EDITORIAL

Healthcare for detained persons is an essential part of Public Health, the persons we care for are patients, as opposed to prisoners.

With that idea in mind, we have decided to organise this two-day conference on healthcare of persons in detention in Europe. We are grateful for the partnership and support of national authorities through the national associations of Portugal (UNITE, SICAD, DGRSP), of European institutions (EMCDDA, Pompidou Group), and of international bodies (HRI, WHO Europe, UNODC, ICRC).

This partnership is key and essential in order to strengthen the link to public health. It means to not only provide care during their detention, but also to ensure continuity of care after release.

Ethical standards will be the guiding principles of our work, bringing both human rights and harm reduction into the field of personal healthcare.

This conference responds to a need of healthcare professionals working in prisons, as we can see by the high number of contributions. In order help all participants to benefit from the knowledge and good practice models efficiently, we have organized “cornerstone labs” which help to further facilitate the contacts between speaker and delegates and make the exchanges even more fruitful.

I hope that we will share our rich experiences during these two days, and then return back home boosted in our commitment of «caring for others».

I wish you all a great conference, and thank you to everyone involved in the making of this event.

*Let’s be bold, altogether*

Dr fadi meroueh
HWB’s President
Scientific Committee

Fadi Meroueh: HWB President
Roberto Monarca: HWB
Cyril Manzanera: HWB
Michel Westra: HWB
Linda Montinari: EMCDDA
Hans Wolff: Hôpitaux Universitaires de Genève ; CPT
Heino Stöver: Frankfurt University of Applied Sciences/Institute for Addiction Research
Robert Charles Paterson: ICRC
Ehab Salah: UNODC
Robert Teltzrow: Pompidou Group
Stefan Engquist: Federal Office of Public Health Switzerland

Organization Committee

Fadi Meroueh: HWB President
Rui Morgado: General Direction for Reinsertion and Prison Services, Porto
Ana Sofia Santos: Head of International Relations Division SICAD, Lisbon
Linda Montinari: EMCDDA
**PROGRAM**

Monday October, 21

10:00  **Lisbon’s Prison Visit**

12:00  **Registration and Light Lunch**
Lisbon Congress Center : Praça das Indústrias 1, 1300-307 Lisboa

13:00  **Opening Session:**
Fadi MEROUH (HWB’s President)
Alexis GOOSDEEL (EMCDDA’s Director)
Dr João Goulão (SICAD’s Director)
Ricardo Batista LEITE (UNITE’s President)
Romulo Mateus (DGRSP’s General Director)
Carina FERREIRA-BORGES (WHO Europe),

13:30  **1st Plenary Session:**
**Drug Use, Harm Reduction/ Human Rights**
Chairs: Sam SHIRLEY-BEAVAN (HRI), Roberto MONARCA (HWB)
and Robert TELTZROW (Pompidou Group)

- **New trends in drug use, and interventions in Europe. What is the role of prison?**
  Linda MONTANARI, EMCDDA, Lisbon

- **Human rights and prison health? update for European prisons**
  Hans WOLFF, CPT member, CoE and Geneva University Hospitals, Switzerland

- **HWB-charter : update 2019**
  Stefan ENGGIST Federal Office of Public Health Switzerland

- **Decriminalization of Drug Use in Portugal: a Health and Political Perspective**
  Ricardo Baptista LEITE, UNITE’s President and Founder, Lisbon

- **The longitudinal course of prisoners’ mental health problems during and after imprisonment**
  Anja J.E. DIRKZWAGER (NSCR Netherlands), Paul NIEUWBEERTA

- **What’s new in addictology? And in the prison setting?**
  Fadi MEROUEH, HWB, CHU de Montpellier

* Two Visits : 21 october AND 23 October 10 :00. Registration required (echcp.hwb@gmail.com), meet at 9.30 in front of the prison with an ID.
Rua Marquês da Fronteira, nº 54
15:20  Coffee break, Poster presentations and stands

16:00  1st Cornerstone Lab
Chair: Heino STÖVER: University of Frankfurt, German

MENTAL HEALTH/ADDICTION
• Reducing reoffending among people who committed violent offences using the Reasoning and Rehabilitation (R&R2) program in Switzerland
  Stéphanie BAGGIO (University of Bern, Switzerland), Michael WEBER, Michael LIEBRENZ

• Retrospective study of results of GHB detoxification using pharmaceutical GHB
  Rick DOLJE Justitieel Centrum voor Somatische Zorg, Netherlands) A. VAN HET VELD; M KAMPHORST
  AND
  The detoxification treatment of GHB dependent prisoners in a Dutch prison (hospital)
  Den Paul BRAVE (Justitieel Centrum voor Somatische Zorg, Netherlands), Rick DOLJE

• Overdose upon release - Challenges and strategies form an (ex-) prisoners point of view
  Daniela JAMIN University of Applied Sciences, Frankfurt - Germany

• Substance use in pregnancy-What happens on the inside?
  Jillian ROBERTS (Drug & Alcohol|Justice Health & Forensic Mental Health Network, Australia),
  Finbarr O’NEILL, Wilson LAI

• How to engage parliamentarians to tackle youth-related mental health issues in prison?
  Amish LAXMIDAS, UNITE’s policy and partnership director, Lisbon, Álvaro Francisco Lopes de Sousa

TELEMEDICINE/DENTIST
• One-year observational study on teledentistry in prison
  Nicolas GIRAUDEAU CHU de Montpellier, France

• Project ECHO in SEHSCT
  Ruth GRAY SEHCT, N Ireland

TRAINING
• From a general practice in civil society to a complex prison environment!
  How do you prepare general practitioners for working in penitentiary institutions?
  Monique PANNEMAN (Locatie VUMc - Medische Faculteit, Amsterdam), Rogier HEEZEMANS,
  Wessel SCHULTE

GENDER
• Women and children in detention: A Challenge!?
  Sylvia ELZINGA (Dienst Justitiële Inrichtingen, Netherlands), Rob PLATZBEECKER
HUMAN RIGHTS

• “People not Prisoners”
  Barry ROONEY Health Development Worker for Prisons, Lisburn

