

# Monitoring Drug Use and Drug Related Health problems in Prisons

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# Focus of my presentation: Primary data

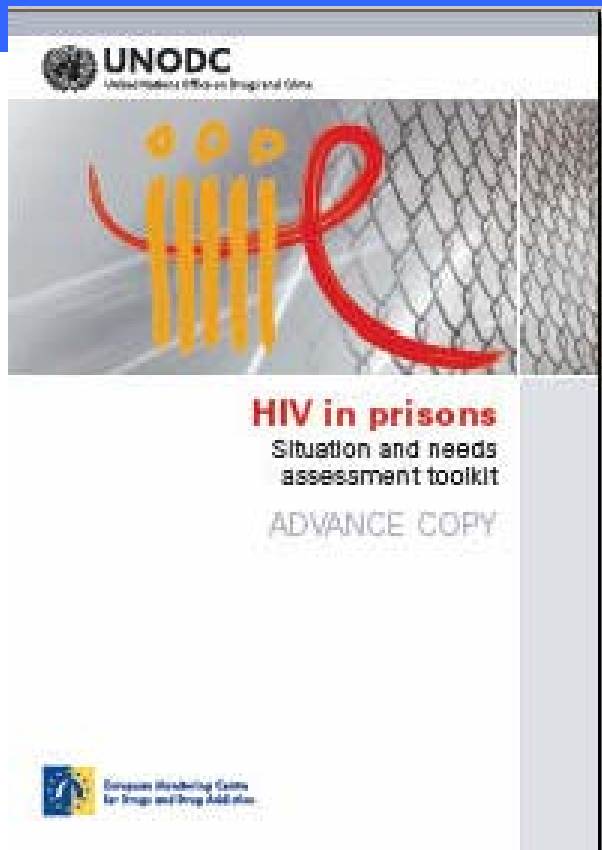
- How to generate **valid, reliable** and **comparable** data on drug use and related health issues in prison
  - Qualitative data (interviews, focus groups)
  - Quantitative data (prison surveys)

# Background

- Experiences of several KABP/HIV surveillance studies carried out in Europe under the EC SANCO funded „ENDIPP“ Network

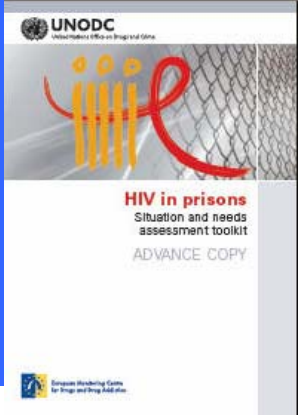


# HIV in prisons: Situation and needs assessment toolkit



*Experiences gained in several prison surveys summarised in this toolkit*

- ✓ Multidisciplinary approach to a stepwise situation and needs assessment in prisons, **focus on HIV**
- ✓ Based on the requirements of international law, standards and ethics, scientific evidence and best practice experience
- ✓ Download English version at the UNODC homepage: publications on HIV and prison settings



# Toolkit: Scope and Purpose

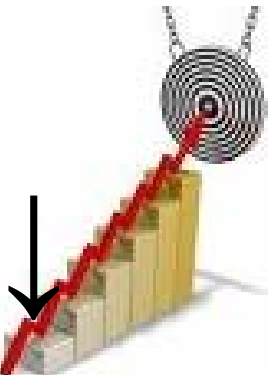
- The UNODC toolkit is intended to guide **national governments** in a needs assessment for the implementation of effective *HIV intervention programmes*, tailored to the risk behaviours and HIV seroprevalence
- It provides **technical assistance for the researcher** to carry out the needs assessment including **surveys ONLY on drug use in prison**.
  - ▶ **These materials and tools can be easily adapted or directly applied by principal investigators to survey drug use and related risk behaviour in prison settings**
  - ▶ **Components can also be used for rapid assessment approach**

# Principles, standards and ethics



- Meet human rights principles and minimum rules for prisoners (i.e. impartiality, non-discrimination and respect for religious beliefs and moral precepts)
- Voluntary participation, anonymity and confidentiality of self reported information
- Services based upon the assessed needs of prisoners
- Preventive interventions based on the specific risk behaviours in individual prisons
- Allowing prisoners to take responsibility for planning their treatment and care
- Information and education provided to prisoners should aim for realistically achievable changes in attitudes and risk behaviours while incarcerated and after release

