

3rd European Conference on Prison Health

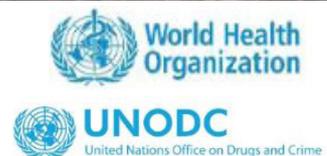
Health Independent health care in prison



Side event at LisbonAddiction 2022
November 21-22

LISBON

Prison Health : a whole government responsibility



EDITORIAL

The Covid 19 pandemic has reminded us that a virus knows no borders and when faced with this tragedy, healthcare workers have stepped up their efforts in order to mitigate its consequences in prison. Healthcare in prison cannot be designed without the mobilization of the authorities and of civil society. The health needs of people in prison are more complex than ever.

During these two days, we will be sharing our experiences and enriching them through exchanges between professionals from all continents attending this year's conference (Europe, America, Asia, Africa, Australia), with the hope of returning home strengthened in our commitment to «take care of the other one ». These debates will focus on ethics, addictions, harm reduction, infectious diseases, mental health and non-communicable diseases. We will renew the experience of the «cornerstone labs» which helps facilitate further the contacts between speaker and delegates and make the exchanges even more fruitful.

We are thankful for the support of our partners from Portugal (SICAD, DGRSP), the European institutions (EMCDDA, Pompidou Group, CPT) and international organizations (HRI, WHO Europe, UNODC, ICRC)

The war in Ukraine, a catastrophe that goes far beyond its borders, has thrown its prisons into chaos : we will hear the testimony of a person who has lived through this tragedy.

I wish you all a great conference, and thank all those who participated in the realization of this event.

Let no one be left behind.

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

Ehab SALAH: UNODC

Jorg PONT : Vienna

Stefan ENQUIST: Federal Office of Public Health Switzerland

Organization Committee

Fadi MEROUEH: HWB President

Rui MORGADO: General Directorate for Reinsertion and Prison Services, Porto

Linda MONTINARI: EMCDDA

Prison health: a whole government responsibility !

Monday November, 21

12:00 Registration

Lisbon Congress Center: Praça das Indústrias 1, 1300-307 Lisboa - Room 5

13:00 Opening Session:

Fadi MEROUEH - HWB's President
Alexis GOOSDEEL - EMCDDA's Director,
João GOULÃO - SICAD's Director,
Alan MITCHELL - CPT's President,
Filipa ALVES E SILVA - WHO Europe,
Rui MORGADO - DGRSP
Jorge COSTA - Deputy Minister of justice, Portugal

13:30 1st Plenary Session: Human Rights

Chairs: **Elena LECLERC** (ICRC), **Hans WOLFF** (Division of Prison Health Geneva University Hospitals, Switzerland and CPT, Council of Europe)

INTRODUCTION:

- **HWB Charter**

Hans WOLFF - HWB

- **Resocialisation in prison - dream or reality? The model of Norway's Halden prison (20')**

Hans WOLFF - CPT

- **Istanbul Protocol 2022: What is new, and why?**

Modvig DE JENS - Dignity

- **Systemic failures of national prison health systems**

Hugues DE SUREMAIN - EPLN

- **The role of the Internal Control Service in the Prison System in respecting the human rights of prisoners and the investigation of criminal offenses in prisons**

Ergys SHEHU, Management and Analysis Sector in the Directorate of ICSP, Ministry of Justice, (Albania)

- **Raising awareness, identifying and acting to limit detention damage after a period of seclusion**

Mariëlle VAN NETTEN (Netherlands)

15:15 **Coffee break**

15:45 **2nd Plenary session: Migrants-Gender**

Chairs: Linda MONTANARI - EMCDDA, Ruth GRAY - SEHSCT

INTRODUCTION:

- **Migrant and detention which priority and action for Europe**

Alan MITCHELL, President CPT, Council of Europe

- **Gender perspectives in prison health:**

Considering the needs of women and transgender people

Salah EHAB (UNODC, Vienna)

- **The health of women in prisons**

Severine TRIVERIO, Sandrine REIGNIER (Switzerland)

- **Migrants in the closed family centre and the unaccompanied minors (UM)**

Natascha CAMPHUIJSEN, Sara VAN VUGT (Netherlands)

17:00 **Corner Stone**

Chairs: Miriam KASZTURA and Anne-Claire BRÉCHET-BACHMANN

(Division of Prison Health, Geneva University Hospitals, Switzerland)

- **Frail elderly prisoners in the Netherlands; how to support them?**

Dirk J VERLUIJS (Netherlands)

- **A mind-body relaxation intervention in prison**

Ding CHRISTEL, Dominique PRALONG (Switzerland)

- **Advantage of telediagnosis and prosthodontics in the dental healthcare pathway of detained persons at Villeneuve-lès-Maguelone health unit**

Olympe MAZIERES (France)

- **Health behind bars**

Janneke LAGEMAAT-MENZO, Mariska VAN DER VEER (Netherlands)

- **Psychologist in prison**

Morgane PIAZZA (France)

- **Human rights in prison settings at the time of COVID**

Jofré MARCELA, Cinzia BRENTARI (HRI)

- **The Risk Screener – Violence: a novel risk screening**

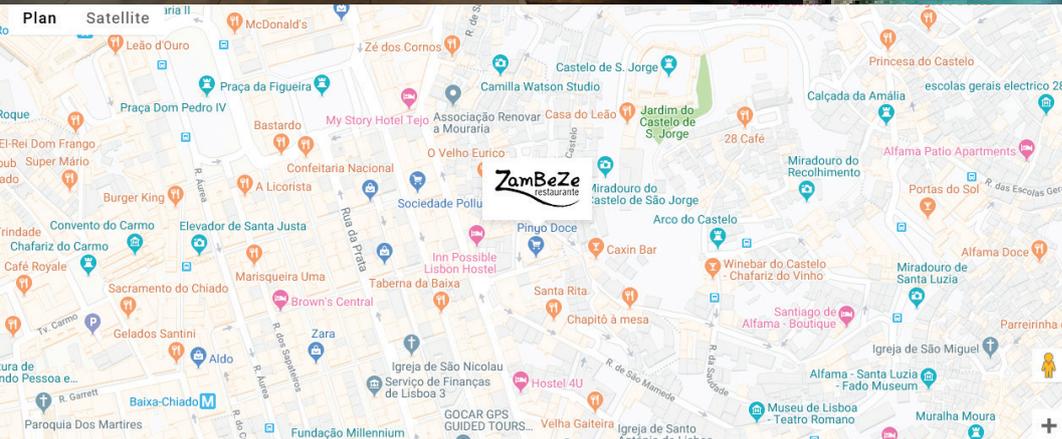
Marjam SMEEKENS (Netherlands)