• Standardized diagnostic and treatment assessment (ADHD & HCV) in prisoners with substance use disorder under Human Rights Treaties
  Gabriele Fischer, Marisa Silbernagl, Arkadiusz Komorowski

17:45 End of 1st day

20:00 Dinner
09:00 2nd Plenary session: Migrants/Gender
Chairs: Amalid CHEBLY (ICRC), Linda MONTANARI (EMCDDA), Hans WOLFF (HUG/CPT)

• Women, Drugs, and Imprisonment
  Manuela Ivone CUNHA University of Minho, Portugal

• Specific needs of migrants in detention: overview and recommendations
  Reem MANSOUR Unité Sanitaire Baumettes, Marseille

• Women in prison - challenges and opportunities in providing gender-responsive HIV 
  & sexual and reproductive health care
  Ehab SALAH Adviser HIV in Prisons, UNODC HQ in Vienna

10:30 Coffee break, Poster presentations and Stands

11:15 2nd Cornerstone Lab
Chair: Ruth GRAY (SEHSCT)

**ADDITION**

• Quetiapine misuse and dependency in forensic settings
  M.A.A BINNEWIJZEND (Netherlands Institute for Forensic Psychiatry and Psychology, Amsterdam), 
  T. RINNE, S. ROZA

• Prevalence of opioid dependence and opioid substitution treatment in the Berlin 
  custodial setting: a cross-sectional study
  Kira VON BERNUTH (Charité-Universitätsmedizin, Berlin), Peter SEIDEL, Julia KREBS, 
  Marc LEHMANN, Annette OPITZ-WELKE

• How to “deal” with Bodypackers
  Brigitte EIS, (Dienst Justitiële Inrichtingen, Netherlands), Pim PRINS

• The implementation of the EQDP: European Questionnaire on Drug use among 
  People living in prison
  Luis ROYUELA EMCDDA, Lisbon

• Integrating in-prison Therapeutic Communities in a Comprehensive Drug Treatment System
  Robert TELTZROW Pompidou Group, Council of Europe, Strasbourg, France

• Community Transition Teams: Responding to Post-release Overdose Deaths in British Columbia
  Andrew Mac Farlane, Provincial Executive Director, Correctional Health Services and Forensic 
  Regional Clinics

**HUMAN RIGHTS**

• Monitoring substance use and dependency treatment in places of detention - experiences from Denmark
  Lisa MICHAELSEN DIGNITY - Dansk Institut Mod Tortur, Denmark, Karin MEYER, Marie BRASHOLT, 
  Brenda VAN DEN BERGH, Jens MODVIG

• Equalising Spaces. A story of collaboration in Prisons
  Rachel GIBBS  Northern Ireland

• An overview of prison health and human rights: opportunities for parliamentarians to act
  Joana MENDES, UNITE’s human right officer, Lisbon
• Health and reintegration of people who have been imprisoned: missed opportunities and service gaps
Daniel Simões (GAT : Grupo de Ativistas em Tratamentos), NGO Portugal

**INFECTIOUS DISEASES**
• The challenge of persistent parasitic and viral infections among prisoners from sub-Saharan Africa and Latin America
Laurent GETAZ

**TELEMEDECINE**
• Tele-robotic ultrasonography for correctional facilities
Philippe HOMSI, Adecotech, Vendôme, France, Nicolas LEFEBVRE

13:00 Lunch

14:30 3rd Plenary session: Infection disease
Chairs : Cristina BERNARDO (UNITE’s Executive Director), Michel WESTRA (HWB), Pr Rui MARINHO (Santa Maria Hospital)

• Evidence based European Guidelines on Infectious Diseases in the prison setting.
Lara TAVOSCHI University of Pisa, Italia

• Micro-elimination HepC in Prison is possible.
Fadi MEROUEH, HWB, CHU de Montpellier

• Results of risk-differentiated tuberculosis screening of new inmates using chest X-ray (1992-2017) and IGRA (pilot 2018)
M. KAMPHORST, Michel WESTRA

• Diagnosis and management of chronic hepatitis C in European prison. Preliminary data from the PrHep EU2 Project.
Roberto MONARCA, HWB, Viterbo

• HIV, Viral Hepatitis an TB in Prisons: a global systematic review of infections and mortality, and service coverage
Ehab SALAH Adviser HIV in Prisons, UNODC HQ, Vienna

16:15 Lisbon Declaration on HumanRights: The HWB Charter
Session of adoption

16:45 Farewell
• **Women and HCV cure in prison setting: data from an Italian regional network**
  E. RASTRELLI, S. Marcellini, S. Dell’Isola, A.M. Ialungo, R. Marocco, E. C. Liguori, L. R. Monarca, G. Starnini

• **Words matter: a call for humanizing and respectful language to describe people who experience incarceration**
  Nguyen Toan TRAN

• **Systemic Family Therapy in Prison**
  Cyril MANZANERA

• **Understanding NSW Long acting Opioids in Custody - Treatment: preliminary findings**
  Adrian J. DUNLOP, Bethany White, Jillian Roberts, Paul Haber, John Attia, Christopher Oldmeadow, Andrew Searles, Michelle Cretkos, Judith Mackson, Dena Attalla, Terry Murrell, Michael Doyle, Elizabeth McEntyre, Libby Brown, Hellal Hussein, Mark Howard, Márcia Sequeira, Nicholas Lintzeris

• **Drug users in European prisons: a population with specific healthcare needs**
  Luis ROYUELA, Linda Montanari, Dagmar Hedrich, Liesbeth Vandam
  Instituções EMCDDA

• **Quality Improvement in the Committal Process in HMP Maghaberry**
  Ruth GRAY, Clinical Lead in Prison Dentistry, SEHSCT

