

# Strategic health plan for Federal Prisons in Argentina

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## ABSTRACT

In the last five years, medical care policies for prisons in the Argentine Federal Penitentiary Service (FPS) were developed by the previous Medical Care Assistance Office of this Institution to improve primary medical healthcare. Policies were applied with heterogeneous criteria in comparison to the ones established by the Ministry of Health. This may be why I am interested in taking a deeper look at the Argentine experience in order to guarantee human rights, especially access to health for inmates based in the Federal Penitentiary Service.

These changes could only be brought about by penal reforms such as reductions in overpopulation, the increase of the number of workers and students among inmates, including socio – cultural activities, the creation of penitentiary treatment programmes for first time inmates, adults, and mental disabilities programmes for inmates with a background of drug abuse, which have represented a great step forward towards the fulfillment of the duties of the state. This novel, integrated approach to medical care policies for imprisoned people is based on the assumed responsibility of the Ministry of Justice together with the Health Ministry, enabling equal access to community health assistance in a closed environment like prison.

The reform of medical care policies in federal prisons, leads us to us reflect on the revolutionary changes in public policy management that had not been presented up till now, and that now show a change in direction that the Argentine State has taken towards effective guarantees of human rights for prison inmates.

**Key words:** Health; Prisons; Health Policy; Primary Health Care; Argentina; Health Care Reform; Health Programs and Plans; Human Rights.

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Noblesse oblige, I would like to recognize the immeasurable collaboration provided by the National Director of the Argentine Federal Penitentiary Service, Mr. Alejandro Marambio Avaria, in supplying the relevant information to accomplish this publication.

In 2003, a first approach to comprehensive healthcare in prisons was attempted, and became manifest in the project “Healthy prisons”. At that time, the situation within federal prisons was unlike today’s: countless factors affected negatively the global health of those people deprived of their freedom. Overpopulation and overcrowding as well as recurring violence entailed difficulties concerning the achievement of pre-established objectives.

These problems were solved by mid 2006. By means of a comprehensive assessment, prison policies were redirected towards achieving appropriate detention conditions, in agreement with what is established in article 18 of the National Constitution of Argentina <sup>1</sup>.

The policies mainly consisted of establishing an appropriate classification of inmates; improving prison unities; creating new jobs for inmates; promoting and enhancing the enrollment of inmates; encouraging advance mechanisms concerning the progress of the penitentiary regime; launching socio-cultural activities, as well as professional training and participation of civil society organizations in the interrelation with people deprived of their freedom; as well as

improving the system of handling, hygiene, cooking and distributing food, amongst others.

In Argentina, the right to health is affirmed and codified in Article 75 Clause 22 of the National Constitution of Argentina —incorporating international documents concerning human rights within—, Article 12 of the International Covenant on Economic, Social and Cultural Rights (ICESCR) recognizing “the right of everyone to the enjoyment of the highest attainable standard of physical and mental health”.

Besides, Law 24660 Execution of Freedom’s Privative Punishment establishes in Article 143 that “the inmate has the right to health. Medical attention should be given, and will not be interfered; the inmate should be able to assist to his medical appointments and should get his prescribed treatment. Diagnose studies, treatments and medicines will be given to the inmate free of charge”.

The healthcare system working within the FPS is organized in divisions or sections in each penitentiary unit. There are also unities such as the Federal Penitentiary Complex I-Ezeiza, the Federal Penitentiary Complex II- Marcos Paz and the Federal Penitentiary Complex of the city of Buenos Aires which count upon central penitentiary hospitals capable of absorbing intermediate complexity demand. Nevertheless, more complex cases require the derivation to a hospital outside prison, in the community, to ensure the best medical healthcare.

One of the measures adopted by Healthcare Administration was to replace medical equipment in all prison unities. Therefore, it began the purchase process.

A standard on minimum and indispensable equipment was established taking into account each unity’s regionalization, specialization and complexity to provide primary healthcare to inmates housed within. The same argument was used when establishing a standard for medical professionals and auxiliaries.

The current ratio of medical services within the Federal Penitentiary Service concerning internment beds per patient is 1:23, and concerning physicians per patient it raises up to 1:38.

At present, the FPS is staffed with 244 physicians, specialized in different fields, 100 other professionals —dentists, pharmacists and psychologists, amongst others— and 271 nurses, technicians and auxiliaries.

The Federal Penitentiary Service works determinedly to grant access to healthcare. In this respect, it conceived the use of a record form concerning the

request of healthcare assistance with a copy for the inmate, the nurse and the Medical Healthcare Division in the unity. Since this is a “witness” project, currently it is only being implemented in three unities to assess its effectiveness.

In May 2008, the National Director of the Federal Penitentiary Service —Dr. Alejandro Marambio Avaria— urged the Heads of Medical Services to “strengthen control and supervision measures in all dependant healthcare centers concerning the provision of healthcare, of food supplies and the cleaning of the facilities’ constructions as well as the bedding provided in order to avoid any administrative action affecting the rights of the people housed within” and he ordered a continuous monitoring for patients under special observation.