# 10 Step multidisciplinary approach of a situation assessment (1/4)

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- ✓ **Step 1:** *Select a qualified team and provide training*
    - ✓ *Tool: Selection criteria for PI, confidentiality agreements for assessment team members*
  - ✓ **Step 2:** *Develop a protocol, budget and workplan*
    - ✓ *Tool: template of cost plan, cornerstones for protocol*
  - ✓ **Step 3:** *Obtain ethics committee approval*
  - ✓ **Step 4:** *Train the assessment team and collect and analyse available information (secondary data)*

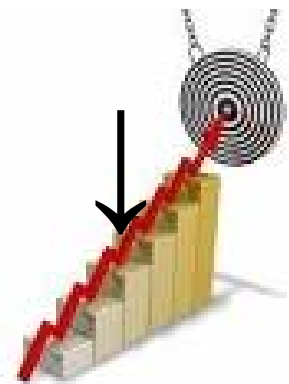
# 10 Step multidisciplinary approach of a situation assessment (2/4)

- ✓ **Step 5:** *Collect and analyse the national framework and prison conditions (primary and secondary data)*

- ✓ *Tool: Checklist for analysis of framework and prison conditions, interviews with key persons*

- ✓ **Step 6:** *Interview prison staff and prisoners (primary qualitative data)*

- ✓ *Tool: Informed consent forms*

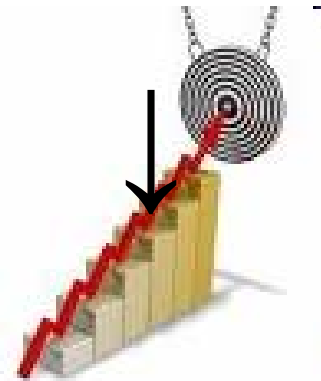




# 10 Step multidisciplinary approach of a situation assessment (3/4)

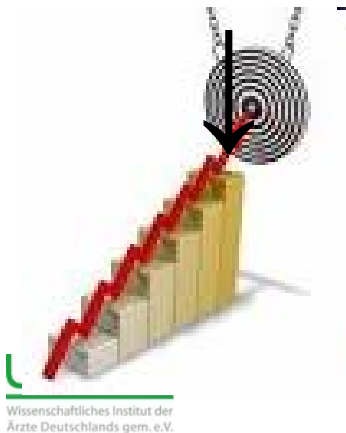
## ✓ Step 7: Survey prison risk behaviour and HIV prevalence (primary quantitative data)

- Cross-sectional voluntary anonymous survey of risk-behaviour among **prisoners** (and related communicable disease)
- Cross-sectional voluntary anonymous survey on HIV and related risk-behaviour among **prison staff**
  - *Tools: Templates for questionnaires, sampling methodology, testing methodology etc.*



# 10 Step multidisciplinary approach of a situation assessment (4/4)

- ✓ **Step 8:** Analyse and interpret data
- ✓ **Step 9:** Prepare, publish and disseminate report
- ✓ **Step 10:** Focus interventions



# Step 4: Collect and analyse available information

(secondary data only)



- Determine, what is available from secondary sources, identified **gaps** become source of primary data collection
- Review of existing studies and data sources in the country, desk assessment of risk behaviours based on available information, mapping of where the risk is and who is at risk, and formative qualitative work to identify opportunities, barriers, and appropriate approaches to promote behaviour change
- Discuss validity and reliability of data and information



# Step 5: Analyse the national framework and prison conditions

(primary and secondary data)

- National legal and policy framework (can be applied to individual prisons or regions)
- The prison system, population and living conditions
- Health services, personnel and prevention
- Data collection components:
  - Desk top analysis (legal and policy framework)
  - **Key informant interviews** (living conditions, food/nutrition, hygienic conditions, sanitation, access to care, risk behaviours such as violence and drug use in prisons)
  - **Prison inspections**, including interviews with key prison staff and prisoners
  - **Focus group discussions** (providing insight on prison realities and explaining attitudes and behaviour at several levels)

*Tool: comprehensive **checklist** is attached in annex to the toolkit*



# Examples of checklist items

- ☑ Do prisons have health care quality assurance programmes? Describe.
- ☑ Do prisons have a health surveillance system? Describe.
- ☑ What provisions are made for continuity of care and medication on transition between community and prison and vice versa?
- ☑ What preventive services are available and how are they accessible?
- ☑ Is opioid substitution treatment available? Which prisoners are eligible for treatment?