- **ADHD in prison: unrecognized and underdiagnosed?**

Renske MOCKING (Netherlands)

18:20 **End of 1st day**

20:00 **Dinner**



ZAMBEZE RESTAURANTE

Calçada Marquês de Tancos
Edifício EMEL
Mercado Chão do Loureiro
São Cristovão
1100-340 Lisboa

EMAIL

zambezorestaurante@montebelohotels.com

RESERVAS

T. 21 887 70 56 / 92 520 06 31

ENTRE EM CONTACTO

09:00

3rd Plenary session: Infectious disease/Covid

Chairs : Lara TAVOSCHI - UNIPI, Roberto MONARCA - HWB, Rui TATO MARINHO - LISBON

INTRODUCTION:

- **Model Care: elimination hepC in prison**

Fadi MEROUEH, Thomas SEYLER - EMCDDA

- **One year (March 2020 - February 2021) in prisons in Lombardy: the progression of the COVID-19 pandemic in the prison environment**

Lara TAVOSCHI (Italy) - UNIPI

- **Experiences of COVID-19 isolation in Northern Ireland prisons: a qualitative study to enable co-design in developing health services**

Ruth GRAY - SEHSCT

- **COVID-19 vaccination in prison settings: a model to design tailored vaccine delivery strategies**

Sara MAZZILLI (Italy)

10:30

Coffee break

11:00

4 th Plenary session: Addiction, Mental Health

Chair: Heino STÖVER - ISSF - Denis HUBER (Pompidou Group)- Rui MORGADO - DGRSP Portugal

INTRODUCTION:

- **Reducing harm: is change possible in prison?**

Cinzia BRENTARI (HRI)

- **Reducing health inequalities thanks to nicotine substitutes and ecigarette in prison**

Nicolas BONNET, Bastien GUILLERMIN (France)

- **Buprenorphine Long Acting in prison at VLM**

Aurélie MIEUSET (France)

- **Dementia in prison**

Louise SMALLENBURG (Netherlands)

- **Using health data to improve decision-making in prison healthcare: the Oporto Central Prison health profile**

Mariana ABREU (Portugal) - Porto

13:00

Lunch

14:00

5 th Plenary Challenges beyond Europe

Chairs : **Filipa AZVEDO E SILVA** (WHO Europe), **Fadi MEROUEH** (HWB)

- **Moving beyond the politization of same-sexuality and leveraging right to health to counter HIV in Malawi's prisons.**

Marie-Claire VAN HOUT (UK)

- **Understanding and Responding to Substance Use and Abuse in the Palestinian Refugee Camps in Lebanon Prior to and During COVID 19 Times**

Elie AARAJ (Lebanon)

- **Making evidence about medication-assisted treatment in prisons: challenges across regions and ways forward to improve the health of incarcerated people who use drugs**

Lyu AZBEL (Yale)

- **Access to care for drug users incarcerated in Ukraine**

Yanina STEMKOVSKAYA (Ukraine)

Which Model for Prison Health? Fishbowl

Chairs : **Jörg PONT** (University of Vienna), **Michel WESTRA** (HWB)

INTRODUCTION:

- **Elena LECLERC (ICRC): Conclusions of ICRC First World Conference on Health in Detention.**

