

# Scientific contribution of the 13th National Conference and the 21st Symposia of the Spanish Society of Prison Health, held in Alcalá de Henares, Madrid

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Text received: 27/01/2022

Text accepted: 28/01/2022

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## INTRODUCTION

If I remember rightly, Gaspar Garrote Cuevas tried to organise a Spanish Conference on Prison Health in the early 90s in Jerez de la Frontera (Cadiz), but the project came to nothing. He went on to be the vice-chair of the organising committee of what was the first real conference, held in Leon in 1993, with the title "The role of prison healthcare in modern society".

This first conference was unusual because it received no support from scientific bodies. The organising committee itself, made up of eight professionals from different parts of Spain and coordinated by the chair, Vicente Martín Sánchez, acted as the scientific committee<sup>1</sup>. Despite all the limitations and difficulties, the conference finally took place, with attendants that included the ministers of Health and Justice, and was very warmly received by Spanish prison healthcare professionals, who were probably keen for greater professional recognition.

A lack of associate support led to the second conference being delayed for five years, until it was finally held in Barcelona. Once again, there was no scientific society to assist in organising the event, and it fell to a group of professionals presided over by Andrés Marco Mouriño to organise everything. However, a few months before it was held, it received backup from the recently established Spanish Society of Prison Health (SESP)<sup>2</sup>.

Since then, thirteen biennial conferences and twenty one national symposia have been held at locations selected by the governing body of the SESP, although the last conference, held at Alcalá de Henares (Madrid) in October 2021<sup>3</sup>, had to be delayed for a year due to the COVID-19 pandemic.

## SCIENTIFIC CONTRIBUTION OF THE CONFERENCES

Spanish prison healthcare professionals have made few scientific contributions because there are so few of them. Another reason is that there has been little in the way of research training, while prison administration policies do not encourage this line of investigation, or even block or impede it<sup>4,5</sup>.

Despite all this, the SESP has been a driving force in organising prison healthcare conferences since 1998 and is the editing body of the Spanish Journal of Prison Health (*Revista Española de Sanidad Penitenciaria* (RESP), which is indexed in the two main biomedical databases: SCIELO y PubMed/Medline) in open access format in Spanish and English. In other words, a journal that is open to all at no financial cost to users or institutions.

The conferences have been the main shop window most of the studies carried out in prisons<sup>6</sup>. The largest number of articles were presented in Barcelona in 1998 (119 papers) and Leon in 1993 (93). However,

the conferences at Salamanca in 2002 and Alicante in 2004 saw a major drop in the number of authors and proportion of papers (56.3% and 51.3% when compared to the ones presented in Barcelona in 1998, respectively)<sup>6</sup>.

Furthermore, more than half of the papers presented in 2004 came from Catalonia, which had less than 15% of the Spanish prison population. This, according to an editorial in 2004<sup>4</sup>, was due to a Government Circular on articles, studies and research in the prison setting, “which restricted research in prisons governed by the Ministry of Home Affairs, since its aim was more to oversee than to encourage”.

At present, research in prisons controlled by the Spanish Government is regulated by Instruction 12/2019<sup>7</sup>, which repealed the previous Instructions 7/1999 and 11/2005 and which has not brought about any changes, at least in terms of the number of research projects carried out by the prison healthcare services themselves. In other administrations such as Catalonia, there are no specific instructions or orders, but there is an obligation for projects to be approved by a clinical research ethics committee, and research is more common and appears to take place with fewer obstacles.

One commonly used reason to justify the lack of research into prison healthcare is that the restrictions respond to the fact that inmates are a vulnerable population. Evidently, the Administration has an obligation to ensure that the incarcerated population is not misused, but it is no less true that it also has the obligation, or at least a moral one, to ensure that imprisonment is not a punishment that stops this group from benefiting from research activity<sup>5</sup>.

## **WHAT SCIENTIFIC CONTRIBUTIONS HAVE THE 13TH NATIONAL CONFERENCE AND THE 21ST SYMPOSIA OF THE SESP MADE?**

Any assessment of the scientific contribution made by the 13th National Conference should be a cautious one, given that the COVID-19 pandemic has had an effect on many aspects of the event, such as organisation, participation and attendance.

