice and less recidivism. Ways of working with the offender towards self-restoration and restoration with family or others in their network may also be seen as restorative justice approaches. Such experiences have influenced the Family Conference method as introduced in Ukraine.

Twenty-five people – juveniles, parents and staff – were interviewed for the evaluation. The interviews showed that two approaches have been developed in practice. The first uses Family Conferences to establish contact with the (family) system and to restore relations between the members of the system during incarceration, offering direction in the way the particular juvenile should be guided and treated. The second type is focused on the release and reintegration of the juvenile into the family or another local context.

The plan then made is geared towards reintegration into society. The interviews conducted, the discussions in the focus group and additional reflections indicate that it is important to offer both options, one in the beginning of incarceration and the other at the end phase, focused on reintegration. When juveniles are imprisoned for several years, a Family Conference in between (once a year for example) may also be beneficial. Additional training sessions for relevant staff are a condition for continuity and maintaining quality, as are monitoring, supervision and evaluation.

One mother involved in a FC said:

“First of all, it was the child’s behaviour – we could not have contact with him, it wasn’t possible. If I made a comment to him, he was so quick-tempered. After the Family Conference this changed, he agreed, he saw that we wanted to talk. It got much easier – he’s calling and already talking in a different way, he can say „Mom, I love you“ – which I had never heard before. On the contrary, before, if I commented on his behaviour, he took it badly. Now this isn’t happening, he will listen. And that is what I like. A lot of things have changed.”

The results of the pilot phase have shown that juveniles were happy to have had the opportunity to restore social relations and even though they said it was sometimes hard to be more open to their parents or others involved, it benefitted them all and they would recommend it to others. All the interviewed staff mentioned positive changes in the participants’ attitudes through the Family Conference on a personal level, but also a more open and positive atmosphere within the institution. Items that need further attention are follow up and aftercare, that are now sometimes scarce. Giving attention to a smooth reintegration is crucial in order to meaningfully contribute to the rehabilitation of the juvenile into society without a high risk of recidivism and to be able to monitor and guide safety issues if they occur. Solid training and continuity of the programme were also mentioned in this regard. Other recommendations are focused on a more structural embedding in the juvenile justice system and strengthening cooperation with probation and other organisations in the criminal justice chain. Meetings with the Ministry of Justice and probation personnel have been part of the project, and here the methodology has been welcomed very much too. Details of a concrete policy to implement the method in all prisons are still to be worked out.

As shown during the presentation of the Family Conference model by Pompidou Group experts at conferences in Moldova and Albania, it can inspire other countries or other institutions’ management to work with a similar method, which can easily be adapted to the local context. A Family Conference provides the young detainees and their network with useful and safe methods on how to connect again with their families and social networks.

The psychologist of Melitopol prison said:

“The usefulness of this technique is that it addresses family problems, and the teenager, naturally, has such problems, since they are in our institution, and their problems are often related to the family. If there is such an opportunity, if a teenager has a desire to change something, this is already a plus. And if there are parents who also want to change something in their lives, this is also a plus.”

The results of the evaluation have been presented to senior officials in the Criminal Executive Service of Ukraine in April 2018, which led to the institutionalisation of Family Conference methodology in Ukrainian juvenile prisons.

2.3.3 Workshops on HIV prevention and drug treatment in prisons

At two workshops on Drug Treatment and HIV Prevention held in Kiev from 5 to 9 November 2018, a multidisciplinary group of professionals working in six different Ukrainian prisons and the probation service, as well as senior managers of the State Criminal Executive Service of Ukraine, the Prosecutor's Office and the Medical Centre of the Ministry of Justice developed recommendations based on international rules and standards relating to the safeguarding of human rights and public health of people who are incarcerated. The workshops were organised following a request by the Ukrainian Ministry of Justice to provide prison staff with the necessary technical assistance and advice on how to reduce HIV transmissions in prisons through drug treatment programmes.

A goal of the workshop was to prepare the staff for the practical implementation of Opiate Substitution Treatment in Ukrainian prisons and to improve their knowledge on effective and efficient drug treatment interventions that also help to prevent HIV transmissions in prisons. The Deputy Justice Minister of Ukraine attended the workshops and promised to support the implementation of Opiate Substitution Treatment.

