



## ***“Prison and drug use: management, costs and criteria”***

### **A UNICRI Symposium**

**Wednesday, 23 September 2015 h. 12.45-14.15**

**Room 5**

**Lisbon Addictions Conference 2015**

**First European Conference on Addictive Behaviours and Dependencies**

**SPONSORED SESSION IV**

### **Scope, purpose and participants**

The Symposium on “Prison and drug use: management, costs and criteria” aims to contribute to the debate on the health, social and economic costs of drug use in prisons and drug-related incarceration in Europe.

To this purpose, representatives from international organizations (UNICRI and WHO) academic and research institutions (University of New South Wales and the Italian Council for Social Sciences) and non-profit organizations (Italian Coordination for Health Professionals in Prisons - Co.N.O.S.C.I.) will provide their contribution on the following issues:

1. Improving prison health management to increase access to drug prevention, treatment and risk reduction interventions.
2. Understanding the impact of drug control policies on prison costs.
3. Establishing evidence-based criteria for the assessment of substance use disorders to support the criminal justice system in the implementation of alternative measures to prison.



The Symposium will be open to all participants to the Lisbon Addictions Conference. A light lunch will be offered.

Since limited places are available, please contact UNICRI (Alice Rena: rena@unicri.it) to confirm your participation and reserve your place.

### **Individual contributions**

1. *Prison health management, access to treatment and risk reduction: policies, practices and challenges*, Lars Møller, WHO Regional Office for Europe
2. *Opiate Substitution Treatment (OST) in prisons and post-release: its impact in reducing mortality*, Michael Farrell, NDARC, University of NSW
3. *The costs of drug-related incarceration in Europe*, Carla Rossi, Italian Council for Social Sciences
4. *Establishing evidence based criteria for the assessment of drug addiction to facilitate access to alternative measures to prison*, Sandro Libianchi, Co.N.O.SC.I
5. *Non custodial sentences for persons with Substance Use Disorders: addressing the need for the criminal justice system to consider the offenders' psycho-social dimensions*, Alice Rena, UNICRI

**Chairperson: Alessandra Liquori O'Neil, Programme Officer, UNICRI**

**Discussant: Matthew Hickman, BSc, MSc, PhD, Professor in Public Health and Epidemiology, University of Bristol**



## **About the presenters:**

### **Michael Farrell, FRCP FRCPsych**

Director, National Drug and Alcohol Research Centre (NDARC), University of New South Wales, Australia

### **Sandro Libianchi, MD**

President, Italian Association for Health Professionals in Prisons (Co.N.O.S.C.I.), Italy

### **Lars Møller, MD DrMSc FFPH**

Programme Manager, Alcohol and Illicit Drugs; Division of Noncommunicable Diseases and Life-Course; WHO Regional Office for Europe

**Alice Rena**, Fellow, United Nations Interregional Crime and Justice Research Institute (UNICRI)

### **Carla Rossi, Ph.D**

Vice President, Italian Council for the Social Sciences (CSS), Italy

## Highlights for discussion

- According to WHO, over 2 million people are imprisoned in penal institutions in Europe at any given time.
- Evidence shows that incarceration can exacerbate existing physical and mental health conditions through factors such as limited access to sufficient health care, overcrowding and poor nutritional and hygienic conditions.
- There is an increased risk of acquiring blood-borne diseases through the exchange of infected tools or unprotected sex. Prison population subgroups, such as young offenders, women and LGBT (lesbian, gay, bisexual, and transgender) people, face additional challenges in prison settings.
- Worldwide, as well as in many EU countries, injecting drug users are over-represented in the prison population, with rates of ever-injecting drugs while incarcerated between 2% and 56% (EMCDDA).
- A prison sentence for a person using drugs may represent a lost opportunity to recover from a substance use problem, and, in fact, prison itself may be conducive to the initiation or escalation of drug use.
- Rates of relapse, psychiatric and infectious comorbidity, and overdose mortality are much higher among people with a substance use disorder not treated in prison, than among the general population.
- Violence, stigma, lack of trained staff, isolation of prison health services from public health and lack of alternatives to imprisonment are all factors that may impede the effective management of persons suffering from substance use disorders who are sentenced to prison.
- Prevention, treatment and risk reduction in prison, as well as alternatives to imprisonment, have been shown to be effective in reducing morbidity and mortality associated with drug use, as well as in mitigating the social and health consequences of returning people with substance abuse disorders and related diseases back to society after serving prison sentences.

- However, insufficient financial resources, prison governance and security issues have made it difficult to implement these interventions in prison settings, as well as to evaluate their cost effectiveness.
- To this purpose, this Symposium wishes to offer a contribution to the debate on the economic, social and health costs of drug-related incarceration in Europe, by addressing the following issues: 1) organizing health management in prison, in order to increase access to prevention, treatment and risk reduction interventions. 2) understanding the impact of drug control policies on prison costs, , 3) establishing evidence-based criteria to assist the criminal justice sector in the assessment of drug addiction, in order to facilitate access to alternative measures to prison
- Point 1) addresses the need to increase access to health care and harm minimization strategies within prison settings, by minimizing the structural and environmental challenges related to designing and implementing health care programs within the criminal justice systems, as well as enhancing coordination between the health sector and the criminal justice system, which in some countries share the responsibility of managing health care in prison.
- Many instruments have been developed by the international community to address this situation, which could enable countries to implement a comprehensive, sustainable and gender sensitive strategy, based on human rights international instruments such as the UN Standard Minimum Rules for the Treatment of Prisoners, the Basic Principles for the Treatment of Prisoners and the UN Rules for the Treatment of Women Prisoners.
- Regarding point 2), an overview of the results from a research study conducted within the EU-funded Alice Rap project shall be presented.
- The research study aimed at analyzing the relationship between policies and costs attributable to substance use and addiction occurring in the public health and the criminal justice sectors in three European countries (Poland, Portugal and Spain)

and at providing an estimation of avoidable morbidity and mortality costs associated with key policy actions.

- Criminal justice costs of drug control were estimated in the three countries in order to understand the type, distribution and quota of financial resources made by each country and its consistency with the type of drug control policy enacted.
- The estimate could not capture the relation between the laws and their policy implementation, or the consequences of these investments in the real world and in the lives of the citizens.
- Further analysis could provide useful insights into what type of investments and allocation of resources are made within the three criminal justice sectors, how efficient these investments are in supporting the respective national drug control strategies as well as how effective they are in contributing to the reduction of the negative social and health impacts of illicit drugs.
- For point 3) above, evidence-based criteria to assist the criminal justice sector in the assessment of substance use disorders (SUD) are essential to facilitate access to alternative measures for drug users.
- Diverting drug offenders from prison to treatment has been addressed in various ways by governments worldwide, and these approaches have been basically integrated and organized within national criminal justice systems.
- This has posed various challenges and limitations to the possibility of effective implementation and organization of alternative measures to incarceration for drug offenders in need of treatment because judges are not always willing to take responsibility for decisions that pertain to the medical sphere, such as choice of treatment, referral and supervision of outcome.