En 2020, se recibieron 48 comunicaciones para este Forty eight papers were received in 2020 for this conference, but only 39 were evaluated, since the authors could keep or reject them for one year after sending them, when the decision was finally made to hold the conference. Nine authors (18.7%) did not reply or decided to withdraw their papers.

The conference was organised into four round tables: a) Mental Health and Addictions; b) Infections; c) Primary Healthcare; and d) Medical Management and Law. After analysing the papers, the following points should be mentioned:

- The scientific committee evaluated 39 papers: 14 (35.9%) were selected for oral presentation; 20 (51.3%) for presentation in poster format; and 5 (12.8%) were rejected. 4 (80%) of the rejected papers had been presented to the Primary Healthcare Table and 1 (20%) to Mental Health and Addictions.
- Most of the papers (n = 18; 46.2%) were from Catalonia.
- There were more papers on Primary Healthcare (n = 15; 38.4%) and less on Mental Health and Addictions (n = 10; 25.6%), Medical Management and Law (n = 8; 20.5%) and Infections (n = 6; 15.4%).
- The papers selected for oral presentation from each table were as follows: 66.7% from Infections, 50% from Medical Management and Law, 26.7% from Primary Healthcare and 20% from Mental Health and Addictions.
- The first signatory of the three most positively evaluated papers was a doctor, while most of the papers selected for oral presentation (n = 6; 42.9%) had a nurse as a first author and 3 (21.4%) of them had a pharmacist.
- Five awards were given: four to the best paper from each round table and one awarded by the Madrid Nursing School for the best paper whose first author was a nurse. An award was given by the Primary Healthcare Table to a paper from the Basque Country; the Infections gave an award to a paper from the Valencia Region; and the other three awards (Medical Management and Law, Mental Health and Addictions and the Madrid Nursing School) were given to papers from Catalonia.

We would like to draw attention to the scientific contribution, which in our opinion continues to be at a reasonably high level despite the pandemic, and to the fact that almost 200 persons attended the event in such conditions. Although the conference was a face-to-face event, the option of virtual connection was offered, which was gratefully taken up by some participants.

To sum up, we feel that the conference was a success, and even more so in view of the circumstances. The entire event was made possible thanks to the attendants and the collaboration of the guest speakers and members of the organising and scientific committees.

On a final and very positive note, we would like to draw attention to the growing number and quality of studies coming from research groups in nursing and pharmacy. One negative point, however, is the tremendous scarcity of work from prisons managed by the General Secretary of Prisons. This state of affairs has been more than evident for over 20 years and needs to be solved as soon as possible. As the slogan of the 13th National Conference declares, “let us learn from the past, to write the future”.

## CORRESPONDENCE

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## REFERENCES

1. I Congreso Nacional de Sanidad Penitenciaria. Libro de Ponencias y Comunicaciones. León: Gráficas Celarain. 18-20 Nov 1993.
2. II Congreso Nacional de Sanidad Penitenciaria y II Jornadas de la Sociedad Española de Sanidad Penitenciaria. Libro de Ponencias y Comunicaciones. Barcelona: 5-7 Nov 1998.
3. XIII Congreso Nacional y XXI Jornadas de la Sociedad Española de Sanidad Penitenciaria. *Rev Esp Sanid Penit.* 2021;23(Supl 1).
4. García-Guerrero J. La investigación sanitaria en prisiones. *Rev Esp Sanid Penit.* 2004;6:57.
5. Consejo Editorial. Investigación biomédica en las prisiones españolas: una realidad llena de dificultades. *Rev Esp Sanid Penit* 2021;23(2):46-8.
6. Fernández de la Hoz K, Gómez-Pintado P. Investigación en Sanidad Penitenciaria: Evolución de las comunicaciones presentadas en los Congresos, 1993-2004. *Rev Esp Sanid Penit.* 2005;7:59-67.
7. Instrucción 12/2019. Investigaciones en el medio penitenciario. Área: Servicios Centrales y Centros Penitenciarios. [Internet]. Secretaría General de Instituciones Penitenciarias (SGIP); 2019. [Citado 18 Ene 2022]. Disponible en: <https://www.institucionpenitenciaria.es/documentos/20126/78885/I-12-2019-INVESTIGACIONES-ANEXO.pdf>