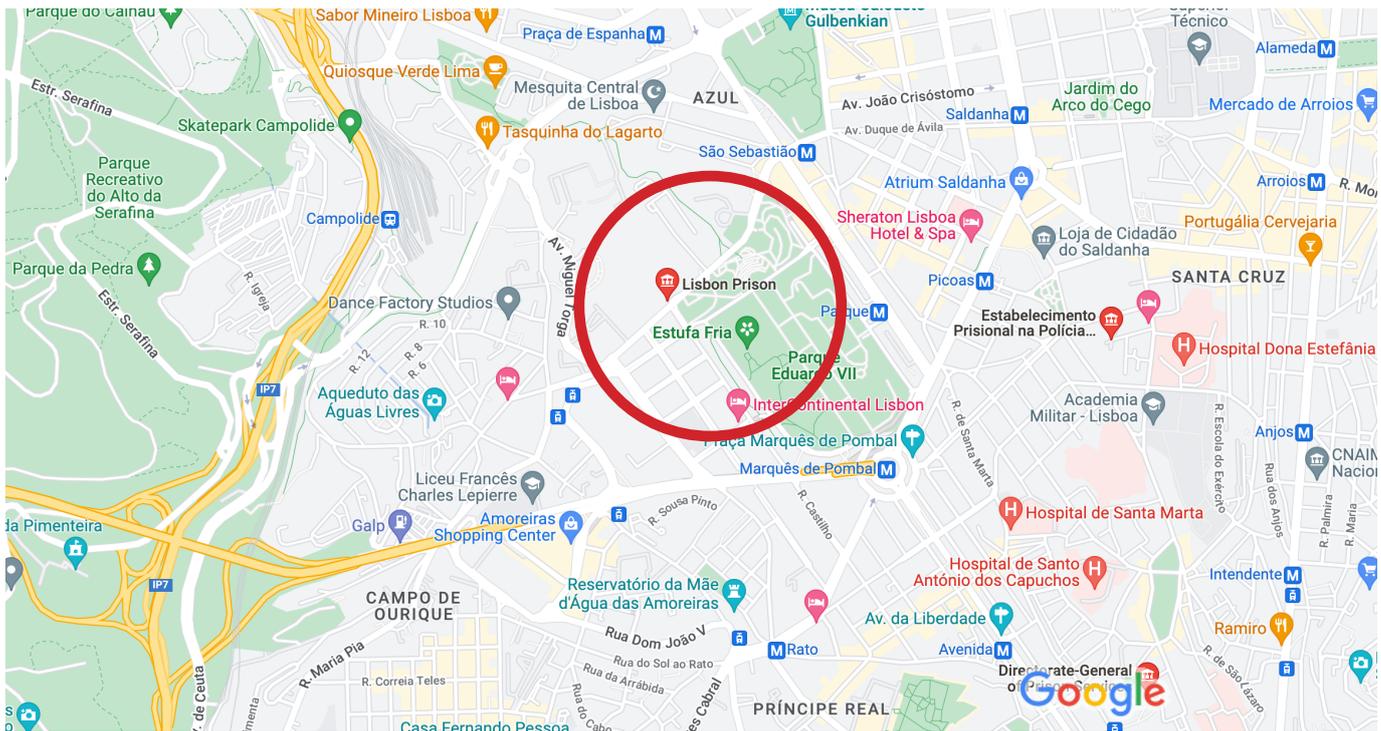
Round table

HWB (Michel WESTRA), **ICRC** (Elena LECLERC), **HRI**, **UNODC** (Salah EHAB), **CPT** (Hans WOLFF),

EMCDDA (Liesbeth VANDAM), **Pompidou Group** (Denis HUBER),

WHO Europe (Filipa AZEVEDO E SILVA), **UKHSA** (Alicia ROSELLO).

Visit to Lisbon Prison



Données cartographiques ©2022 Google 1000 ft

Lisbon Prison

Aucun avis

Prison · Rua Marquês de Fronteira

54

+351 21 382 8100



SPEAKERS



Jorge COSTA
Deputy Minister of justice – Portugal



Christel DING

Throughout my professional career as a nurse, my focus has been on vulnerable populations. I worked in migrant health and addiction medicine, before joining the prison health unit of Geneva University hospital, Switzerland. Due to my training in yoga and free diving (apnea), I am part of a group of nurses offering mind-body relaxation sessions to detainees in Brenaz prison.



Janneke LAGEMAAT-MENZO

I am 41 years old, married and a mother of 2 children, 9 and 11 years.

I completed HBO nursing in 2001 and since then i worked as a nurse in various fields.

Since 2011, I have been working as a judicial nurse at the medical service in the Penitentiary Facility Zwolle.

In 2012 I completed the training to become a judicial nurse.

In 2020 I completed the training to become a practice nurse general practitioner care.

My area of focus is nutrition and lifestyle and in my day-to-day work I guide people towards a healthier lifestyle. This can be either preventive or curative. Think of people with diabetes, high blood pressure, high cholesterol and/or obesity. Guidance in smoking cessation is also part of this



Mariëlle VAN NETTEN

I have been working in Detention Center Rotterdam in the Netherlands since 2018 as a nurse. During my work in the detention center I visit the isolation ward very regularly. It struck me that people started to change or deteriorate their behavior in a short time in the isolation cell. I was surprised about that and wanted to know more about it.

In 2019 I graduated for the training for Judicial Nursing. For my final assignment of the program I did research into the psychological and physical effects in detainees during a time in isolation.

By doing the research it has become clear to me how intense a period of isolation can be for detainees. I would like to share the knowledge I have gained with colleagues.



Dirk JAN VERSLUIS, MD, PhD, MHA

As Medical Director of the Prison Medical Centre of Somatic Care in The Hague, The Netherlands, it is my responsibility to develop and introduce a new concept of integrated care for frail elderly prisoners. In order to make this change in the organisation I work with a multidisciplinary team. Furthermore, as Medical Director I am accountable for the quality of care and I am responsible for the close partnership with Haaglanden Medical Centre (HMC), a large inner city hospital and trauma centre in The Hague.

After my training in internal medicine and intensive care medicine I have been head of the Department of Intensive Care for thirty years and a board member for a one year period of Haaglanden Medical Centre. My PhD thesis was about organ transplantation, and I have an MBA degree in strategic health care management. I have held several board positions in medical societies.



Renske MOCKING

works as a junior researcher at the Netherlands Institute for Forensic Psychiatry and Psychology. Her research focuses on a new screening & assessment protocol for ADHD in prison, and takes place in Justitieel Complex Zaanstad.

She has a background in psychology, having obtained a masters degree in Clinical Neuropsychology and Intervention Criminology from Vrije Universiteit Amsterdam. She has previous experience working as a (neuro)psychologist in a clinical setting.



Marjam SMEEKENS

Is a junior researcher and PhD candidate at the Netherlands Institute of Forensic Psychiatry and Psychology in Utrecht. Her PhD trajectory focuses on validating The Risk Screener –Violence (RS-V). A new risk-screening tool developed in The Netherlands in order to make risk evaluations feasible for all prisoners.



Natascha CAMPHUIJSEN

I'm 44 years old and I live in a very small town called Loenersloot, just around the corner of Amsterdam. I am married and we have one son, 13 years old. I like festivals, traveling, race sports and nice relaxing evenings with family and friends...

I am a nurse since 1996 when I joined the Royal Dutch Navy. I've seen the whole world on the navy vessels, foreign deployments and been living on the Dutch Caribbean Island Curacao for 7 years. After 21 years I left the navy and worked for 3 years as a nurse at Detention Centre Schiphol.



Sara VAN VUGT

I'm 38 years old and I live in a town called Veenendaal, in the middle of the Netherlands. I am married and we have one son and one daughter, 5 and 3 years old. I daytrips with my family, all animals, reading and relaxing!

I am a nurse since 2004 when I started my career in the mental health care. I switched to Detention Centre Zeist almost 13 years ago. Since 2 years I'm the deputy of the Medical Department.



Denis HUBER

Started his diplomatic career in January 1990, in the French Ministry for Foreign Affairs, before joining the Secretariat of the Council of Europe in September 1993. He gained 10 years of experience in the Secretariat of the Committee of Ministers. Between 2006 and 2012, he was posted to Belgrade and then to Lisbon. Since July 2018 he is the Executive Secretary of the Co-operation Group to combat drug abuse and the illicit trafficking of drugs (“Pompidou Group”). Up from January 2022 he is also responsible of supervising the Council of Europe cooperation activities in the field of police and detention.



