



European Monitoring Centre
for Drugs and Drug Addiction

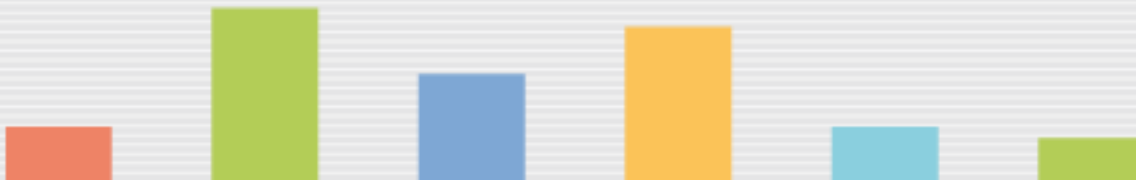
Interventions targeting drug use and related problems in Europe. Implementation of OST in the European prisons

Linda Montanari, Dagmar Hedrich

Warsaw, 7-9 March 2017

HA-REACT WP6

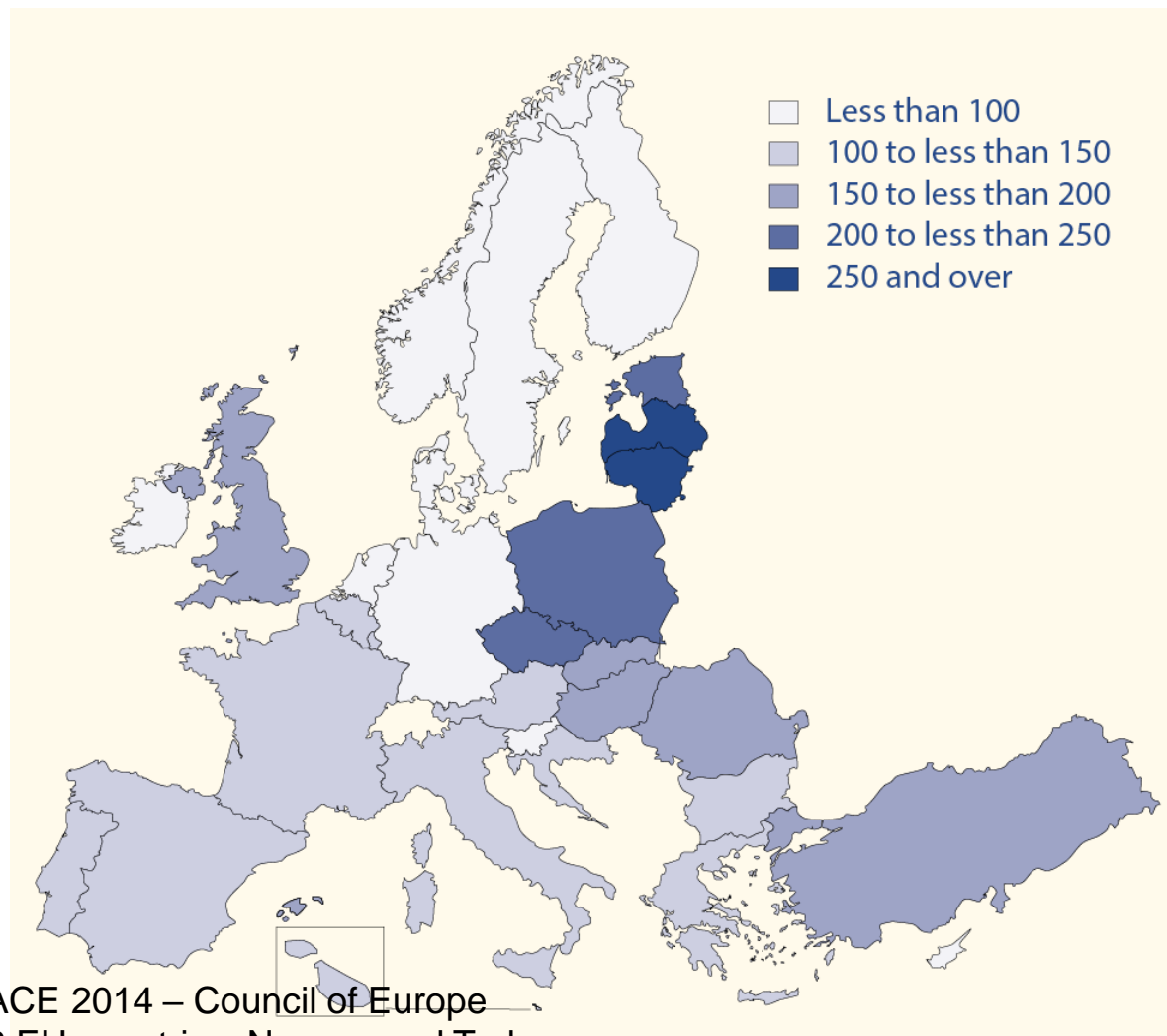
The International seminar on substitution treatment in prison