Within this context, and in order to provide a more comprehensive answer, the Federal Penitentiary Service designed a Program on HIV/AIDS and STD Promotion, Prevention, Capacity-Building and Treatment.

The objectives informed by the FPS in this sense are in agreement with the compliance of the recommendations issued by the United Nation Office on Drugs and Crime in the Diagnostic Mission completed from July 21<sup>st</sup> to July 25<sup>th</sup> 2008: Evaluation and Recommendations to perfecting Prevention and Care Programs concerning drug abuse and HIV, which are currently implemented in the facilities of the Federal Penitentiary Service.

As to speed up bureaucratic procedures, in September 2008 the FPS adopted an authorization procedure before the Ministry of Health concerning the requests of medication, HIV tests, viral load and CD4 cell count, which was centralized in the Healthcare administration office of the National Direction.

Following the same line, two other projects —initiated in 2009— were implemented. The first one approaches Protocols on prevention, diagnosis and treatment of HIV/AIDS, and counts upon the approval of the AIDS office of the Ministry of Health. It was agreed by means of Resolution N. 1342/02 in order to ensure: access to voluntary and confidential diagnosis, consulting, access to studies and treatment for people infected by HIV/AIDS; access to condoms for all people deprived of their freedom, regardless of intimate visits; access to information and to line 0-800.

The second is therefore a resolution project establishing protocols of prevention, care and treatment of tuberculosis, which recalls the strategy of directly observed therapy in agreement with the recommendations of the WHO <sup>4,5</sup>.



In March 2009, by means of the Health Office, prevention campaigns were launched in all penitentiary units.

Special attention was paid to gynecologic control and the promotion of the Sexual Health and Responsible Procreation Program in those units housing women, such as the Federal Penitentiary Complex I-Ezeiza, the Women's Correctional Institute (U.3) and the Federal Women's Detention Facility "Nuestra Señora del Rosario de San Nicolás" (U.31).

On the other hand, a vaccination campaign against yellow fever was set up with the preparations provided by the Epidemiology Office of the Argentine Ministry of Health.

Last April, the Federal Women's Detention Facility "Nuestra Señora del Rosario de San Nicolás" (U.31) vaccinated all housed children together with their mothers, by using the preparations provided by the Health Department and in agreement with what was established in the relevant plan.

Finally, in May 2009, new vaccination campaigns against flu (9000 doses) and against tetanus (6000 doses) were launched amongst inmates and prison staff in all units throughout the country.

As far as prevention measures are concerned, last January the Healthcare Direction provided all medical services with clear instructions regarding the detection, prevention and care of dengue fever. Moreover, in mid 2009, the H1N1 pandemic was handled following the same directions. In that case, the National Direction adopted specific measures for the prevention and identification of H1N1 cases.

As far as to prevent suicides in prisons, in December 2008, the Framework Program on the Prevention of Suicide for inmates housed within the Federal Prison Service was approved as a pilot project.

Besides, programs concerning the addictions currently in force are summarized as follows:

Rehabilitation centers for drug users located in different units according to classification profiles: Drug rehabilitation Center (DRC) "Madre Teresa de Calcuta" in Unit 3 for female inmates; Federal Center of Specialized Treatment for Young Adults "Malvinas Argentinas" located in the Federal Complex for Young Adults, which houses offenders from 18 to 21 years old; Drug Rehabilitation Center "San Agustín" for adult male inmates, in the Federal Penitentiary Complex I; Rehabilitation Center in the North Regional Prison, Unit 7 of the FPS, housing adult male offenders with long sentences; Rehabilitation Center of the Security and resocialization Institute, Unit 6, in Rawson, Chubut, housing adult male offenders with long sentences.

Moreover, ambulatory treatment programs were designed as an alternative to Drug Rehabilitation Centers for the following profiles: inmates with a previous history of psychoactive drug abuse who currently present no addiction, inmates with dual pathology (drug abuse and psychiatric pathology -psychotic-); drug users with severe psychopathic pathology; drug users with a penitentiary behavior which can not be controlled in the DRC (possible pre-imprisonment treatment); drug users serving sentence for sexual offence and drug users imprisoned for drug trafficking.

These ambulatory treatment programs were designed in agreement with the recommendations that the UNODC established in the Diagnostic Mission carried out in July 2008: Evaluation and Recommendations to perfecting Prevention and Care Programs concerning drug abuse and HIV, which are currently implemented in the facilities of the Federal Penitentiary Service.

Between 2007 and mid 2009, a transversal study was carried out to assess the development of children housed with their mothers. With this purpose, the *Prueba Nacional de Pesquisa* a screening test developed by the Argentine Pediatrics Association was implemented together with the CAT/CLAMS test, lead by the Head of the Medical Service of the Federal Women's Detention Facility "Nuestra Señora del Rosario de San Nicolás" (U.31), Dr. Clemente Berardi together with Dr. Horacio Lejarraga, who is the Head of Child Growth and Development in the prestigious Hospital Garrahan in the City of Buenos Aires.

From that research – which was presented before the 35<sup>th</sup> Argentine Congress on Pediatrics<sup>7</sup> – both institutions agreed to sign a covenant with the purpose of enhancing vertical research, creating a specific guide for mother-child care in prisons and involving other penitentiary systems.