Louise SMALLENBURG

Is psychiatrist at the Netherlands Institute of Forensic Psychiatry & Psychology, and child and adolescent psychiatrist in training at the department of Child & Adolescent Psychiatry at the Erasmus Medical Centre, Rotterdam, the Netherlands. She is, as forensic psychiatrist, a registered expert witness in criminal legal proceedings with adolescent and adult suspects. Until recently, she worked in the Psychiatric Penitentiary Centre, The Hague. Louise is chair of “De Jonge Psychiater” (the young psychiatrist).



Linda MONTANARI

Is a health sociologist and work as principal scientist in the area of health and social responses at the European Monitoring Centre for Drugs and Drug Addiction – Sector support to policy. She has worked for 7 years as a sociologist in the drug treatment services in Italy until 2000, when she moved to Lisbon. At the EMCDDA she is coordinating the area of drugs and prison. She has coordinated the 2021 publication on prison and drugs in Europe (https://www.emcdda.europa.eu/publications/insights/prison-and-drugs-in-europe_en). Since several years she is promoting the implementation of drugs monitoring through common European methodological framework for improving data quality and comparability in the European prisons. Since some years she is also in charge of the area of gender and drugs at the EMCDDA and recently of drugs and mental health.



Jörg PONT

MD, emerit. Professor Medical University Vienna, Former part-time prison physician in Sonderanstalt Wien Favoriten and Medical Advisor to the Austrian Ministry of Justice. Currently independent consultant in prison health care.



Mariska VAN DER VEER

I am 41 years old. I live in Zwolle together with my boyfriend, our son Gino (11 years old) and PUK our dog. I started my career in elder care as an assistant and worked my way up to nurse at a rehabilitation department. Because of the high workload and therefore little time for my patients, I started looking at other work areas in healthcare. Working in psychiatry fits well with me as a care provider because it gives me the possibility to look at things from a holistic point of view.

In 2016, I started working in the penitentiary of Zwolle as a nurse practitioner at an intensive care unit. In 2018 I got the chance to start the training for social psychiatric nurse within the PI Zwolle, since then I am also working as social psychiatric nurse. In my job as a social psychiatric nurse I give a training related to a healthy lifestyle, previously Healt4you but because this training was outdated, I renewed it together with a colleague to 'Healthier Living'. This training is now more up-to-date and suitable for all target groups within PI Zwolle. My knowledge of both medicine and psychiatry enables me to look at my patient's health in a broad sense.



Dr. Jesse MEIJERS

Is senior researcher and neuropsychologist (GZ-psycholoog) at the prison facility in Zaanstad, the Netherlands. In addition, he is an assistant professor in forensic psychiatry and psychology at the Willem Pompe Institute for Criminal Law and Criminology, Utrecht University. His research focuses on forensic neuropsychology. More specifically, he is interested in the subject of prison and the brain, such as the influence of imprisonment on brain functions, and the prevalence and treatment of prisoners with neuropathology.



Ruth GRAY

BDS, MDPH, MJDF (RCSEng), Msc

Ruth is Clinical Lead for Prison Dentistry in N. Ireland, and Clinical Lead in Quality Improvement for SEHSCT. She has the responsibility of quality improvement and innovation in the prison healthcare in the region. She leads the Health Development and Health Engagement work in the Healthcare in Prison Team taking a population approach to health and wellbeing and leading the development of a peer mentor network. She is a specialist in Special Care Dentistry, and has a focused interest in oral care issues related to substance misuse, homelessness and prison health.

Ruth lectures in Public Health for Queen's University School of Dentistry and is involved in health and social care research. Previous research has involved Evaluation of the Mass COVID Vaccination Centre in Belfast, The Impact of QI Training Transfer, the use of Pharmacy Independent Prescribers in the Prison Committal Pathway and the Impact of COVID Isolation on the Prison Population. Ruth sits on the exec committee of the National Association of Prison Dentistry the European Federation of Prison Health and WHO HIPP. She is a member of the Q Community.



Ergys SHEHU

In 2009, I completed my studies in law. In 2010, I started my master's studies in international criminal law, and I started working as an assistant lawyer until 2012. From January 2013 to November 2017, I was a General Inspector at the Internal Control Service in the Ministry of the Interior, among the main tasks what I had was the criminal investigation and the administrative investigation for all structures of the State Police.

In November 2017, I began my master's degree in property law and completed the exam of the Albanian Bar Association and received the title of Lawyer.

In 2021, I began working as a Specialist in the Analysis and Management Sector at the Internal Control Service in the System of Prisons in the Ministry of Justice. In 2022, I was appointed Head of the Analysis and Management Sector, and my functional duties include controlling the activity of investigators near each prison, both in terms of organization, verification of the work for receiving intelligence and in terms of procedural actions and referral to the prosecutor's



Morgane PIAZZA

I am currently working as a clinical psychologist at the Health Unit of the Villeneuve-lès-Maguelone Prison. I mainly deal with people with addictive issues in line with my specialization in this field. In 2018, I created a therapeutic discussion group with the multidisciplinary team, to offer a new care protocol to this public. I recently became a trainer and wish to export this therapeutic group to other Health Units since the experience has shown us the interest of this type of support. I originally graduated with a Master's degree in clinical psychology and then specialized in criminology and victimology. My professional career started in a Children's Home, then moved to a CRIAVS and continued in a Health Unit.



Filipa ALVES DA COSTA

PhD, Technical Lead for Health In Prisons Programme Alcohol, Illicit Drugs and Prison Health WHO European Office for Prevention and Control of Noncommunicable Diseases (NCD Office)



Dr. Lyu AZBEL

Is a public health sociologist exploring how medical interventions translate into new settings. They use qualitative methods to unpack the social relations of treatment where drug use and infectious diseases intersect, especially among queer people and people in prison. Their work tackles some of the most stubborn impasses to implementing harm reduction interventions in Latin America, South Asia, and Eastern Europe and Central Asia by generating a space where new forms of treatment are possible.



