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Training Prison Staff on Issues of Young Prisoners' Health Needs

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Abstract

Young prisoners' health needs represent a matter of constant importance for any prison administration. These are addressed through direct medical services, as well as through other activities of health promotion. If the medical services are provided by trained medical staff, health promotion is usually provided by non-medical staff, such as social workers, psychologists, educators etc. Also, because healthy behaviors are best promoted through social modeling, such activities require the involvement of all prison staff, including non-specialists such as guardians. Thus, for health promotion to be effective it needs to be approached by the whole prison staff, meaning that the medical and non-medical specialists, as well as other prison staff need to have a common understanding of young prisoners health needs and to work as a team. This can be done through prison staff training. The article addresses these issues by summarizing the Romanian country reports of the project "Health Promotion for Young Prisoners" funded by the EU in the framework of the Public Health Program.

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1. Introduction

The paper presents the issues to be addressed by the Romanian prison administration while planning staff training regarding matters of young prisoners' health promotion activities. The current articled summarizes the country reports on Romania of a EU funded project (in the framework of the Public Health Program) called "Health Promotion for Young Prisoners" (HPYP), which started in 2010, finished in 2013 and involved the partnership of institutions from seven European Member States - Bulgaria, Czech Republic, England, Estonia, Germany, Latvia

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and Romania. The project was coordinated in Romania via the Association of Schools of Social Work in Romania (http://www.asswr.ro). The full reports are available online at the project's webpage – http://www.hpyp.eu (Szabo, 2010; Szabo, 2011). The discussions included in the article are also based on the authors' professional experience.

Statistical data from the National Administration of Penitentiaries (ANP, 2009) shows that young prisoners represented 20% of the total prison population in 2010. According to the same data, 61% were aged between 21-24 years, 31% between 18-21 years and 8% between 14-18 years. Until 2008, the population of young prisoners registered a decreasing trend, similar to that of the adult prison population. A mild increase was registered after 2008. Most of the criminal offences committed by youth in Romania consist in theft and robbery. Drug use in prisons is also common among youth. In 2008, according to the National Anti-drug Agency (ANA, 2009), about 29% of the prisoners declaring to have a drug use history were aged up to 24 years. According to the 2009 HIV, HBV and HCV Behavioral Surveillance Survey among injecting drug users (IDUs) in Bucharest implemented under the coordination of the UNODC (2010), 56% of the IDUs (aged between 18-24 years, ex-prisoners and with a drug use history) declared they injected themselves while in prison. According to the 2009 HIV, HBV and HCV Behavioral Surveillance Survey among prisoners in Romania implemented under the coordination of the Romanian Angel Appeal Foundation (RAA, 2010), data on the age group 18-24 years shows that 9% used cocaine; 6% injected with substances; 4% received / had access to free of charge sterile needles / syringes; 49% got tattooed in prison; 22% used condom during their last intercourse; 47% received / had free access to condoms; 53% attended sessions on HIV/AIDS; 33% were tested for HIV in their lifetime.

Medical care in prison is provided by the prison medical network, which included in 2010 40 primary care offices, 45 dental and other specialty care offices, 10 dental labs, 40 pharmacies and 6 prison-hospitals. The main persistent problem of the Romanian prison medical network is the high deficit of medical staff (ANP, 2009, 28). ANP's strategic objectives on medical care include ensuring needed resources, developing programs for the prevention of diseases, education of prisoners and health promotion, and increasing efficiency in the cooperation with the public medical sector. The main areas on which prison medical programs focus are HIV prevention, harm reduction among IDUs, tuberculosis control and mental health. ANP cooperates with different international organisms and with national public institutions and non-governmental organizations in order to improve and promote medical care in the prison setting.

The HPYP project aimed at developing and improving health promotion for young vulnerable people in the prison setting, aged between 14 and 24 years. It specifically aimed at the subsequent implementation of a health promotion educational toolkit for young prisoners to be used by prison staff across European Member States. The toolkit is intended to be used by different categories of prison staff and addresses health related factors regarding infectious diseases, sexual health, mental health as well as the prevention and treatment of drug use. The toolkit is the result of a research oriented process that includes a needs assessment among young prisoners and prison staff, as well as a piloting stage.

2. Methodology of the research

The general framework of the research takes the form of a needs assessment of vulnerable young people in prison, as well as of prison staff and representatives from NGOs as possible deliverers of health promotion in the prison setting. It uses a common methodology for data gathering and analysis in all the partner countries, with some specific elements depending on the characteristics of the populations included in the samples and the types of detention units were data were collected. Based on the results produced by each of the seven countries, a toolkit for health promotion was developed for the use of prison staff together with young prisoners.

By health promotion we mean any activities, programs and initiatives aiming to raise awareness and to develop skills in preventing and promoting physical, emotional, mental and social health of individuals and groups in custody. This includes a wide range of health promotion aspects that can be addressed in custody, varying from regular sports to informative sessions for young offenders on alcohol, tobacco and drug use, training in right dental/oral hygiene, interventions as regards to mental health needs, self harm and suicide to training on conflict management.

The population under analysis in Romania includes young prisoners aged between 14 and 24 years, on remand or sentenced. The population from which data were collected includes young prisoners aged between 18 and 24 years,

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