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SPEAKERS

MONDAY OCTOBER, 21
10:00 Prison visit

Rómulo Augusto Marreiros Mateus is since February 1, 2019 General Director of Reinsertion and Prison Services, formerly was General Attorney in Lisbon Central Criminal Judges since June 24, 2018.
Since June 14, 2013 until June 14, 2018, as Attorney in Kosovo, in service of the European Union Rule of Law Mission in Kosovo, Eulex..
Since December 2009 till June 13, 2013 was coordinator of the Public Ministry Team in the Small Instance Criminal Court of Lisbon.
Between May 2009 and December 2009 was Attorney in the Criminal Courts of Oeiras and Cascais.
From May 16, 2002 and May 2, 2009 was Coordinating Inspector in the Inspection and Auditory Services of the General Direction of Prison Services.
Between 1990 and May of 2002 he performed duties of deputy prosecutor in the countries of Avis, Nisa, St. do Cacém and Vila Franca de Xira
Professional qualification:

National expert to the Council of Europe and member of the Committee of Experts on Remand in Custody and its Implications for the Management of Criminal Institutes, Strasbourg (2002/2005);
Member of the group responsible for drafting the Code of Execution of Sentences and Deprivation of Prison and the Prison Establishment Regulations within the Directorate-General of Prison Services (2003-2009);

Member of the Portuguese delegation to the European Project Grotius Penal II, with conferences in Catania (Sicily), Krakow (Poland) and Portimão, on economic crimes and cyber crime (2003);
National expert for the European Monitoring Center for Drugs and Drug Addiction, responsible for drafting the questionnaire ‘Alternatives to Imprisonment Targeting Drug Using Offenders’, Group Pompidou, Lisbon (2003/2005);

Attended the European Conference on Quasi-Coerced Treatment and Other Alternative to Imprisonment, Pompidou Group, Bucharest (October 2007); participated in the Study Tour for Countries of Portuguese Language on Prevention and Repression of Drug Trafficking, United Nation Office on Drug and Crime, Lisbon (October 2007);


Participation Support to Prosecutors in South-Eastern Europe, Proseco Regional Project, Lisbon (July 2009); invited to participate in the Days of Criminal Law and Criminal Procedure Law of the Autonomous University of Lisbon in May 2011, and was given the theme “Modifying the execution of the prison sentence and the right to freedom in its execution”.

Health Without Barriers
MONDAY OCTOBER, 21
13:30 Opening Session

Fadi MEROUEH is currently a Hospital Practitioner and Head of the Health Unit of the Villeneuve-les-Maguelone prison, which is a part of Montpellier’s University Hospital. He is the president of HWB since July 2018. Healthcare ethics: Over his 22 years of experience in healthcare in prison, he witnessed major reforms of the legal framework of detained person’s healthcare. Initially under the authority of the Ministry of Justice, the Health Unit in Prison are now administrated by the Ministry of Health. This reform came with the official duty of providing healthcare services in prison equal to those provided outside. Addictions and Hepatitis C: The eradication of Hepatitis C within the prison of Villeneuve-les-Maguelone is a major achievement and the first of its kind in Europe and North America. This result was obtained through a combination of prevention (testing systematically offered, NEP), medication and support from the medical staff. Despite this shift in principle, Dr Meroueh has been fighting administrative obstruction and reticence in order to effectively achieve equal and adequate care for his patients. For instance, one of his fight was to put into place a needles exchange program (NEP). While the program is now functioning, it still faces opposition from the Prison Administration. Continuity of care: Preparation for release is also one of the biggest issue. Most patients find themselves without social security rights and without housing upon release. In order to ensure a continuity of care between prison and the outside, Dr. Meroueh also have a weekly activity in an associative addiction center called “Arc-en-Ciel” in Montpellier. He holds there visiting hours dedicated to the management of Hepatitis C for PWID. He also is an expert consultant for various French and European organizations.

Alexis GOOSDEEL, Director, European Monitoring Centre for Drugs & Drug Addiction (EMCDDA) Mr Goosdeel joined the EMCDDA in 1999 as a project manager in the area of EU enlargement and international relations. From 2005, he headed the agency’s Reitox and international cooperation unit. In this capacity, he played a central role in: coordinating a network of 30 national drug monitoring centres; preparing EU candidate and potential candidate countries for membership of the EMCDDA; developing cooperation with neighbouring countries to the EU; and nurturing relations with countries beyond the Union (Central Asia, Russia, Latin America). Much of his 30-year career working in the field of public health at national, European and international level. He holds a Master’s degree in clinical psychology and a special diploma in advanced management. He is proficient in six languages: French (mother tongue); English, Spanish, Greek, Portuguese and Dutch. He was born on 7 November 1959 in Brussels.

João Castel-Branco GOULÃO. He is currently Portuguese Drugs and Alcohol National Coordinator and Director General of the Intervention on Addictive Behaviours and Dependencies General Directorate (SICAD), the body within the Health Ministry responsible for the policy coordination in this field. He was Chairman of the European Monitoring Centre on Drugs and Drug Addiction (EMCDDA) from 2009 to 2015 and he has a long experience in addictions field at international level. Elected in November 2018, he holds the Presidency of the Pompidou Group for the period 2019-2022. A medical doctor by profession, Dr. Goulão has over 20 years’ experience regarding drug-related issues, working in this field since 1987 as general practitioner and since then all his professional life has been devoted to drugs and health. He was also a member of the Portuguese Committee which, in 1999, prepared the report on which the first Portuguese Drug Strategy was based and that included decriminalisation proposal.
**Ricardo Baptista LEITE** is a Medical Doctor, a Member of the Portuguese National Parliament, and City Councillor of Cascais. He is the Founding President of ‘UNITE - Global Parliamentarians Network to End Infectious Diseases’ and Vice-Chair of the ‘Parliamentary Network on The World Bank & International Monetary Fund’. One of the six people to be awarded globally as a ‘HCV Change Maker’ by ‘The Economist’ in acknowledgement of leadership in the field of hepatitis C, he is the Head of Public Health at Catolica University of Portugal, and Coordinator of the Sustainable Healthcare Unit at NOVA Information Management School. Ricardo is a PhD candidate at Maastrict University in the Netherlands. He has undertaken post-graduate studies at John Hopkins University, Harvard Kennedy School and Harvard Medical School. Ricardo is the founder of ‘CREATING HEALTH’ - Research and Innovation Funding’ and Co-founder of the ‘Estoril Conferences’, and the main author of the book ‘Citizenship for Health’.