The experts from Germany, Moldova, Slovenia and Israel who participated in the workshops urged the Minister to take "immediate steps to implement Opiate Substitution Treatment and drug overdose prevention programmes to reduce HIV infections and deaths in the country's prisons". More than 50 participants including many senior prison managers attended the two events.

Recommendations

Based on draft recommendations prepared by the participants of the training workshop that took place from 5 to 7 November 2018, the senior managers of the State Criminal Executive Service of Ukraine developed, in the following days, recommendations based on international rules and standards relating to the safeguarding of human rights and public health of people who are incarcerated. The guiding principles for these recommendations are laid down in international law, recommendations by international organisations and prison health standards.



Photo by Pompidou Group

Participants of the Executive Training together with Deputy Minister of Justice of Ukraine, Denys Chernyshov

Recommendation 1: Pilot nationwide Opioid Substitution Treatment

- a) Opioid Substitution Treatment (OST) should be piloted in several correctional institutions in different regions of Ukraine. The correctional institutions should be selected based on an objective set of criteria and with the goal of testing OST under different conditions. It would also be advisable to pilot OST in a prison for women. The implementation phase should be monitored in order to better understand and react to the specific challenges of the Ukrainian prison system.
- b) OST implementation should follow a multidisciplinary approach involving staff of relevant institutions, such as the State Criminal Executive Service of Ukraine, psycho-social and probation services, community doctors ('narcologists') as well as NGOs, who will distribute the workload in an efficient and proportional manner.
- c) Eligible patients who are incarcerated should not only have the possibility to continue treatment that had been started in the community or detention, but also be able to start treatment in the prison even if they had not previously been enrolled in OST or other drug treatment programmes.
- d) Staff responsible for the delivery of OST services should be properly trained and financially rewarded for additional working hours or in cases where they have achieved a higher professional qualification that adds value to their services.

- e) Considering that OST is more effective when combined with psycho-social interventions, psychologists who are responsible for OST patients should be trained in how to use evidence-based therapeutic methods, such as cognitive behavioural therapy and motivational interviewing.
- f) Based on international standards and guidelines on OST implementation, standard operating procedures should be developed that determine the roles and responsibilities of all staff involved, and provide guidance on how to implement OST in an efficient and effective manner while focusing on the health and security of both the people who are incarcerated and the staff.
- g) There should be a continuation of OST services for patients from the community, throughout police arrest, pre-trial detention (“SIZO”), detention/prisons (“colonies”), and once back in the community. If patients in OST in the community are arrested and sentenced, OST should be provided at each stage of the criminal justice system.

Recommendation 2: **Prevent Drug Overdose**

- a) The State Criminal Executive Service of Ukraine should recognise that there is a risk of drug overdose in prisons, even when high security standards are maintained.
- b) The drug overdose reporting system of Ukraine should be improved and should follow principles of objectivity, trust and confidentiality. Fear of punitive sanctions or administrative complications should not prevent prison staff, doctors or inmates from calling for help or administering first aid in the case of an overdose.
- c) Consequently, naloxone should be available in all prisons as a life-saving medication in the event of an overdose.
- d) Prison staff and people who are incarcerated should be informed and educated about the risks of overdosing in prison and shortly after release from prison, when relapses into opioid use might occur. They should be trained to recognise the symptoms of overdosing and administer naloxone.

Recommendation 3: **Strengthen the right to treatment**

- a) People who are incarcerated should have the right to enroll in drug treatment programmes that are integrated into a coherent drug treatment system that combines drug-free treatment and medication-assisted, psycho-social interventions that are at least of the same scope and quality as comparable health care interventions provided for the general public.

- b) Prison-specific drug treatment interventions such as drug-free wards, in-prison Therapeutic Communities and pre- and post-release programmes should be developed and / or improved.
- c) People who are incarcerated should be given the opportunity to carry out meaningful activities in prison to prevent boredom and emotional distress that can trigger drug use.
- d) Drug treatment programmes should be run by well-informed and trained staff and should be designed with special attention to vulnerable groups, in particular women, juvenile prisoners and people serving long-term sentences.
- e) Health care workers and staff of psycho-social services should not be involved in security procedures, in order to guarantee the confidentiality of their work with patients who are incarcerated and to increase their motivation to participate in treatment and rehabilitation programmes. Medical tasks required by the prosecution, court, or security system should be carried out by medical professionals who are not involved in the care of inmates.