# Step 6: Interview staff and prisoners



- Intermediate step between desk-top analysis and the implementation of a prison survey
- Qualitative interviews with prison staff and/or prisoners and/or focus group discussions to complement or further validate available information

# Aim of qualitative data collection

- Generate descriptive data
  - Pre-test questionnaires
  - Identify possible problems/risks which were not envisioned by the investigators
  - Monitor effectiveness of programmes in operation
  - Provide explanations of attitudes and behaviour
  - Generate hypotheses for quantitative collection
- ▶ *Provide explanations of attitudes and behaviours rather than quantifying their extent in the population*

# Step 7: Survey prison risk behaviour

(most comprehensive chapter of toolkit)

- Cross-sectional voluntary anonymous survey on drug use, communicable diseases and other related risk-behaviour among **prisoners**
- **AND prison staff**



# Detailed description of methodology for survey on risk behaviour and infections prevalence

- Assessment of
  - ✓ Knowledge of transmission risks and means of prevention
  - ✓ Attitudes towards drug use, sexual behaviour and prevention strategies
  - ✓ Attitudes towards other prisoners' and personal health behaviours
  - ✓ Practices of prisoners and prison staff regarding communicable disease and the means of prevention



# Survey implementation is described step by step

- ✓ **Field preparation**
- ✓ **Questionnaire template**
- ✓ **Pretesting**
- ✓ **Sampling of settings and survey participants/sample size calculations**
- ✓ **Inclusion/exclusion criteria**
- ✓ **Recruitment of prisoners**
- ✓ **Approaches for specific subgroups of prisoners (e.g. migrants)**
- ✓ **Data collection and organisation**
- ✓ **HIV testing methodology (rapid tests vs. Enzyme Immunoassays)**
- ✓ **Services provided to prisoners during the survey including VCT**
- ✓ **Keeping data anonymous**

# Leading principles of all approaches

- **Voluntary participation (informed consent!)**
- **Confidentiality**
- **Anonymity**

# Self administered questionnaire

- Penal information
- Risk behaviour before and during incarceration (drug use, injecting behaviour, sexual behaviour, violence, tattooing, etc.)
- Knowledge and attitudes towards communicable diseases
- Self-reported status (HIV, TB and hepatitis);
- Access to information and means of prevention
- Access to and quality of health care



# Crucial points for questionnaire development

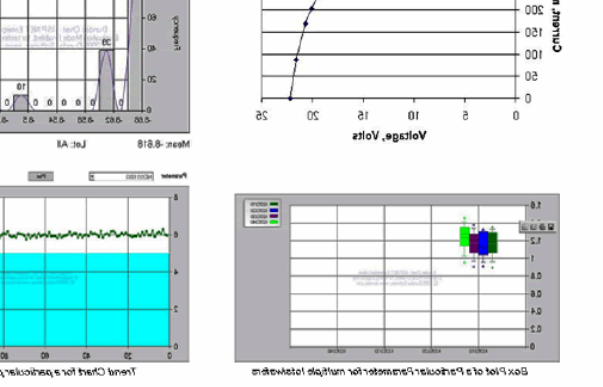
- Templates include CORE questions, which might be amended by further specific Q
- Keep Q **easy** and **simple**
- Do not ask too many details on sensitive topics
- Only ask for self reported prevalence if anonymous testing is part of the survey
- Very important Q: „The **FIRST** time you ever injected Drugs, was that inside prison?“

# Voluntary anonymous survey on drugs, communicable diseases and related risk-behaviour among prison staff



- Examine staff's knowledge, attitudes and behaviour regarding drug use, people who use drugs, communicable disease, people living with HIV and/or hepatitis, and Harm Reduction measures

# Step 8: Analyse and interpret data and information



- ✓ Identify groups or populations at risk (resp. infected) and describe their key characteristics
- ✓ Understand the trends of risk behaviours and the impact on the prison system
- ✓ Identify populations at risk of acquiring or transmitting communicable diseases and identify prevention needs
- ✓ Determine the characteristics of persons engaged in high-risk behaviours
- ✓ Determine the indicators of risk in the prison population
- ✓ Identify trends over time



## Step 9: Prepare Final Report

- *Tool:* Proposed contents of the report
- Recommendations for action, based on the findings incl. required changes in prison policy, allocation of resources and targeted interventions for staff and inmates
- Dissemination strategy





# Step 10: Focus interventions

The results of the assessment will allow for tailoring the response to the situation and needs