Roberto MONARCA

Born in Viterbo, Italy in 1958,. Married and with 3 childrens, he is an infection diseases specialist with a career mostly dedicated to the improvement of the health of people in prison. For many years specialist and Head of the Health Unit of a Maximum Security Prison in Italy, he has a very long experience in the Prison Health sector. Currently Scientific Director and Past-President of HWB (the EU Federation for Prison Health) he has been member of the expert panel on infectious diseases in detention environments of ECDC, Project Leader for HWB and SIMSPe (Italian Association for Health in Prison) for several European Projects and expert for the Italian Ministry of Justice and responsible for transnational research in the EU Project MEDICS.

He's member of the steering group of WEPHREN and in the WHO HIPP and responsible for the Italian Society of Tropical and Infectious Diseases (SIMIT) for the working group on Infections in Prison. He has been recently appointed as Head of the Territorial Department of Infectious Diseases in Viterbo's province.



Dr Elena LECLERC

Is the coordinator of Health Care in Detention Programme at the International Committee of the Red Cross (ICRC) in Geneva, and responsible for the implementation of the Programme in over 60 countries around the world.

Dr Leclerc joined the ICRC in 1998 and has since worked in Azerbaijan, Afghanistan, Rwanda, Haiti, Democratic Republic of the Congo, Israel and the occupied Palestinian territory, Cambodia, Thailand and at the ICRC's headquarters in Switzerland. She has authored and contributed to the development of various ICRC and external publications. Since 2013, Dr Leclerc has been co-organizing and lecturing for several postgraduate courses in Health Care in Detention in Switzerland, France and Thailand.

Dr Leclerc is a medical doctor. She holds a postgraduate degree in infectious diseases and tropical medicine from The London School of Hygiene & Tropical Medicine, and Master of Advanced Studies in Humanitarian Leadership from the University of Lucerne.



Marie-Claire VAN HOUT

PhD, LLM, MPH is Professor of International Public Health Policy and Practice at Liverpool John Moores University, United Kingdom. She is dual qualified in Public Health and in Human Rights Law. She works mainly in Africa and the Middle East, and regularly consults for the United Nations Office on Drugs and Crime and the Council of Europe Pompidou Group as evaluation and substantive expert on their HIV, drug treatment and prison health programmes.



Bastien GUILLERMIN, Association AGATA

Starting my career as a specialized educator / social worker in the early 2000's first with people concerned by serious mental pathologies. Then, in 2006, I joined a Harm Reduction Center in the North of Paris (EGO), embracing the concept of Community Health and the Harm Reduction philosophy. I worked there mainly with wandering drug users, particularly crack users.

Since 2014, I have been responsible for an addictology Service (CSAPA APORIA) in the prison of Nanterre, near Paris. This Service is composed of Doctors, councilors, psychotherapists, social workers. We work with all aspects of addiction, from prevention to care.



Aurélie MIEUSET

Is a general practitioner in the prison health unit of the Montpellier University Hospital. She holds a DU in tobacco and addictology. Since July 2016, she has been committed to providing quality care to prisoners, particularly in terms of prevention and screening. She is also responsible for the «month without tobacco» campaign within the prison of Villeneuve Lès Maguelone and for all screening programs among prisoners. The work presented «Modifications linked to the first lockdown of psychoactive substance use among prisoners in the Villeneuve Les Maguelone prison» was carried out in co-working with Dr Ballester, a general practitioner and addictologist in the prison health unit of the Montpellier University Hospital.



Lara TAVOSCHI

Holds a MSc in Medical Biotechnology (University of Padua), a PhD in Molecular pathogenesis, immunology and control of pathogens that cause Poverty-Associated diseases (University of Perugia) and MSc in Public Health (London School of Hygiene and Tropical Medicine). During 2004-2013 she worked for the Italian National Institute of Health on translational research with a focus on HIV and other STIs, being based in South Africa for more than 5 years. In 2013-2018 she served in the scientific advice section of the ECDC, focussing on HIV, viral hepatitis and people in prison. Since 2018 she is senior researcher in public health at University of Pisa. Her current areas of research are prevention and control of communicable diseases, including viral hepatitis and STIs with a focus on people in prison and other vulnerable groups.



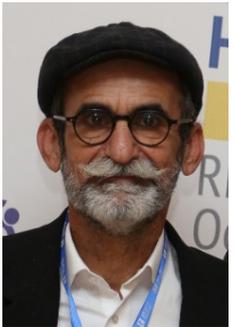
Sara MAZZILLI

I am a Ph.D. student in Data science. The focus of my research is health inequalities, and in particular the impact of the COVID-19 pandemic on vulnerable populations. From November 2021, I am at the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA - Lisbon, Portugal) as a visiting researcher in the Public Health Unit working on prison health and hepatitis elimination in prison.»



Rui TATO MARINHO

Head of Department of Gastroenterology and Hepatology (Hospital Center of North Lisbon). Professor of Medical School of Lisbon. Director of National Program for Viral Hepatitis at Directorate General of Health.



Dr Fadi MEROUEH

A hospital doctor at the University Hospital of Montpellier and Head of a prison healthcare unit for the past 25 years, I am a passionate advocate of a global approach to equal access to care for those in prison.

I have been President of HWB (Health Without Barriers) for the past 4 years, Vice-President of MENAHRA (Middle East and North Africa Harm Reduction Association) and of the FFA (French Federation of Addictology) as well as an expert for various French, European and International institutions, organizations.

We have successfully eliminated Hepatitis C in the prison where I work through the strict application of a comprehensive harm reduction policy.



Mariana FRAGA DE ABREU

32 years old, is a medical doctor who graduated in 2014 from Palacky University of Olomouc, Czech Republic, and became a Public Health Specialist in 2020 after a 4-year medical internship in the Public Health Unit of Braga, Portugal. She works in the Clinical Services of Oporto Central Prison since 2019 as a general practitioner and in the Public Health Unit of Chaves as a Public Health Specialist since 2020. She began her journey in prison health in 2017, during her Public Health Medical Specialization, in which she developed an investigation entitled “Barriers to Tuberculosis Detection in Portuguese Prisons”, which was presented in the International Conference of Tuberculosis 2019, in Venice, which received the award of best oral communication. In 2021-2022 Dr. Mariana Abreu was an element of the COVID-19 pandemic response team of Oporto Central Prison.