**Carina FERREIRA-BORGES** is the Programme Manager for Alcohol, Illicit Drugs and Prison Health at WHO/Europe, and is based at the NCD Office, in Moscow. She worked as an addiction counsellor from 1992 to 2002, becoming the director of a Treatment Center in 1996. She obtained her Master’s degree in Public Health in 2002 and a PhD in International Health in 2015 with Nova University in Lisbon. From 2006 to 2014 she was in charge of the Unit for Alcohol and Substance Abuse at the WHO Regional Office for Africa, where she provided support for country implementation of evidence-based, comprehensive national policies, and until joining the WHO European Office for NCDs in December 2017, she worked as an international public health consultant providing strategic consultancy on public health issues around the world. She has authored several books on addiction, and articles on alcohol policies in peer-reviewed journals; she has also contributed to several WHO publications and collaborated in the development of research initiatives in areas such as Screening and Brief Interventions, FASD and Harm to Others.

13:30 1st Plenary Session

**Linda MONTANARI**, Sociologist, with a master degree in health sociology, she has worked for 7 years in the drug treatment services in Italy where she has implemented the local drug treatment monitoring system on clients, service provision and outcome evaluation.

Linda joined the EMCDDA in 2000 and since 2001 she has been coordinating the implementation the treatment demand indicator (TDI) on people entering specialised treatment for problems related to their drug use.

In 2008 she started to work on drugs and prison focusing on the development of a methodological framework for monitoring drugs and prison in Europe. She is coordinating the area on drugs and prison at the EMCDDA, trying to improve the quality and comparability of information on drug related problems of people who live in prison in the European countries and on the level of implementation of interventions targeting their problems.

She has organised several international experts meeting on drugs and prison and contributed to prison and drugs publications. She is member of the WHO- Health in Prison Programme as EMCDDA’s representative and of WEPHREN - Worldwide Prison Health Research & Engagement Network (WEPHREN). She is now coordinating a major publication on drugs and prison in Europe.

**Hans WOLFF** is head of the Division of Prison Health at the Geneva University Hospitals and member of the Council of Europe’s Committee for the Prevention of Torture (CPT). Further he is President of the Conference of Swiss Prison Doctors (CSPD) and member of the Central Committee of Ethics of the Swiss Academy of Medical Sciences. His main professional interests are related to the Human Rights of vulnerable populations in relation to social inequalities in health, access to healthcare and medical ethics. In particular, he works on substance abuse, preventive measures and risk reduction, as well as infectious diseases or mental health in detention.
Stefan ENGGIST, MA in Cultural Anthropology, Mediator inmedio/SDC, works for the Swiss government. At the Federal Office of Public Health (FOPH) he acts as deputy head of the HIV-STI-section in the division of communicable diseases. He is the general secretary of the Federal Commission for Sexual Health. In the field of prisoner health, he coordinates several national initiatives and represents the FOPH on international level. Between 2012 and 2014, he was a Technical Officer for prisoner health at the WHO Regional Office for Europe. For WHO he drafted the document “Good governance for prison health in the 21st century” (2013) and edited the anthology “Prisons and Health” (2014). He represented WHO in the Expert Group which prepared the Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules) adopted by the UN General Assembly in 2015.

Anja J.E DIRKZWAGER is a senior researcher at the Netherlands Institute for the Study of Crime and law enforcement (NSCR), and is a leading scholar in the field of prison research and prison health. Originally trained in clinical psychology, she switched to the field of criminology a decade ago and started a research line on imprisonment and the effects of imprisonment on offenders’ lives after release. She is one of the principal investigators who initiated the award-winning Prison Project, a unique nationwide and longitudinal study on the effects of imprisonment on the further life-course of prisoners and their families (see www.prisonproject.nl/eng/ ). Recently, she initiated another longitudinal research specifically focused on prisoners’ health and their health care use before and after their imprisonment. Her research focuses on prisoners’ perceptions of the conditions of confinement, procedural justice, the effects of imprisonment on the further life-course, and the physical and mental health of prisoners and their family members. She has published extensively in top-tier journals. She is the founder and chair of the Working Group ‘Prison Life & Effects of Imprisonment’ of the European Society of Criminology and the coordinator of the Sanctions cluster at NSCR.

16:00 1st Cornerstone Lab
METAL HEALTH/ADDICTION

Stéphanie BAGGIO, is senior research fellow at the Division of Prison Health, Geneva University Hospitals and Department of Forensic Psychiatry, Institute of Legal Medicine, University of Bern. She has a PhD in psychology, a master’s degree in biostatistics, and works in the field of public health and epidemiology since 2012. Her research interests include psychiatric disorders, prison health and health care, substance use, health inequalities, and psychometrics.

Rick DOLJE, Rik Doljé has been working as a nurse within the prison system since 2012. He has worked various positions inside the prison of Zwolle, among which an intensive care department for men within the penitentiary psychiatric center. After a few years he became involved with the GHB detox department, partly as a nurse for implementation of care and partly by performing coordinating genomes. The past two years he has been working as deputy head of care. Rik is the department head of the GHB detox department and he manages the medical service together with the head of care.
Den Paul BRAVE is working as a doctor in the JCvSZ - Judicial Centre for Somatic Care, or Dutch prison hospital - since 2015. The JCvSZ is the only prison hospital in the Netherlands, located in the Hague. We admit detained patients, in our facility with 40 beds, with a variety of somatic diagnoses and complaints. A part of our patients is addicted to the former partydrug GHB (gamma-hydroxybutyric acid) and receive care during a obligated clinical detoxification since 2012. The use of GHB is a growing concern in the Netherlands and moved from the partyscene in the 90's to more marginalised populations. We treat patients mainly with benzodiazepines (diazepam), and in some cases Xyrem® (farmaceutical GHB). Since 2012 more than 400 patients underwent a successful GHB-detoxification.

Daniela JAMIN: M.A., Social Work, Research Assistant, Institute for Addiction Research, Frankfurt University of Applied Sciences. Main areas of work: drugs and public safety, aging drug users, prison health, drug use in prison and e-cigarette. Work experience: Social Work in prison and with drug user in prison and after release. The presentation is based on the final report of the EU-project “My first 48 hours out”. The presentation during the conference is made completely by Daniela Jamin.

