Supporting the Establishment of Prison-based Harm Reduction Policies and Programs in Eastern Europe and the Former Soviet Union

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Background

- Several countries in Eastern Europe and the former Soviet Union (fSU) are in the midst of dual epidemics of injection drug use and HIV/AIDS

- At the same time, incarceration of injection drug users (IDUs) has increased dramatically

- Consequences include: an unprecedented growth in prison populations and increasing concerns regarding illicit drug use and related harms within prisons
Background

- Despite considerable efforts made to control supply, illicit drugs are often widely available in prisons. Initiation into injection drug is also known to occur.

- In one study in Russia, 43% of prisoners reported injecting drugs while in prison. 14% of these individuals stated that their first injection occurred within a penal institution (MSF, 2000).

- Evidence indicates that injection practices tend to be “riskier” in prisons compared to injection practices in community settings.
• In the Ukraine, where 69% of HIV infection is linked to injection drug use, it is estimated that 7% of the prison population is HIV positive.

• In Latvia, 20% of known HIV positive individuals are in prison, and half of the new HIV cases diagnosed each year are found among prisoners.

• Rapid outbreaks of HIV infection in prisons have been observed.
Background

• Prison systems, for a variety of reasons, are slow in responding to the dual-epidemics of HIV and injection drug use

• Various political, philosophical, and practical barriers constrain attempts to effectively respond to these immediate and severe problems
Barriers to Harm Reduction

- Increased penalties for drug use, tightened security measures to reduce the supply of drugs, and heightened surveillance of individual drug users have often been put forward as “law and order” solutions to public health problems in prisons.

- Prison systems and governments have argued that preventive measures cannot be introduced in prisons for safety reasons, and that making them available would be tantamount to condoning drug use in prisons.
Barriers to Harm Reduction

- In some countries, legal barriers to the implementation of substitution therapies exist.

- Many countries maintain strict adherence to control and abstinence-based provisions within international drug conventions, while ignoring other aspects of these treaties that allow for the implementation of health or medical-based interventions.
Key international instruments reveal a general consensus that the standard of health care provided to prisoners must be comparable to that available in the general community. This is commonly referred to as the “principle of equivalence.”

Access to HIV prevention and harm reduction programs implicates the right to health, given the evidence of their effectiveness at preventing harms associated with drug use.
“Governments and prison authorities have a moral and legal responsibility to prevent the spread of HIV infection among prisoners and prison staff and to take care of those infected. They also have a responsibility to prevent the spread of HIV among communities. Prisoners are the community. They come from the community, they return to it. Protection of prisoners is protection of our communities”

– Cees Goos, World Health Organization
Responding to Injection Drug Use and HIV/AIDS in Prisons

In 2000, the International Harm Reduction Development Program of the Open Society Institute launched an initiative to fund indigenous nongovernmental and governmental prison projects throughout the region.
Responding to Injection Drug Use and HIV/AIDS in Prisons

The efforts of IHRD have facilitated the implementation of an array of prison-based harm reduction programs throughout the region, including:

- HIV prevention and harm reduction educational initiatives
- Peer support initiatives
- Methadone maintenance therapy
- Syringe exchange
Responding to Injection Drug Use and HIV/AIDS in Prisons

With funding from the Canadian International Development Agency (CIDA), and working with IHRD, the Canadian HIV/AIDS Legal Network is supporting the establishment of prison-based harm reduction policies and programs in the regions:

Key activities include:

- Supporting individual programs
- Strategic research initiatives
- Garnering evidence needed for advocacy purposes
- Gaining increased political support for harm reduction
- Assisting with the development of model legislation
The Ukraine:

- With the assistance of local representatives of Open Society Institute, we work directly with the national prison authority and with local NGOs.

- The prison authority recognizes the extent of the IDU and HIV problems in Ukrainian prisons, and also recognizes the limitations of conventional approaches to these problems.

- A formal partnership agreement is being developed between the Canadian HIV/AIDS Legal Network and the national prison authority.
Responding to Injection Drug Use and HIV/AIDS in Prisons

The Ukraine:

✓ Prison study tours in Canada for Ukrainian prison officials;

✓ Development of scientific reviews of the evidence concerning syringe exchange and methadone maintenance therapies;

✓ Methadone maintenance therapy pilot study in 2 prisons;

✓ Prison-based risk behaviour studies;
Responding to Injection Drug Use and HIV/AIDS in Prisons

The Ukraine:

✓ Syringe exchange pilot study;

✓ Internships involving Ukrainian lawyers who will draft legislative options allowing for the widespread implementation of NEPs within prisons;

✓ Dissemination of research and evaluation findings.
Conclusions

- There has been a massive growth in prison populations in Eastern Europe and the fSU due to the over-reliance on the use of enforcement as a means to control the supply and use of illicit drugs in society.

- Consequently, HIV and IDU now represent huge challenges for prison and health authorities in Eastern Europe and the fSU.

- In many settings, prisons have responded to dual epidemics of HIV and IDU use with measures that have limited benefit, such as increasing security and promoting abstinence from drugs.
Conclusions

- Economic challenges and a lack of a political commitment to apply funds to improve prison conditions make it necessary to attract international financial assistance and technical support.

- A growing number of prison systems are following a global trend by recognizing the importance of health services that address drug-related harm and are implementing harm reduction programs.

- These programs have been implemented without compromising security within prisons and undermining drug control efforts.
Conclusions

- The growth of harm reduction in prisons in this region has involved considerable efforts at the operational and political level, and included an array of advocacy efforts, and in some cases, legal amendments.

- While considerable progress has been made, much further work is needed to address the current limited coverage of harm reduction programs and prevailing attitudes that stand as barriers to the widespread implementation of prison-based harm reduction programs in this region.
Thank you for listening

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You can learn more about the
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www.soros.org/initiatives/ihrd