Rui MANUEL C. C. RAMOS MORGADO

63 years old, is medical doctor since 1984 and a Family Medicine Assistant Consultant. Is the clinical coordinator of the Clinical Services of Oporto Central Prison since 1987, the year in which he began working in Prison Health. He also medical coordinator of several Portuguese prisons on behalf of General-Directorate for Reintegration and Prison Services (DGRSP)

As representant of DGRSP, is also a member of the Steering Group of the Health in Prisons Project (HIPP) of WHO Europe, under which collaborated in several WHO and ECDC publications. Over the course of his professional career Dr. Rui Morgado has published several articles in the area of Prison Health, both national and internationally. In 2021-2022 he coordinated the COVID-19 pandemic respond throughout all North and Central Portuguese prisons.



Alicia ROSELLÓ

Is an international public health specialist working at the UK Health Security Agency in the Vulnerable People and Inclusion Health Division. She is also part of the WEPHREN leadership and secretariat. Previous to this, Alicia was a research fellow at the London School of Hygiene & Tropical Medicine and a member of the Social Care Working Group where her mathematical models were influential in the testing policies against COVID-19 in care homes in England. Alicia obtained her PhD from UCL where she worked on the epidemiology of antimicrobial resistance in care homes. Alicia has also worked on forecasting Ebola outbreaks and herpes zoster vaccination cost-effectiveness.



Yanina STEMKOVSKAYA

Is representative in Ukraine of the NGO UnMode – Community Movement for Access Justice, a network of human rights defenders from communities of drug users with experience of incarceration in Eastern Europe. Yana is also regional representative in Poltava region, Ukraine of the All-Ukrainian Association of People with Drug Addiction foundation “VOLNA”. Yana was sentenced to prison for drug use. Since her release, she has been defending the rights of prisoners and people who use drugs. Since 2019, she documents violations of rights and provides paralegal aid to prisoners who use drugs in Ukrainian prisons with the Prison Health & Rights Consortium, a consortium gathering lawyers, former prisoners and community activists and prison doctors from the NGOs UnMode, the European Prison Litigation Network, Harm Reduction International and Health without Barriers. Under war conditions, Yanina is one of the few human rights activists who maintained her connection with prisoners in Ukrainian prisons, especially in the occupied territories, and provided humanitarian aid.



Cinzia BRENTARI

Is Senior Advisor at Harm Reduction International. Cinzia holds a degree in law and criminology. She has developed specific expertise on European policies, advocacy and networking on harm reduction in the criminal justice system. Within this sector she has coordinated research, organised events, trainings and capacity building initiatives, thus bridging expertise between civil society and the institutional sector.



Hans WOLFF

Is the head of the Division of Prison Health and president of the Clinical Ethics Committee Ethics at the Geneva University Hospitals and Professor of Medicine at the Geneva University. He is President of the Conference of Swiss Prison Doctors (CSPD) and vice-president of the Council of Europe's Committee for the Prevention of Torture (CPT). Hans Wolff studied medicine at the University of Marburg, Germany and the University of Geneva, Switzerland and specialized in General Internal Medicine (MD) and Public Health (MPH). 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 use, preventive measures and risk reduction, as well as infectious diseases or mental health in detention. He is editor of more than 100 scientific publications and edited 3 textbooks related to prison health and equity and health care for vulnerable populations. (*Orcid: <https://orcid.org/0000-0002-4978-2176>*).

President of the European Committee for the Prevention of Torture and Degrading Treatment or Punishment (CPT) began his career as a medical doctor working in prisons in 1996 and since 2010 has been engaged as a General Medical Practitioner at Dungavel House Immigration Removal Centre in Scotland, United Kingdom. Formerly, Alan was Medical Adviser and Head of Healthcare at the Scottish Prison Service, while most recently, from 2015-2021, he was Chair of the Independent Prison Monitoring Advisory Group in Scotland.

In his day-to-day clinical work with immigration detainees, Alan has frequent recourse to the use of interpretation services, and this is one aspect of engaging with patients in such a context that he will explore further during his presentation.

Engaged as an ad-hoc expert with the CPT in 2002, Alan was elected Member of the Committee in respect of the United Kingdom in 2017 and President in 2021. In his address Alan will highlight key recurring findings of the Committee during its recent visits to immigration detention facilities in Council of Europe member states, and the key role that healthcare staff have in the prevention of ill-treatment.»



Marcela JOFRÉ

Is the Project Assistant for the Human Rights and Justice Team at Harm Reduction International (HRI). Marcela is a criminal lawyer with over four years of experience in criminal and strategic litigation in Chile. Prior to joining HRI, she sat on the Board of Directors of LEASUR NGO, a Chilean organisation that campaigns for rights of people in prison and fights to end the carceral system as a way to solve social problems. From 2014-2018, Marcela worked as a legal adviser and human rights representative at the Ministry of Home Affairs in Chile.

Marcela is deeply involved in racial capitalism struggles, abolitionism theories and the anti-carceral movement. Marcela holds an MSc in Human Rights and Politics from the London School of Economics and Political Science.



Thomas SEYLER

Is scientific analyst at the public health unit of the European Monitoring Centre for Drugs and Drug Addiction. He worked as infectious diseases field epidemiologist in Europe, Africa and Asia.



Alexis GOOSDEEL

(Belgium) took up the post of EMCDDA Director on 1 January 2016, having been formally appointed to the position by the agency's Management Board in October 2015 for a five-year term (1). Speaking on his appointment, Mr Goosdeel said: 'It is with great enthusiasm and motivation that I take up the post of EMCDDA Director, as the agency enters its third decade. I sincerely believe that the EMCDDA has an exciting future ahead of it; a future in which it will continue to build on its strengths and transform and re-invent itself within the boundaries of its remit.'