Jillian ROBERTS is the Clinical Director, Drug and Alcohol Services, Justice Health and Forensic Mental Health Network (JHFMHN), NSW Australia with dual specialist qualifications- Founding Fellow of Australasian Chapter of Addiction Medicine, Royal Australasian College Physicians and Founding Fellow Faculty of Clinical Forensic Medicine, Royal College of Pathologists of Australasia. Jill is very involved in post graduate and undergraduate medical training, is a conjoint lecturer UNSW, guest lecturer USYD, supervisor FACHAM, non college supervisor RANZCP and RACGP. Dr Roberts is member of numerous committees/EWG within NSW Ministry of Health including Quality in Treatment and Clinical G/Ls Substance Use in Pregnancy and Clinical Management Opioid Dependency. She has 20 years experience providing health care to incarcerated men, women and adolescents and participants in court diversion programs in NSW and is committed to engaging patients in treatment as part rehabilitative endeavour. She is currently Principal Investigator in UNLOC-T study.

Amish LAXMIDAS oversees the Policy & Partnerships at UNITE. Holding a degree in International Relations from Lisbon University, Amish is general-secretary of the House of India. He is currently a student at Católica Lisbon University where he is undertaking a Master’s Degree in Management with a specialisation in Leadership.

TELEMEDECINE/DENTIST
Nicolas GIRAUDEAU gained his DDS from the University of Montpellier, France, in 2009 and completed an MSc at the university in the following year. In 2014 he successfully completed a PhD on legal considerations relating to teledentistry, Faculty of Law and Political Science, University of Montpellier. Since 2010, Dr. Giraudeau has worked in the Odontology Service of University Hospital of Montpellier, in the Departments of Pediatric Odontology, Operative Dentistry and Public Health. Dr. Giraudeau is the secretary of the e-health Chaire of the University of Montpellier. He is also the treasurer of the IADR e-Oral Health Network. In January 2018, he was the Editor of a book entitled “e-Health Care in dentistry and Oral Medicine: a clinician’s guide” (Springer). In 2018, he worked with WHO as a consultant during 3 months especially on the topic of the mOralHealth Programme. Since 2014, he leads the e-DENT project, a tele dentistry project in nursing home, facilitates for disabled people and prison.
Ruth Gray, BDS, MDPH, MJDF (RCSEng), Msc.
Ruth is Clinical Lead for Prison Dentistry in N. Ireland, and a Quality Improvement Fellow for SEHSCT. She has the responsibility of quality improvement and innovation in the prison healthcare in the region. She is a specialist in Special Care Dentistry, and has a specialist interest in oral care issues related to substance misuse, homelessness and prison health. She was on the editorial board for the Handbook of Prison Dentistry and is a contributor to WHO Health in Prison Guidelines.

Ruth is Deputy Clinical Director for Project ECHO Hospice UK, developing healthcare networks throughout the UK, connecting and improving service delivery. She is lead for a Project ECHO prison network, linking the 3 NI prisons with UK colleagues. Ruth has a keen interest in health services research and is currently leading a Health Foundation funded project looking at the impact and transfer of quality improvement training in N. Ireland. She is part of a team leading on UK Cabinet Gov TECH SBRI funding for small business to devise a tech solution for data sharing across organisations involved in the N.I. justice system. Previous research has involved the prescribing pathways in Prison, an oral health needs assessment of the prison population, and the oral health impact of methadone consumption in Dublin.

Ruth sits on the exec committee of the National Association of Prison Dentistry and previously on the European Federation of Prison Health and the Irish Association of Special Care Dentistry. Ruth is a member of the WHO HIPP steering committee and is a member of the Q Community.

TRAINING
Monique PANNEMAN, Msc., is working as Projectleader at the VUmc Academy, part of Amsterdam Universitair Medical Centre (UMC). She graduated in sociology and started her medical career as a nurse in a General Hospital. She is experienced in coordinating and organizing (blended) education programs. In collaboration with the Custodial Institutions Agency (part of the Ministry of Justice and Security), she and her team have put up a Judicial Medical course for general practitioners.

GENDER
Sylvia ELZINGA, Head of the medical department of the Custodial institions Zuid-oost Roermond (man facility) and in Evertsoord (women and man facility) in the Netherlands.

I am already working in healthcare for over 32 years, first as an emergency nurse in an University hospital and later I became operations manager by the Justice department.
Since over 13 years I work in the Justice system and its an great challenge to work with all kind of detainees, man ,women and even babies and tottlers. My goal is to create good healthcare for all our patients who are detained. I have spoken several times at (international) conferences.

HUMAN RIGHTS
Barry ROONEY has worked in the area of community health improvement for over 20 years in a variety of roles throughout Ireland and the UK. He has a BSC Hons degree in Health and Social Care and an Advanced Diploma in Health Promotion. He has worked with a variety of disadvantaged and excluded groups and is passionate about addressing inequalities and providing opportunities for people to reach their full potential and contribute to improving their life and the lives of others. He unwinds by hiking many of the beautiful mountains in Ireland and is an avid Park Runner.
Gabriele FISCHER studied human medicine at the Medical University of Vienna. She received her doctor’s degree in 1984, when she started to specialize in the field of psychiatry and neurology. In addition she holds a degree in intensive care medicine. From 1986 – 1989, Gabriele Fischer did a research - fellowship & psychiatric residency training at Washington University Medical School, St. Louis, USA gaining comprehensive in basic science. In 1994, she became the Medical Director of the Addiction Clinic, and in 2000, Professor of Psychiatry and Neurology at the Medical University of Vienna. Gabriele Fischer has been involved in many epidemiological, clinical, psychopharmacological and public health studies in the field of substance use disorder and non – substance related addictions including the topic of co-morbidities and special populations; her special research focus includes the aspect of sex/gender differences in psychiatry in prevention, treatment accessibility and provision. Next to psychiatry Dr. Gabriele Fischer has been involved over decades in human rights activities: She has given internationally many trainings on UN Human Rights Treaties, mostly related to OP-CAT, CRPD, CRC, CESCER amongst others and also with a special aspects towards sex & gender issues, Istanbul Convention and Istanbul Protocol. She has monitored - nationally & internationally - many prison sites, detention centers, psychiatric hospital, elderly homes etc… and also implemented recently programmes eg in Afghanistan. Prof. Dr. Gabriele Fischer has been a consultant for several international and national groups, including the United Nations Office on Drug and Crime, the World Health Organisation and the European Parliament. She serves as member of the Scientific Board for Quality Control and Quality Management in Medicine and of the European Monitoring Center for Drugs and Drug addiction (EMCDDA), Member of General Medical Council in Austria, founding board member of: Women for women: health policy in focus. In July 2015 she became the commission director of the Austrian Ombudsman Board dedicated to improve human rights in vulnerable populations (NPM - national prevention mechanism). To date, Gabriele Fischer has given over 400 scientific presentations and has over 150 peer-reviewed publications and is involved in editorial & reviewing work in many international journals.