By means of joint collaboration between the ex-Scientific Advisory Committee on the Control of Illegal Narcotics Trafficking, Psychoactive substance and Complex Criminality of the Ministry of Justice, Security and Human Rights; the National Program on the Fight against Human Retroviruses, AIDS and Sexually Transmitted Diseases of the Ministry of Health and the Federal Penitentiary Service, concerning a strategic approach to Prevention, Capacity-Building, Treatment and Rehabilitation oh HIV/AIDS, STD and DRUGS, a comprehensive approach to the management of healthcare policies in federal units was implemented.

This led to the approval of an inter-ministerial agreement between the Ministry of Health and the Ministry of Justice, Security and Human Rights by the end of July 2008.

This last program entailed further capacity for healthcare professionals in all units within the FPS.

Currently, all units within the metropolitan area are receiving the fourth Remediar kit. The authorities in charge estimate the completion of the delivery of those kits in the first semester of 2010.

The Program on HIV/AIDS and Sexually Transmitted Diseases was responsible for strategic capacity-building among healthcare professionals and auxiliaries. Moreover, it provides with continuous antiretroviral therapy and prevention supplies – condoms, pamphlets and posters, amongst others – and is in charge of periodic supervision of metropolitan units to ensure the fulfillment of pre-established objectives.

The Mother and Child program supplied with 1,000 kg of powdered milk the children housed with their mothers. It also appointed three professionals to attend the Federal Women's Detention Facility "Nuestra Señora del Rosario de San Nicolás" (U.31), and run, together with the unit's team- the Workshop on Strengthening the Link between Mother and Child.

That workshop, which is run in the inside of pavilions, means the inmates to reflect about their role as mothers and to assume raising regimens on nourishing, games, sleep and sphincter control amongst others.

This experience was presented by the Ministry of Health in the First National Meeting on Child Development and in the Meeting on "Raising Children from a different perspective".

The Tuberculosis Control Program entailed capacity building for a great percentage of clinicians and infectious diseases experts, as well as for other healthcare professionals and auxiliaries developing their job in the units.

During last June, The federal Penitentiary Service started to receive tuberculostatic agents, after training the staff in charge of notifying TB cases and of their monitoring, as well of supervising three laboratories for diagnostic analysis and the relevant delivery of reactive and supplies.

The FPS launched an assessment study of cataract and glaucoma so that the Eye Health and Blindness Prevention Program provides corrective surgery to inmates affected by these diseases.

Currently, the counter reference in community hospitals near to unities has been launched to perform necessary interventions and care.

Within the framework of the Program on Mental Health and Addictions, visits to the Federal penitentiary Complex I were scheduled to assess the needs of young adults housed in Residential Module IV. This action immediately entailed outlining a draft for the creation of a day center.

This Program reported the FPS for consideration on a capacity-building project for the prison's mental healthcare staff, as to involve those closer with inmates in detecting symptoms and providing tools to facilitate their job.

The Program on Sexual Health and Responsible Procreation together with the Federal Penitentiary Service strengthened the contact between the first and medical services within units housing women and is providing supplies to all unities within the metropolitan area. Within this context, its implementation was projected in the Women's Correctional Institute (U.3), which operates since 2006 with about 30 beneficiaries.

At the same time, capacity building was performed on staff from the Women's Correctional Institute "Nuestra Señora del Carmen" (U.13), Federal Prison of Jujuy (U. 22); Federal prison of Salta (U.23); in the Federal penitentiary Complex I-Ezeiza and in the Federal Women's Detention Facility "Nuestra Señora del Rosario de San Nicolás" (U.31) so that the program could be extensively implemented. Currently it is performed in over 100 inmates.

As a means of restructuring, organization and control, a process entailing the categorization and habilitation of medical facilities was launched by express recommendation of the National Direction on Healthcare Regulations and Healthcare Service Quality. These measures enable the assessment of the services provided, human resources, the equipment and the quality of healthcare.

Following the same line, a Program on Community Health Promoters will be implemented for capacity building among inmates in the inside of prisons. This program was jointly designed by the Federal Prison Service and the Ministry of Health, on the basis of the Equal and Health Mediators Programs implemented in the Prison Service in Spain.

In October 2009, within the context of the meeting to issue the advance achieved by the Cooperation Covenant between the departments of health and justice, the Federal Penitentiary Service required first aid and emergency capacity building for FPS agents.



On the other hand, amongst 2010 projects, it is estimated that an active search of Tb cases will be developed and updating workshops will be designed for involving prison staff in the issues addressed by the programs. Moreover, officers of the Ministry of Health will initiate supervision visits to FPS's units to assess the fulfillment of health policies, as well as the levels and quality of healthcare provided to people deprived of their freedom.

The reform of health policies launched in federal prisons, make us reflect about the revolutionary modification of public policy management which was not adopted in the past and which depicts the change of direction that Argentina has taken to ensure the effective fulfillment of the human rights of people deprived of their freedom.

#### CORRESPONDECE

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