3. International Co-operation on Prison Health in Europe

3.1 Summary

The Project made it possible for the Pompidou Group to share its practical experiences in Eastern Europe with colleagues in other international organisations, in order to coordinate international cooperation efforts and to raise public awareness for prison health and human rights-based drug treatment programmes. The Pompidou Group continued to participate in steering group meetings of the Health in Prisons Programme of the WHO, organised side-events at a global event, the AIDS 2018 Conference in Amsterdam, and prepared events and research projects jointly with other international and European organisations.

3.2 Background

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

(EMCDDA): The EMCDDA and the Pompidou Group have been working together closely for 23 years. The Pompidou Group is a permanent observer on the EMCDDA Management Board, while the EMCDDA participates at the meetings of the Pompidou Group's Permanent Correspondents. Memoranda of Understanding were signed between the two bodies in 1999 and 2010.

Cooperation between the two bodies is decided on the basis of their respective work programmes, and progress on joint activities is documented in an annual report. The MoU allows for a regular exchange of information and technical expertise between the two bodies, encouraging the creation of synergies to avoid any duplication of effort.

3.3 Actions

3.3.1 World Health Organization International Meeting on Prisons and Health

The World Health Organization (WHO) international meeting on prisons and health, held in Lisbon, Portugal, on 11–12 December 2017, brought together more than 100 experts in the field of prison and public health from 30 countries worldwide; besides the WHO Regional Office for Europe, several other international and European agencies were represented, including the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), the Council of Europe's Pompidou Group, the European Centre for Disease Prevention and Control, the United Nations Office on Drugs and Crime, and the Ministry of Health and the Ministry of Justice of Portugal; support was provided by Public Health England (PHE), the UK Collaborating Centre for the WHO Health in Prisons Programme (HIPP).

The participants of the meeting proposed conclusions for wider dissemination to all those who could improve the current position worldwide with respect to drugs and drug-related harm in prison, which continue to challenge prison systems and the wider community.

The WHO international meeting on prisons and health contributed to sharing good practice internationally, maintaining and improving professional development and capacity in the prison health system; it also allowed discussion of the challenges currently facing the prison setting with respect to public health and health service delivery and has encouraged debate on the scientific evidence that supports policy and intervention.

The meeting's conclusions aimed to fully acknowledge the role of prisons as important settings to address health inequalities and to recognize the status of people in prison as a disadvantaged group in terms of health and well-being. These conclusions direct the attention of policy-makers, professionals and prison administrators to the necessity, in terms of both public health and social well-being, of enhancing knowledge and understanding of effective interventions on drugs and drug-related harm in prison (including tobacco- and alcohol-related health harm), and of ensuring that interventions to reduce drug use and drug-related health harm are evidence-based, particularly in a setting as sensitive as a prison, where people have been deprived of their liberty. Applicable also to people in youth detention settings, these conclusions recognise that – in order to achieve lasting improvements in the health of people who experience incarceration – treatment and prevention efforts in prison and youth detention settings must be sustained after these individuals return to the community.

3.3.2 Prison Corner at the AIDS 2018 Conference



Photo by Pompidou Group

Participants at the Prison Corner, AIDS 2018 Conference in Amsterdam

More than 5,000 people visited the Prison Corner in the networking zone of the Global Village at the AIDS 2018 Conference that took place in Amsterdam from 23 to 27 July 2018. The Pompidou Group delegation discussed with them key interventions to stop the spread of HIV behind prison walls such as medication-assisted drug treatment and harm reduction. During the five days the visitors and conference attendees could stop by, grab a coffee and participate in a full programme with interactive debates, interviews and presentations.

People who had been incarcerated prepared coffee for the international crowd of participants and shared their stories of recovery and resocialisation. The prison corner helped to raise awareness about the risks of HIV and drug use among the most vulnerable in our societies. In addition, it showcased the results of the Project through various visibility actions. The activity was organised in partnership with following partners: Aids Foundation East-West, Asian Harm Reduction Network, International Corrections & Prison Association, Health Through Walls and UNODC.