TUESDAY OCTOBER, 22
09:00  2nd Plenary Session : Migrants/Gender

Manuela Ivone CUNHA (CRIA, University of Minho): PhD in Anthropology and Habilitation in Sociology. She was vice-president of EASA and is currently the editor-in-chief of Etnográfica. Distinguished with a social sciences award for her ethnographic research on prisons and drug markets, she also studies intersections between criminal law, inequality and cultural difference. She is currently co-IR of the FCT funded research project Inclusive Courts: Equality and cultural difference in the practice of Portuguese courts

Reem MANSOUR is a Hospital Practitioner in General Medicine and works at Les Baumettes prison in Marseille (France) and at the Administrative Retention Center (detention of migrants) in the same city since 9 years. Previously, she worked as General Practitioner at the Comede healthcare center, Hôpital Kremlin-Bicêtre, France from 2000 to 2006. The Comede is a healthcare center for exiles, that annually provides medico-socio-psychological open-access care for some 5000 patients from more than a hundred different nationalities. From 2006 to 2009, she was Medical Coordinator for Doctors of the World-France (MDM-F) in Lebanon on a program entitled: «Improving access to health care and rights for migrants, asylum seekers and refugees detained in Lebanese prisons». She is presently President of Osiris healthcare center in Marseille that takes care of exiles victims of torture and political violence.
Ehab SALAH, Prisons and HIV Advisor, HIV/AIDS Section, United Nations Office on Drugs and Crime (UNODC) Headquarters in Vienna. Ehab is a medical doctor with more than 20 years of hands on experience in communicable disease research, prevention and control. Prior to joining the HIV/AIDS Section in UNODC, Vienna, he was coordinating UNODC’s HIV in Prisons Programme in Sub-Saharan Africa (2011 – 2014). Earlier, he was the HIV focal point in UNODC Regional Office for the Middle East and North Africa region (2007-2011).

11:15    2nd Cornerstone Lab

**ADDITION**

Maja BINNEWIJZEND  works as a psychiatrist at the Netherlands Institute for Forensic Psychiatry and Psychology (NIFP) in Amsterdam, The Netherlands. She started working in the forensic field during her psychiatry residency. Before her residency in psychiatry she worked as a PhD-student at the department of Radiology and Neurology of the Amsterdam University Medical Centre on her thesis called “Functional MRI in dementia”.

Kira von BERNUTH
As I am a PhD student, my bio is quite short):
2013-2018 medical school at Friedrich- Schiller Universität Jena
Since 2018 medical school at Charité-Universitätsmedizin Berlin and dissertation project on the practice of opioid substitution treatment in the Berlin custodial setting.

Special education: being a nurse at the department of Justice; Specialized education from the pallas company , how to handle/to take care, with bodypackers.

Pim Prins, nurse in: 2002. Work experience:
- 10 years as a military nurse at the Royal Dutch Navy (both on ships/subs and did SFIR2/Iraq)
- 2 years at several hospitals in the Netherlands
- 10 years a a nurse at the ER at Amsterdam Schiphol Airport
- 01 year as a Nurse at the Department of Justice at JCS

Luis ROYUELA
Robert TELTZROW studied Social Sciences in Berlin (Freie Universität und Humboldt Universität) and Public Health (Harvard Medical School Boston). Since 2010 he works for the Pompidou Group of the Council of Europe as project coordinator for international cooperation projects with a focus on prison health and the Eastern European region.

Andrew MAC FARLANE is the provincial executive director of Correctional Health Services and the Forensic Psychiatric Clinics at BC Mental Health and substance Use Services. He began his career as a psychiatric social worker and has held several senior leadership roles in acute and community care settings as well as Vancouver’s Downtown Eastside. He is passionate about recovery- and outcome-oriented systems of care that include family members and clients as partners. He is a frequent speaker at conferences and has taught undergraduate courses in ethical practice and social work. Andrew has a master’s degree in social work from the University of Calgary and undergraduate degrees from the University of British Columbia.

Lisa MICHAelsen is a Physician at DIGNITY – Danish Institute against Torture. She has, inter alia, three years of clinical forensic medical expertise. In DIGNITY, Lisa’s areas of responsibility include health and human rights and torture prevention. She is contributing to visits to places of detention undertaken by the Danish National Preventive Mechanism under the Optional Protocol to the UN Convention against Torture (OPCAT). The mechanism, which includes the Parliamentarian Ombudsman, the Danish Institute of Human Rights and DIGNITY, undertakes 40 visits per year to correctional institutions, psychiatric departments and social institutions in Denmark.

Rachel GIBBS will share insights from her adventures; from the ingredients required to shift to a more rehabilitative culture to managing resistance and maintaining resilience. She will share stories of transformational change in unexpected communities and advocate how involving people with lived experience of the criminal justice system in service provision can have positive impact for all involved. She is also keen to hear from you. Rachel leads a multi-disciplinary team offering a wide range of services to all people in prison in Northern Ireland. In order to maximise health outcomes for the prison population, she promotes collaboration across multiple agencies. Her team works in partnership with the Northern Ireland Prison Service to deliver effective person centred care. Rachel’s clinical background is as an Occupational Therapist with broad experience working in a variety of countries. Rachel’s experience across a wide variety of service areas, cultures and societies has had a profound impact on her approach to and practice of healthcare; she believes it has contributed to her success in managing resources effectively and inspiring her teams.