## Setting related and/or interventions involving individuals

- ✓ Information and education to prisoners and prison staff
- ✓ Addressing stigma and discrimination
- ✓ Voluntary HIV counseling and testing (VCT)
- ✓ Providing condoms and preventing rape, sexual violence and coercion
- ✓ Providing needle and syringe programmes and bleach or other disinfectants
- ✓ Drug dependence treatments
- ✓ Universal precautions
- ✓ Post-exposure prophylaxis (PEP)
- ✓ Providing antiretroviral therapy and other treatment for prisoners with HIV or AIDS
- ✓ Prevention of mother to child transmission
- ✓ Prevention and treatment for Hepatitis B and C
- ✓ Collaborative HIV-TB activities
- ✓ Throughcare
- ✓ Other interventions: policy, legal and environmental measures



# Tools/Templates attached to the manual

- ✓ **Confidentiality Agreement for assessment team members**
- ✓ **Excel file for survey budget calculation**
- ✓ **Comprehensive checklist for the analysis of the national framework and the prison conditions**
- ✓ **Sampling methodology, sample size calculation**
- ✓ **Informed consent form for prisoner survey participants**
- ✓ **Standard information for prisoners on KABP/HIV surveillance study**
- ✓ **KABP questionnaire for prisoners**
- ✓ **Standard written information for prison staff on KABP survey**
- ✓ **KABP questionnaire for prison staff**
- ✓ **Informed consent form for focus groups participants**



# Acknowledgements

- Special thanks to Dr Robert Greifinger, who drafted the UNODC toolkit together with me and Fabienne Hariga, who was the guiding spirit of the toolkit
- Experts who participated in an expert group meeting held in Vienna in March 2009: *Lara El Debaghi*, *Wadih Maalouf* (UNODC), *Robin Mc Gowan* (CDC), *Lars Moeller* (WHO-EURO), *Hernan Reyes* (ICRC), *Jörg Pont* (Univ. Wien), *Brian Tkachuk* (UNODC) *Lucas Wiessing* (EMCDDA).

# Announcement

**Throughcare**  
Working in partnership

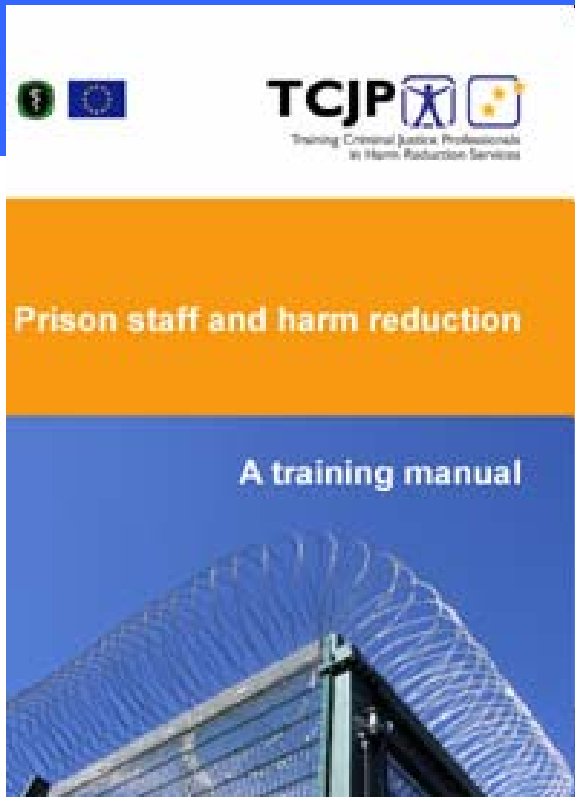
**Health in Prison and Throughcare:  
Provision and continuity of care for those in the criminal Justice System  
Evening of the *5th October to 7 October 2011*  
Abano Terme, Italy**

The main theme of the conference will be throughcare for prisoners.  
This will involve such issues as prisoners with  
problematic drug and/or alcohol use,  
communicable diseases, mental health care and other health issues.

<http://www.throughcare2011.eu/>



# Training material on HR for prison staff



[www-tcjp.eu](http://www-tcjp.eu)

Training manual and materials available for download in 6 languages

Modular training concept with a core module on HR and ten additional modules (infectious diseases, mental health, young people and drug use, women, ethnic minorities, health and safety of staff)



Health Promotion for Young Prisoners

# Health Promotion for Young Prisoners

- Ongoing project
- [www.hpyp.eu](http://www.hpyp.eu)
- Health promotion toolkit to be developed and tested
- Please send any examples of good practice/approaches/materials to [caren.weilandt@wiad.de](mailto:caren.weilandt@wiad.de)

# Thank you for your attention!