He added: 'During its first 20 years, the agency witnessed great changes in the drug phenomenon but also in the priorities of decision-makers and their information needs. In tune with these developments, and to remain policy-relevant and useful to its stakeholders, the agency will move progressively from an information-centred model to a service-oriented model, providing tailored analysis to its customers'.

Mr Goosdeel joined the EMCDDA in 1999 as a project manager working 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).

Mr Goosdeel has spent much of his 30-year career working in the field of public health at national, European and international level. He was one of the founders of Modus Vivendi, a Belgian NGO working in the area of harm reduction. Before joining the agency, he directed Alizés, a Brussels-based, European association working for development and cooperation in public health (1992–99).

The EMCDDA Management Board took the unanimous decision on 25 June 2020 to renew Mr Goosdeel's mandate, for the next five years. He will now hold the position until 31 December 2025. Reacting to the decision, Mr Goosdeel said: 'It is an honour and a privilege to be reappointed today to take the EMCDDA forward on an ambitious course of travel to 2025. The agency has an exciting future ahead of it and is ready to innovate and re-invent itself as required within the boundaries of its remit.'

Mr Goosdeel 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.



Jens MODVIG

Is a Medical Doctor and holds a PhD in public health. He has used his medical background in the fight against torture for more than 25 years, currently as Medical Director of DIGNITY – Danish Institute Against Torture. In this capacity, he has been a part of the Danish NPM since 2009 and undertaken a large amount of prison visits. In October 2013, he was elected as a member, and in April 2016 as the Chair, of the United Nations Committee against Torture. In March 2021, he was appointed Head of the International Accountability Platform for Belarus (IAPB).



Michel WESTRA (1962)

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.



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.¹ 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 States².

Health-care staff who work in prisons play a crucial role in the optimization of the health and wellbeing of prisoners. They have a duty to provide prisoners with physical and mental health protection and treatment of disease with the same quality and standards that are afforded to patients who are not imprisoned or detained.³ 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.⁴

However, health-care personnel in prisons are at risk of falling prey to dual loyalties. 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)⁵. 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 judgements, 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.

¹ WHO/Europe (2013). Good governance of prison health in the 21st century. A policy brief on the organization of prison health (http://www.euro.who.int/_data/assets/pdf_file/0017/231506/Good-governance-for-prison-health-in-the-21st-century.pdf?ua=1).

² CESCR General Comment No. 14: The Right to the Highest Attainable Standard of Health (Art. 12). Adopted at the Twenty-second Session of the Committee on Economic, Social and Cultural Rights, on 11 August 2000 (Contained in Document E/C.12/2000/4). See para. 43 (a) (<http://www.ohchr.org/Documents/Issues/Women/WRGS/Health/GC14.pdf> , or <http://www.un.org/documents/ecosoc/docs/2001/e2001-22.pdf>).

³ Principles of Medical Ethics relevant to the role of health personnel, particularly physicians, in the protection of prisoners and detainees against torture, and other cruel, inhuman or degrading treatment or punishment. United Nations General Assembly Resolution 37/194. New York, United Nations, 1982 (<http://www.un.org/documents/ga/res/37/a37r194.htm>).

⁴ European Court of Human Rights (2015). Thematic Report Health-related issues in the case-law of the European Court of Human Rights. Chapter IV. Health of Detainees. A. Introduction (pp. 13). (http://www.echr.coe.int/Documents/Research_report_health.pdf).

⁵ The Oath of Athens. International Council of Prison Medical Services, 1979 (http://www.medekspert.az/en/chapter1/resources/The_Oath_of_Athens.pdf); see also:

The Oath of Athens. International Council of Prison Medical Services, 1979. In: Revision of the United Nations Standard Minimum Rules for the Treatment of Prisoners. Open Ended Intergovernmental Expert Group on the Standard Minimum Rules for the Treatment of Prisoners. UNODC/CCPCJ/EG.6/2014/INF/2. See: Footnote 26, p. 11 (http://www.unodc.org/documents/justice-and-prison-reform/EGM-Uploads/IEGM_Brazil_Jan_2014/IACHR_English.pdf).

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

1. *State responsibility*: Health care for people deprived of liberty must be free of charge for all detained persons.
2. *Access to care*: All people in prisons should have free and timely access to needs-based medical care at all times.
3. *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 comparable to those experienced by patients in the free-world community, according to their 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.⁹
4. *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. *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.¹⁰
6. *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 illness, or prisoners with complex health conditions that hamper their rehabilitation
7. *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. *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 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. Health-care staff should also be properly trained in human rights and medical ethics.

Health Without Barriers HWB. Human rights working group: Co-Chairs: Prof. Hans Wolff, Switzerland, Stefan Enggist, Switzerland. Members: Prof Robert Greifinger, USA, Dr Fadi Meroueh, France, Dr Roberto Monarca, Italy, Prof Jörg Pont, Austria, Dr Fabio Sternberg, Spain, Prof Heino Stöver, Germany, Prof Brie Williams, USA

⁶ Recommendation Rec(2006)2 of the Committee of Ministers to member states on the European Prison Rules. Strasbourg, Council of Europe, Committee of Ministers, 2006 (https://search.coe.int/cm/Pages/result_details.aspx?ObjectID=09000016805d8d25)

⁷ CPT Standards. European Committee for the Prevention of Torture and Inhuman or Degrading Treatment of Punishment (CPT). Strasbourg, Council of Europe, 2015 (CPT/Inf/E (2002) 1 - Rev. 2015.) (<http://www.cpt.coe.int/en/documents/eng-standards.pdf>)

⁸ United Nations Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules). United Nations General Assembly Resolution A/RES/70/175, New York, 17. December 2015 (http://www.un.org/en/ga/search/view_doc.asp?symbol=A/RES/70/175)