Side-event 1:

Effects of drug policy reforms on the drug situation and blood-borne diseases in prisons

Content of discussion: The evidence about the costs, effects and unintended consequences of drug control policies is becoming increasingly available, and puts pressure on policy makers to find more effective responses for people who are in trouble with the law because of drug-related offences. As a result of these issues some countries have decriminalised drug use and possession in order to reduce some of the negative consequences of drug prohibition. What effect does this have on people in prisons as well as prison staff in those countries? Did the number of incarcerated persons who use drugs drop? Did the prison environment change?

Drug policy reforms have an impact on the situation in prisons, people in prison and personnel working in prisons and can have an effect on the drug situation and blood-borne diseases in prisons.

Side-event 2:

Are opioid agonist and drug-free treatment competing philosophies?

Content of discussion: Opioid Agonist Treatment is an effective and important tool in the fight against HIV and Hepatitis C and can help opiate-dependent people to stop or at least reduce their use of illicit drugs. Drug-free treatment on the other hand helps people who are not dependent on opiates and want to stop using or overusing drugs.

An effective and people-centred drug treatment system should comprise medication-assisted treatment, like Opiate Substitution Treatment, harm reduction, and drug-free approaches. Drug treatment services in prisons are especially effective if they are embedded in the general health and social care system.

3.3.3 Preparation of the second European Conference on Health Care in Prison

In January 2018, the Pompidou Group participated in the preparation and conceptualisation of the second European Conference on Health Care which will take place in Lisbon on 21-22 October 2019. The conference aims to combine daily practice with scientific theory and evidence.

The 2019 conference provides space for discussion and exchange in order to provide the urgently needed answers to key challenges faced by health care professionals and people who are incarcerated. The conference hopes for active involvement of people from practice, research and monitoring, law enforcement agencies, international organisations, NGOs as well as administrators or people with personal prison experience.

The following key topics will be covered during the conference:

- Human rights
- Determinants of health (social, architectural, overcrowding, management, etc.)
- Drug use, addiction and treatment, including harm reduction
- Best practice examples
- Interfaces / cooperation inside-out and through-care
- Prisoner representation, involvement and persons-first terminology

The conference will be organised jointly by the Pompidou Group, Health without Barriers, EMCDDA, Public Health England, Hôpitaux Universitaires de Genève, Frankfurt University of Applied Sciences/Institute for Addiction Research (Heino Stöver), UNODC and the Dutch Custodial Institutions Agency.



Conclusions

The project “Improving Drug Treatment Services in Prisons” (2016-2018) has built on the results and lessons learned from the previous projects implemented between 2012 and 2016 and made a strong contribution to sustaining good practices and rolling out in-prison drug treatment services in the Republic of Moldova and Ukraine in coordination with other international and European organisations.

Based on desk reviews, participants’ evaluations and expert opinions, the project “Improving Drug Treatment Services in Prisons” (2016-2018) has been highly relevant to its beneficiaries. The Moldovan and Ukrainian counterparts have repeatedly thanked the Pompidou Group and the Fonds de lutte contre certaines formes de criminalité via official letters for their support.

Thanks to the Pompidou Group’s continued support for Ukraine and Ukraine’s interest in being a more integral and active part of the wider European drug policy framework, the Ministry of Justice, Ministry of Health and the Ministry of Finance drafted in November 2018 a law to join the Pompidou Group, which will be submitted to the Ukrainian parliament.

The project objectives were matched with the Council of Europe’s broader objectives in improving human rights and public health in penitentiaries as outlined in the country-specific Action Plans. The training seminars, workshops, conferences and round tables were well covered in mass media and were clearly and regularly communicated to relevant stakeholders.

The Pompidou Group is confident that the project has made a difference in the prison health care environment in the project countries. Governmental and non-governmental partners showed great interest in the project activities and the subjects dealt with during the seminars.



Prepared in December 2018 by the Pompidou Group Secretariat for the attention of the
Fonds de lutte contre certaines formes de criminalité
of Luxembourg