

EDITORIAL

Health protection's current challenge: *Why every health department must consider The Madrid Recommendation*

The international conference on health protection in prisons, held in Madrid in October 2009, is now seen as meeting at the right time and in the right place, and with the right mix of experts and practitioners so that a valuable outcome was obtained.

It was the right time, as after 20 years of considerable research, of collection of evidence and experience across the wide field of communicable and other diseases in prisons, it was appropriate to consider what progress had been made and where further development was required. Being in Spain, it was the right place for such a conference as Spain had real experience in the subject which others needed to know about. It was also the right mix of world experts, research workers and practitioners from some 65 different countries so that the outcome, The Madrid Recommendation on health protection in prisons as an essential part of public health, is a short but influential document coming with such support that it should be considered by every health department and public health agency concerned with the better control and the prevention of such important diseases as HIV and TB.

Why was prison health issues selected to be the central focus of the meeting? The sad fact is that in every society in Europe, the greatest preponderance of serious life threatening diseases is likely to be amongst those held in prisons and places of compulsory detention. Communicable diseases such as HIV and Tuberculosis, addictions to various substances and drugs and mental health illnesses and inadequacies, either together or on their own, affect the vast majority of the prison population in every country of Europe and beyond. A deadly mix of old buildings with poor facilities and often in an overcrowded state, of men and women from the least favoured sections of society and with little in the way of social, educational and health understanding and skills and the overlap between certain behaviours and criminal law, has led to the build up there of several of the greatest challenges facing public health today.

The starting point for the Recommendation were the facts and figures regarding communicable diseases such as HIV/AIDS, tuberculosis, hepatitis and sexually transmitted infections prevalent in prisons worldwide. These are accompanied by high numbers of prisoners with mental ill health and with substance abuse and addictions so that prisons and places of compulsory detention had become focal points for life threatening conditions and for multiply disadvantaged people who, if not helped while inside, would quite often in short times carry their health and other problems back to their home communities.

But the other important starting point was that there is now overwhelming evidence that health protection measures, including harm reduction measures, are effective within the settings of prisons, despite the well known tensions between places where secure detention is a primary goal and the basic requirements for health protection, treatment and prevention. There was wide recognition of the proven beneficial results obtained by the government of Spain in the health protection initiatives it had undertaken in its prisons.

The Madrid Recommendation therefore arose from these two facts, that there was a real public health problem in prisons as far as communicable and other diseases were concerned, and that considerable evidence had shown that much could be done in prisons to prevent the spread of these conditions and indeed to contribute to improving the health of the community.

Before finalising its actual recommendations for action, the meeting recognised the considerable differences of opinion which existed throughout Europe and elsewhere about what should be done. As with any public health problem, the availability of evidence, while probably the key factor in producing policy reviews and changes was not the only consideration. Each society has its own view, tradition and history about for example the use of illicit drugs and these opinions cannot be ignored in deciding what is possible to be done.

The core of the Madrid Recommendation however is a quite comprehensive list of measures based on international recommendations from expert organisations such as WHO, UNODC and others, all recognised as international authorities on the subject. The aim is to prevent and control major communicable diseases in prisons. They include:

- The use of alternatives to imprisonment wherever possible, thus reducing overcrowding in prisons;
- Counselling, screening and treatment programmes for infectious diseases, including HIV/AIDS, tuberculosis, hepatitis B and C and sexually transmitted infections;
- Treatment programmes for drug users, according to assessed needs, resources and national and international standards;
- Harm reduction measures, including opioid substitution therapy, needle and syringe exchange, provision of bleach and condoms;
- Availability of post-exposure prophylaxis and prevention of mother-to-baby transmission;
- Guidelines on the hygiene requirements necessary for the management of communicable diseases in prisons and other infections and the prevention of nosocomial infections;
- Guaranteed throughcare for prisoners upon entry and after release from prison, in close collaboration with stakeholders and local health services;
- Mental health support, especially to prisoners suffering from communicable diseases;
- Training of all prison staff in the prevention, treatment and control of communicable diseases in the particular circumstances of prisons.

The list of possible initiatives should be used in two ways. First, it could act as a sort of checklist, for countries to use as part of a review of the adequacy of their present services. Secondly, against an assessment

of the size and nature of the problem, and with local awareness of legal, social and political factors, it lists those actions which countries can consider, knowing that there is available considerable evidence of effectiveness and which have the backing of the key international organisations who are expert in the challenges of communicable diseases in prisons.

The Madrid Recommendation ends with a call for action. It hopes that all countries will recognise the importance of the problem, will review their current position and will select from the list of effective interventions those which are suitable and acceptable to meet the needs of their country.

It will not be easy to get action. We hope that public health will take a leading role in drawing attention to the issues locally and to what could and should be done.

Sustainable progress will require political understanding and leadership. The progress made in Spain suggests that Europe could, within only a few years, improve the health of those in prisons, could prevent the spread of serious conditions and thus reduce the risk to public health of festering foci of diseases in their prisons in their countries.

Lars Møller, MD, Dr.M.Sc.

Regional Adviser a.i. Alcohol and Drugs
Division of Health Programmes
World Health Organization Regional Office
for Europe

Alex Gatherer MD

Temporary Adviser Who Health In Prisons Project
University of Oxford

Brenda van den Bergh

Technical Officer Health Systems –
Prisons and Health
Country Policies and Systems
World Health Organization Regional Office
for Europe