

Danger of major outbreaks of COVID-19 in the Peruvian prison population

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To the editor,

Prisons in South American countries such as Peru are regarded as focal points of infectious diseases. Factors such as close contact, which is unavoidable due to overcrowding, poorly ventilated and unhygienic facilities, lack of drinking water and products for personal hygiene, and deficient and limited access to health services are risk factors¹. Infections such as COVID-19 (coronavirus disease 2019) can be transmitted amongst inmates, visitors, and medical and security personnel, especially the latter, who are of vital importance in the chain of transmission, because they travel to and from the community².

The National Prisons Institute of Peru (INPE) houses more than 95,000 inmates throughout Peru. 47% are in the Lima region and 19% are in the northern area of the country³. According to the Ministry of Health (MINSA), these regions are the ones where there are most positive cases of COVID-19⁴. The INPE reported in December 2019 that the national capacity for housing prisoners was 40,137, although there were in fact 95,548 inmates. This figure means that prison capacity has been exceeded by 138%⁵. Such a situation makes it impossible to comply with mandatory social distancing as a preventive measure to stop the transmission of SARS-CoV-2.

An important figure is that 5% of the prison population is over 60 years of age³, and many of them suffer from tuberculosis, HIV/AIDS, diabetes, obesity and high blood pressure, which place them within the classification of persons at high risk of death from COVID-19⁶. On the other hand, the multi-morbidity of persons in prison starts earlier and is more severe than amongst the general public, since security procedures for medical treatment in prisons tend to delay

diagnosis and treatment of these diseases, which further aggravates their condition¹.

The great possibility of an outbreak of COVID-19 in Peruvian prisons and the latent hazard this entails for the health of the community at large takes two forms: firstly, because an outbreak in prisons would lead to a collapse in prison medical services, making it necessary to use community hospitals that are already saturated; and secondly because every inmate who is released or transferred to external medical facilities, not to mention the medical and security personnel, would be vectors of transmission for the rest of the population, since they would continue to have contact with the outside world¹.

In response to the documented outbreaks of COVID-19, the World Health Organisation (WHO) has published a guide entitled: preparation for, prevention and control of COVID-19 in prisons and other detention centres to combat said disease, the purpose of which is to prevent and deal with the purpose of about the disease in prisons that provides guidelines to prevent and deal with a possible outbreak in such places. The guide underlines the need to respect the rights of prisoners, since they are more likely to be infected and run a higher risk of complications⁷. Countries such as Iran have chosen to free less dangerous prisoners in an effort to reduce transmission under custody¹. The possibility of establishing these measures and others such as home arrest and reducing the entry of new inmates in prisons⁸ is still being debated and evaluated in Peru, and if the necessary action is not taken, the rapid transmission of COVID-19 will place the most disadvantaged at the greatest risk.

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