Joana MENDEZ is UNITE’s Human Rights Officer and Executive Assistant. International Relations specialist with more than six years of professional experience in Research and Reporting in the field of the United Nations. Strong organizational skills developed and deepened through the organization of numerous public and private meetings and events. Holds a degree in International Relations from the University of Coimbra and a Post-Graduation in Human Rights from the same University. She also has a Master in Political Science and International Relations from NOVA University of Lisbon. Comfortable working in a fast-paced, hands-on, growth-oriented environment.
Daniel SIMÕES is a FCT PhD fellow in Global Public Health at the Institute of Public Health of the University of Porto, licenced Psychologist, with a Masters in Community Psychology, and over 10 years of work in the third sector, having been involved in areas such as mental health, social housing and child protection. Over the last 9 years he has been collaborating with Grupo de Ativistas em Tratamentos (GAT - Portugal, a member of Coalition Plus) as a Project Manager and Policy Officer, having served in the board of the organisation. He has been involved in the design and implementation of integrated screening and linkage to care projects, as well as in both national and international advocacy activities in the several scopes of the organization. He is a member of the European Aids Treatment Group, and part of its Policy Working Group, and one of Portugal’s representatives at the EU Civil Society Forum on HIV, TB and Viral Hepatitis. Daniel is co-chair of the EUROTEST Initiative (formerly known as HIV in Europe), member of the European Testing Week Working Group, the ECDC Dublin Declaration Advisory Board, and WHO Europe’s European Laboratory Initiative Core Group.

**INFECTIOUS DISEASES**

Laurent GETAZ is a Senior Physician in the Division of Penitentiary Medicine and in the Division of Tropical and International Medicine, at the University Hospitals of Geneva, Switzerland. He is active in improving health service delivery to prisoners on a local, national and international level. Specialist (FMH) in Tropical /Travel Medicine and in General Internal Medicine, he holds also a Master of Advanced Studies in Public Health and a Master in Tropical and Infectious Diseases. His main research interests and educational activities include infectious diseases among migrants and prison populations. In Bolivia, he also performs scientific investigations in the field of infectious diseases in the community (Strongyloidiasis) and in prisons (hepatitis B, HIV, herpes, syphilis, and non communicable diseases).

**TELEMEDECINE**

Philippe HOMSI
Pr Rui Tato Marinho
Head of Department of Gastroenterology, Hepatology, Hospital S. Maria, Professor of Medical School of Lisbon.

Lara TAVOSCHI graduated magna cum laude in Medical Biotechnology from the University of Padua (Italy) in 2004. She holds a PhD in Molecular pathogenesis, immunology and control of pathogens that cause Poverty-Associated diseases from University of Perugia (Italy), and a master in public health from the London School of Hygiene and Tropical Medicine (UK). She worked for the Italian National Institute of Health in the period 2004-2013 on translational research, health system strengthening and capacity building with a focus on HIV and other viral diseases including hepatitis B and HPV, being based in South Africa for more than 5 years (2008-2013). In 2013-2018 she served as Scientific Officer for HIV and viral hepatitis in the scientific advice section of the European Centre for Disease Prevention and Control, focussing on HIV, hepatitis B and C and people in prison. During this period, she coordinated a number of scientific studies to assess the epidemiology of BBVs in Europe and the development of ECDC guidance documents on BBVs prevention and control. Currently she holds a researcher position in Public Health at the University of Pisa. Her main research interests are prevention and control of communicable diseases, including viral hepatitis and vaccine-preventable diseases, and prison health. Lara Tavoschi has been member of the WHO hepatitis testing guidance development group, and has served on the scientific board of EU-funded projects such as OPT-test and INTEGRATE. She is active member of the European Public Health Association and of the Italian Society of Public Health.
Michel WESTRA, After graduation in 1989 worked in the early nineties for the GGD (Municipal health service) in Apeldoorn as a general health care doctor and forensic doctor. Working for DJI (National Agency for Correctional Institutions) since 1994. Until 2005 as a doctor and head of the medical service at the Penitentiary Institute in Tilburg and from 2005 till now as medical adviser DJI. Since 1994 also working as a forensic doctor for the GGD Hart voor Brabant in Den Bosch.

Roberto MONARCA, Head of the Health Unit of the Maximum Security Prison of Viterbo, Italy, Viterbo Local Health Service (ASL VT) and past President of Health without Barriers. Infectious diseases specialist degree at the University of Rome “La Sapienza”. Until end of 2015 Scientific Director of SIMSPE (Italian Society for Health in Prison) and President of the SIMSPE. Project Leader and trainer for SIMSPE in the EU Project REHAB (REmoving HeAlth prison Barriers) financed by the EU Commission, collaborating with Viterbo University; in 2015 has been appointed as responsible for the transnational research by the Ministry of Justice in the EU Project MEDICS (Mentally Disturbed Inmates Care and Support) and in 2017 Project Leader for HWBs in the EU Project, “Systematic Literature Review on Infectious Diseases in Prison”, financed by ECDC (European Centre for Diseases Control) e EU Commission. He counts more than 30 publications in national and international journals on medicine, infectious diseases and penitentiary medicine.

16:15 Lisbon Declaration on Human Rights: The HWB Charter

Sam Shirley-Beavan is a social science researcher in the Public Health & Social Policy team and Harm Reduction International. He conducts original research and analysis into harm reduction trends around the world. Prior to joining Harm Reduction International, he worked at the International AIDS Society and human rights organisations in Europe and Latin America. He is a member of the Correlation European Harm Reduction Network Expert Groups on Monitoring and Overdose, the International Working Group on Stimulants and Harm Reduction, and the UK Harm Reduction Group.