Background information

General prison population in Europe* 100.000 inhabitants: around 770 000 (at 1st September 2014)

EU: 130; Russia: 475; US: 698



Source: SPACE 2014 – Council of Europe

* Europe: 28 EU countries, Norway and Turkey

EMCDDA: available data sources on drugs and prison (28 EU MS, NO, TK)

A) Quantitative data:

1. Drug use among prisoners
2. People entering drug treatment in prison
3. Infectious diseases in prison settings
4. Drug Law offences

Crimes committed in violation of the drug law

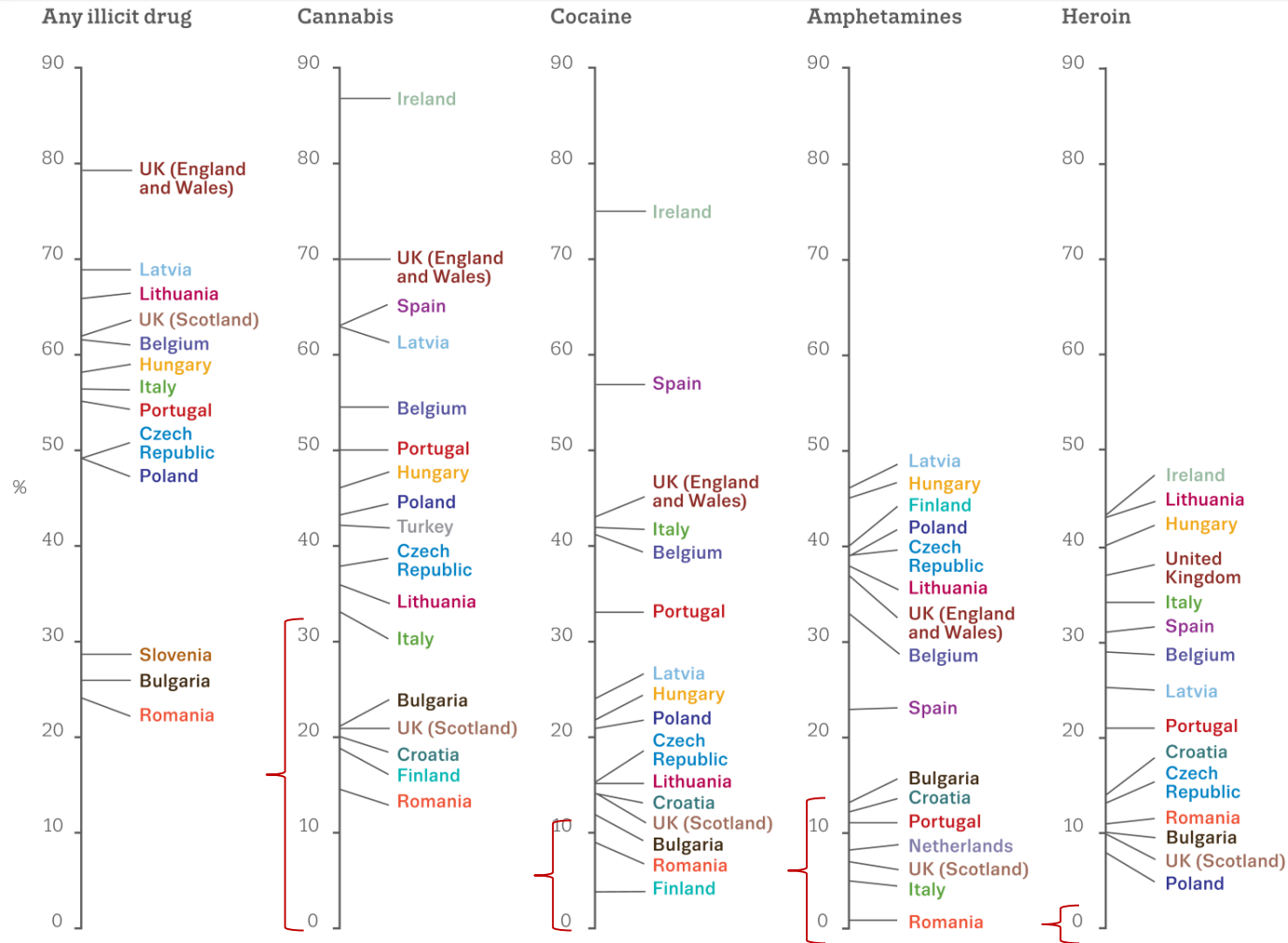
B) Qualitative data:

1. Country reports on prison
2. Reports on legislation and policy

Drug Use among Prisoners in Europe: a complex relation

Drug users → Prison

Lifetime prevalence of drug use among prisoners



80% of prisoners use tobacco (20–30% gen. pop.)

Source: Statistical bulletin 2016

Drug use within prison

- **Few studies available at global level between 2004-2013 (exceptional from 2000)**
- **Searched: nearly 540 journal articles***
- **59 studies found:**
 - 40 in EU
 - 11 in America (3 US)
 - 8 other countries
- **Use of any drug ever within prison:**
 - 2% Romania to 70% Chile
- **NPS use: recent phenomenon**
- **Drug injection: before prison (up to 40%) and in prison (up to 10%)**

Source: Carpentier C., Royuela L., Montanari L. (EMCDDA), "The global epidemiology of drug use in prison", Kinner S., Rich J., Drug Abuse in prison, Oxford University press (in press).

Literature research include search in PubMed, ScholarGoogle, *Psychology & Behavioral Sciences Collect* websites of some South American university journals.



Infectious diseases

HIV+ among PWID in EU prisons

up to 40%

HCV+ among PWID in EU prison

up to 91%

Odd Ratios for PWID with Prison/no prison experience

HIV: up to 3 OR

HCV: up to 7 OR

High risk of infection in the first period after prison release

Co-infections HIV and HCV

SP: 90% of HIV+ are also HCV+

30% of HCV+ are also HIV+

Difficult to treat

Source: 2012 Selected Issue



Mortality

General prison population:

- High mortality rate: $31 * 10\,000 / \text{Gen. Pop.}$ $8 * 10\,000$
- Suicide 1st death cause: $10.5 * 10\,000 / \text{Gen pop.}$ 1.5 (7 times higher)

After prison release for drug users:

- Extremely high risk of drug-induced deaths ('overdoses') in the first weeks after release from prison
- European studies on excess mortality risk (SMR) after prison release
 - England/Wales (first week): X 29 (M) X 69 (F)
 - Denmark (first two weeks): X 62 for males and females
 - France (first year): X 24 (M 15-34); X 274 (M 35-54)
 - Ireland: comparison Drug Related Deaths with prison/with no prison:
 - 28% of DRD had left prison since one week
 - 18 % of DRD had left prison since one month

Services targeting drug users in prison

Treatment for drug users in prison: EU and national policy framework

Political documents of reference:

- Council Resolution 2002 on drug treatment in prison
- 2004: EP recommendation on the Rights of prisoners in the EU
- 2 EU Drug Strategies 2000- 2012 and 2013-2020:
- Corresponding 4 years EU Drugs Action Plans

Two 2Principles: equivalence and continuity of care

National policies

- Historically health care within the Ministry responsible for prison
- Prison health under Ministry of Health (FR, IT, SI,UK,NO,SE,SP-ongoing)
- Mixed model: supervision by MoH (Croatia)

Plans:

- 12 countries with prison health objectives in national drugs strategy
- 9 countries cover drugs in their prison health strategies
- 3 countries have specific prison-drugs strategies (LU, PT, NO)



Treatment of drug dependence

- Partnerships with civil organisations/external providers to manage interventions
- Mainstay of treatment offer for drug dependence: Outpatient treatment
- Inpatient treatment: abstinence-oriented/drug free, including TC
- Detoxification as 'default' treatment for the majority opioid users entering prison
- Low-intensity drug treatment available in all countries: counselling and support
- Harm reduction services in some countries (information, counselling, NSP)
- Infectious diseases treatment and vaccination
- Preparation for prison release (overdose prevention, training, optimise referral to services)
- **OST**



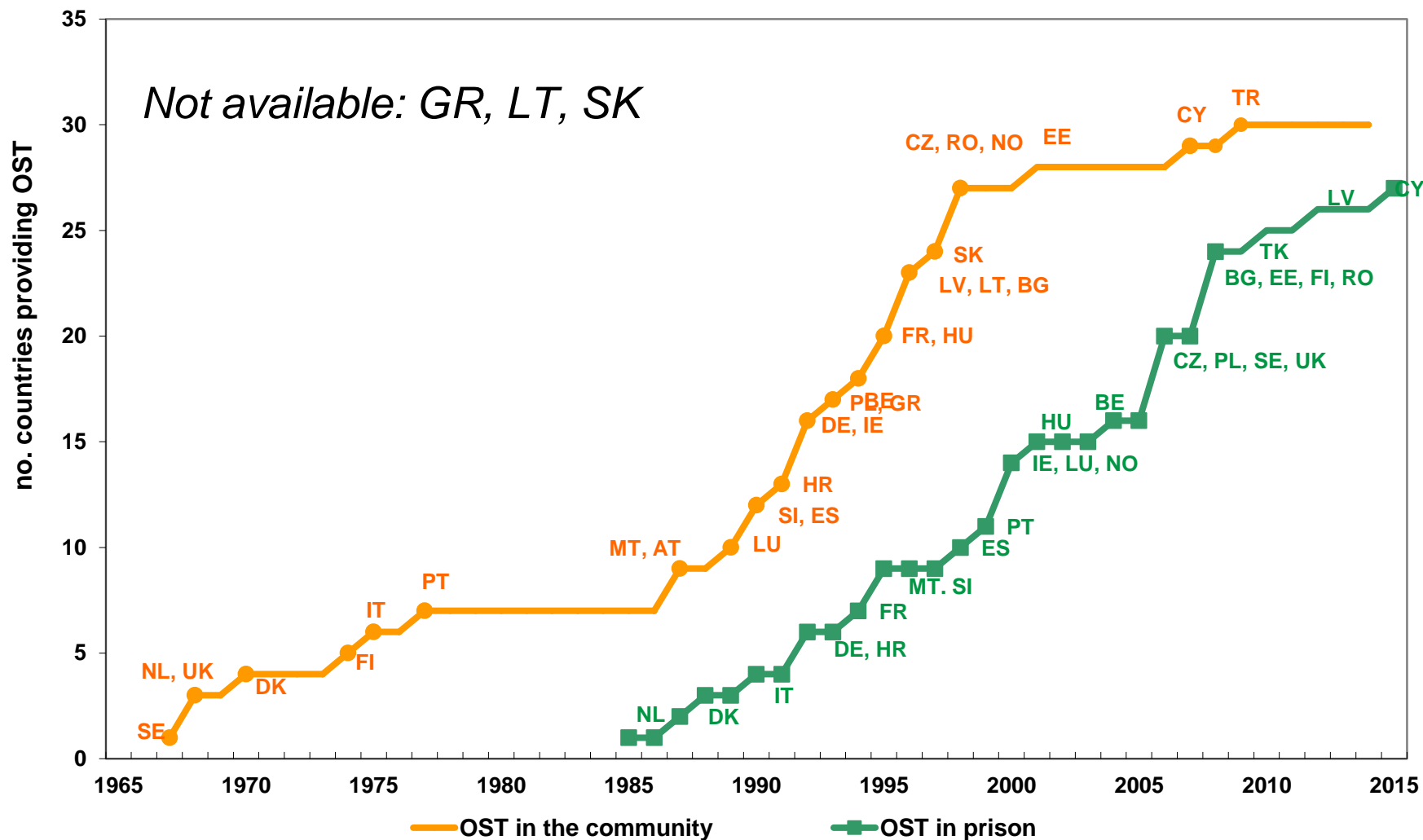
Infectious Diseases Interventions

- Mainly information to prisoners and staff:
 - sometimes structured programs
 - Including information on condom use and cleaning injecting equipment in few countries
- Infectious Diseases testing offered in most countries (HIV, Hepatitis C and B, tuberculosis) – testing anonymous and voluntary
- Scarce data available on the provision of hepatitis C treatment - few prisoners treated
- Hepatitis B vaccination programmes targeting prisoners are reported to exist in 16 countries
- Condom provision in 10 countries but with limitations

Needle and syringe programmes

- **Prison NSP research shows reductions in risky injecting and sharing**