⁹ Recommendation CM/Rec(2012)12 of the Committee of Ministers to member States concerning foreign prisoners. Strasbourg, Council of Europe, Committee of Ministers, 2012 ([https://wcd.coe.int/ViewDoc.jsp?p=&Ref=CM/Rec\(2012\)12&Language=lanEnglish&Ver=original&Site=CM&BackColorInternet=C3C3C3&BackColorIntranet=EDB021&BackColorLogged=F5D383&direct=true](https://wcd.coe.int/ViewDoc.jsp?p=&Ref=CM/Rec(2012)12&Language=lanEnglish&Ver=original&Site=CM&BackColorInternet=C3C3C3&BackColorIntranet=EDB021&BackColorLogged=F5D383&direct=true))

¹⁰ Cf. footnote 7; Cf. footnote 8 (NMR 34)

Notes :

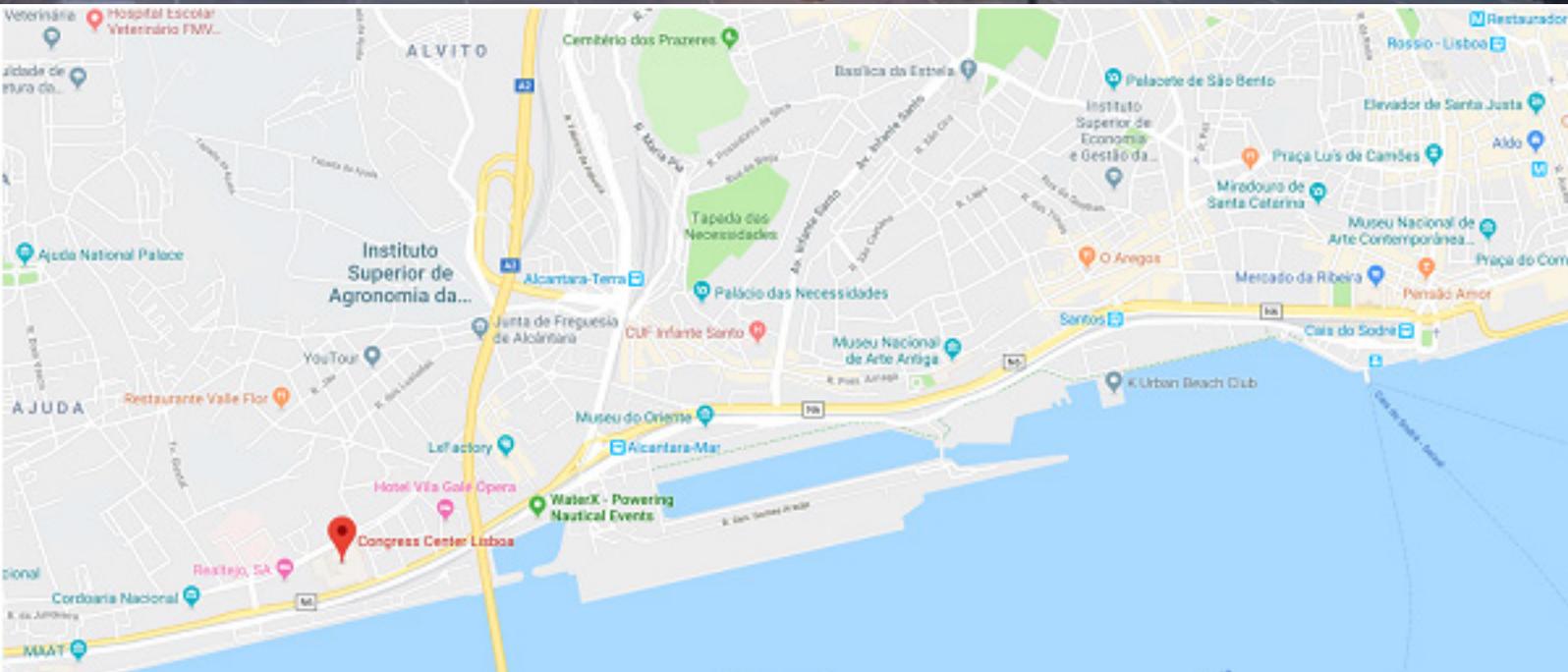
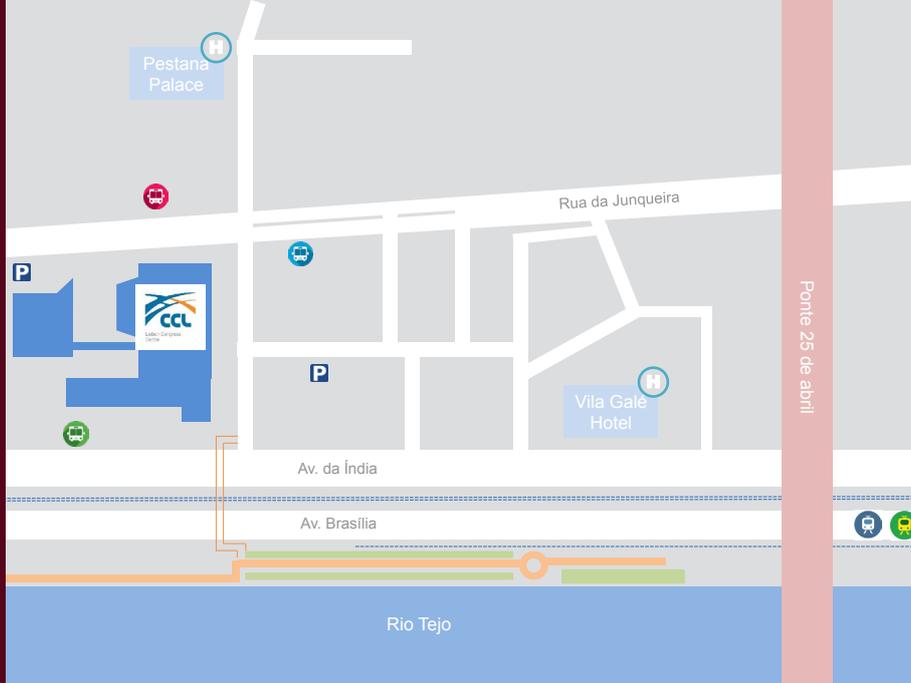
Notes :

With the support of



In partnership with





<https://lisbonvenues.pt/en/lisbon-congress-center/>