POSTERS

Elena RASTRELLI MD PhD, Member of Physicians and Surgeons and Dentists Order of Viterbo (order No. 2006 - January, 31, 2002), Physician at the Infectious Diseases Unit – (Hospital Ward for Prisoners) Ospedale Belcolle (Viterbo), Board member of SIMSPE (Società Italiana di Medicina e Sanità Penitenziaria).
Area of interest: Infectious Diseases in prison, Health in prison, Gender-Specific Medicine in prison, Management of HCV infection, Management of HIV disease.

MDr Cyril MANZANERA,
PhD, Psychiatrist, Doctor in law and criminals sciences
In Charge of unity of psychiatrics cares in prison of VLM
Treasurer of Health Without Barrier
Member of GerTox association
CHU de Montpellier, France

Adrian DUNLOP, MBBS PhD GDipEpiBiostat FAcHAm, is Director and Senior Staff Specialist of Drug & Alcohol Clinical Services for the Hunter New England Local Health District and Conjoint Professor, School of Medicine and Public Health, Faculty of Health, University of Newcastle and Honorary Medical Officer, Addiction Medicine, Justice Health and Forensic Mental Health Network. He was the Chief Addiction Medicine Specialist, Mental Health Drug & Alcohol Office, NSW Health (2014-2018) and Clinical Advisor (2012-13) responsible for policy advice in drug and alcohol to the NSW Ministry of Health.
Health Without Barriers. European Federation for Prison Health

Human Rights Charter of Health without Barriers, the European Federation for Prison Health
June 2019

Prisons can be detrimental to health and wellbeing. There is a higher prevalence of complex chronic health conditions, behavioral health risk factors (such as substance use disorders and insufficient social supports) among prisoners, than in the non-incarcerated population. The nature of incarceration makes prisoners fully depend on the correctional authorities for timely access to health-care services. Any administrative error, omission or act of the authorities can have a critical impact on prisoners’ health. Therefore, prisoners are a vulnerable group whose protected right to health care must fall under the core obligations of States.

Health-care staff who work in prisons play a crucial role in the optimization of the health and wellbeing of prisoners. They have the duty to provide prisoners with preventive and curative physical and mental health services of the same quality and standard to those afforded to patients who are not imprisoned or detained.

Correctional authorities should always follow the medical advice and recommendations of health-care staff working in prisons regarding timely access to an appropriate level of health care services.

However, health-care personnel in prisons are at risk of facing dual loyalties and other ethical dilemmas. Their duty to care for their patients may enter into conflict with the correctional authority’s duty to ensure security and prison management.

We, the members of Health Without Barriers (HWB). European Federation for Prison Health, hereby reaffirm The Oath of Athens of the International Council of Prison Medical Services (1979). We refer to the core ethical obligations of health-care staff working in prisons:

1. To abstain from authorizing or approving any form of punishment.
2. To abstain from participating in any form of torture and inhuman or degrading treatment or punishment.
3. Not to engage in any form of human experimentation, clinical trials or other health research amongst people in prisons without their free and informed consent.
4. To respect the confidentiality of any information obtained in the course of their professional relationships with incarcerated patients.
5. Not to let any non-medical matters take priority over their medical judgement, but to base the latter on the needs of their patients only.

As an organization, Health Without Barriers is committed to contributing all of our available means to ensure that the health-related human rights of prisoners are duly respected, protected and fulfilled.

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In particular and in line with the European Prison Rules (EPR)\textsuperscript{6}, the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment of Punishment (CPT)\textsuperscript{7} and the UN Nelson Mandela Rules (NMR)\textsuperscript{8}, Health Without Barriers promotes the following basic principles of quality prison healthcare:

1. \textit{State responsibility}: Health care for people deprived of liberty is State responsibility.

2. \textit{Access to care}: All detained people shall have timely access to medical care at all times and free of charge.

3. \textit{Equivalence of care}: Prison health care services should provide medical treatment and nursing care, as well as appropriate diets, physiotherapy, rehabilitation or any other necessary services, in conditions and with standards comparable to those experienced by non-incarcerated patients, based solely on the medical needs. Medical, nursing and technical staffing, as well as premises, installations and equipment, should be geared and updated accordingly. States must ensure that all prisoners, irrespective of their legal status, background of migration, nationality, religion, and socio-cultural background can access such health care on an equal basis, by providing all necessary resources such as interpretation services or training for health care staff in appropriate methods of interaction in a setting marked by diversity.\textsuperscript{9}

4. \textit{Patient’s consent and confidentiality}: Informed consent and respect of confidentiality are fundamental rights. They are essential to an atmosphere of trust, which is an inherent part of the doctor/patient relationship, especially in prisons, where a prisoner cannot freely choose his or her own doctor.

5. \textit{Prevention of disease and violence}: The task of prison health care services should not be limited to treating sick patients. It should also be entrusted with the responsibility of optimizing social and preventive medicine and contributing to the prevention of violence against people in prisons through the systematic recording of any signs of ill-treatment and, without exposing any persons concerned to any foreseeable risk of harm and, preferably, with the consent of the prisoners concerned, the provision of a report to the competent medical, administrative or judicial authority.\textsuperscript{10}

6. \textit{Humanitarian assistance}: Prison health care services should pay special attention to particularly vulnerable categories of prisoners with special needs such as women, children, adolescents, the aged, those with seriously life-limiting illnesses, those with mental or physical disabilities or prisoners with complex health conditions that hamper their rehabilitation or challenge their dignity during incarceration.

7. \textit{Professional independence}: In order to ensure that their single duty – providing quality care for their patients – is not challenged by external competing considerations or loyalties, health care staff working in prisons should always be professionally independent of law enforcement or judicial authorities and should be professionally aligned as closely as possible to national or federal health authorities.

8. \textit{Professional competence}: Prison doctors and nurses should possess specialised knowledge enabling them to deal with the particular forms of prison pathology and they should adapt their treatment methods to meet the standards expected outside of prison to the best of their ability despite the conditions ?constraints? imposed by detention. They should have access to (and compensated time to participate in) continuing medical education to ensure that they are practicing the most up-to-date medical care. Prison health-care staff should also be properly trained in human rights and medical ethics.


\textsuperscript{10} Cf. footnote 7; Cf. footnote 8 (NMR 34)