 - modalities: exchange machines, face-to-face health personnel, external health workers, trained peers
- **Prison NSPs operate in 4 countries (SP, LU, RO, GE with varying levels of provision):**
 - **GE:** 1 site- 1 city Berlin, Germany
 - **LU:** 2 sites – 2 prisons (all prisons)
 - **RO:** 10 sites – 6 cities (not in all prisons)
 - **SP:** 33 sites – 19 cities (not in all prisons)

Opioid Substitution Treatment : cumulative number of EU countries with OST in community and prison settings



OST in prison: implementation (1)

- Available in all countries except 3 (GR, LT, SK)
- Large variability in coverage
- Not available in all prisons
- As maintenance treatment or detoxification
- Methadone (~70%), and buprenorphine (~30%)
- Provided by external providers
- Mainly used as continuation from community - 8 countries possible to initiate (AT, EE, FIN, FR, GE, LU, SI, SP)

OST in prison: implementation (2)

- From few prisoners in HU to ~10000 in SP – In most countries from 100-400 prisoners per country
- Percent of prisoners receiving OST:
 - >10% in 7 countries; 3-10% in 9 countries; <3% in the other countries
- Rarely with psychosocial interventions (e.g. SP: 20% - Integrated Drug Treatment System in England)
- Variable doses: e.g. LU: 21 mg per 140 days – RO 100 mg
- Increasing OST provision, but still low in prison
- Distinction between formal guidelines/recommendations and actual implementation
- Little information available

EMCDDA monitoring plans

EMCDDA contribution towards a methodological framework for monitoring drugs and prison in Europe (COR-DROGUE 15/2/2014)

(http://www.emcdda.europa.eu/attachements.cfm/att_194698_EN_ST05420-RE01.EN13.PDF)

- **Questionnaire on drug use among prisoners in Europe (EQDP)**
emcdda.europa.eu/publications/scientific-studies/eqdp
- **Survey of drug-related health facilities in European prisons (EFSQ-P)**



European Monitoring Centre
for Drugs and Drug Addiction

Thank you for your attention

Linda.Montanari@emcdda.europa.eu

|emcdda.europa.eu

 twitter.com/emcdda

 facebook.com/emcdda

 youtube.com/emcddatube

 flickr.com/photos/emcdda