



Prevention of the impacts of pandemics measures and the isolation process in prison on mental health and addictions



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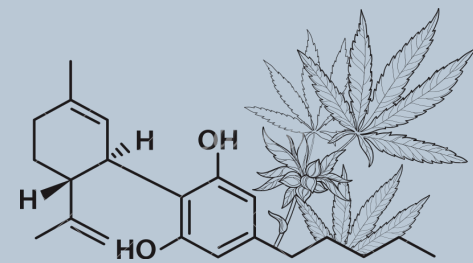
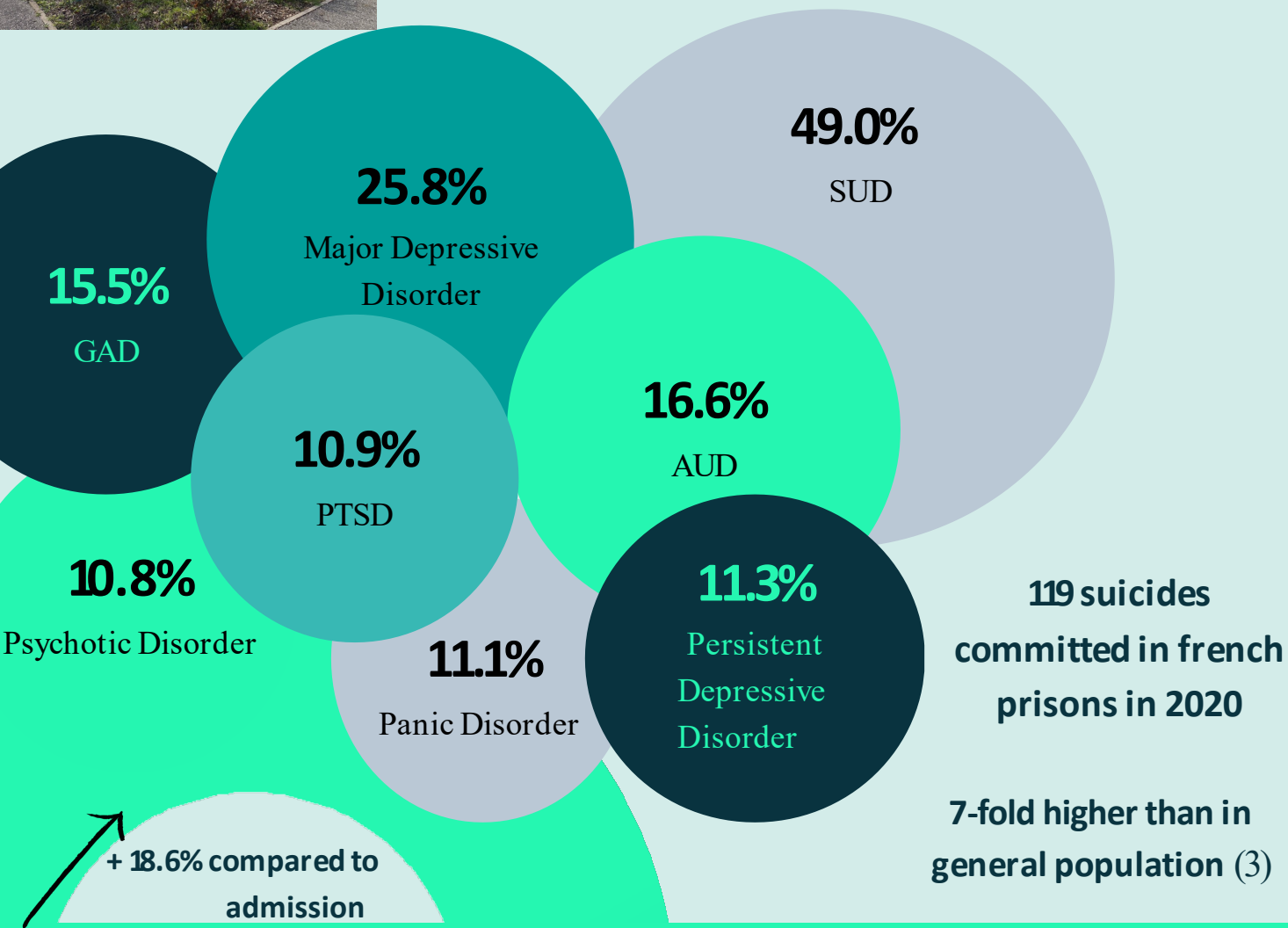
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Background

Europe has gone through several pandemics, including Cholera, Spanish flu and recently SARS-CoV-2, where prisons have been disproportionately affected. Because incarcerated people live in proximity, response measures have included early release of people with low-risk offenses. But for those continuing in detention, drastic health measures have included medical isolation, quarantine or suspension of visits, which had serious consequences for those with mental health disorders (MHD) and substance use disorders (SUD).

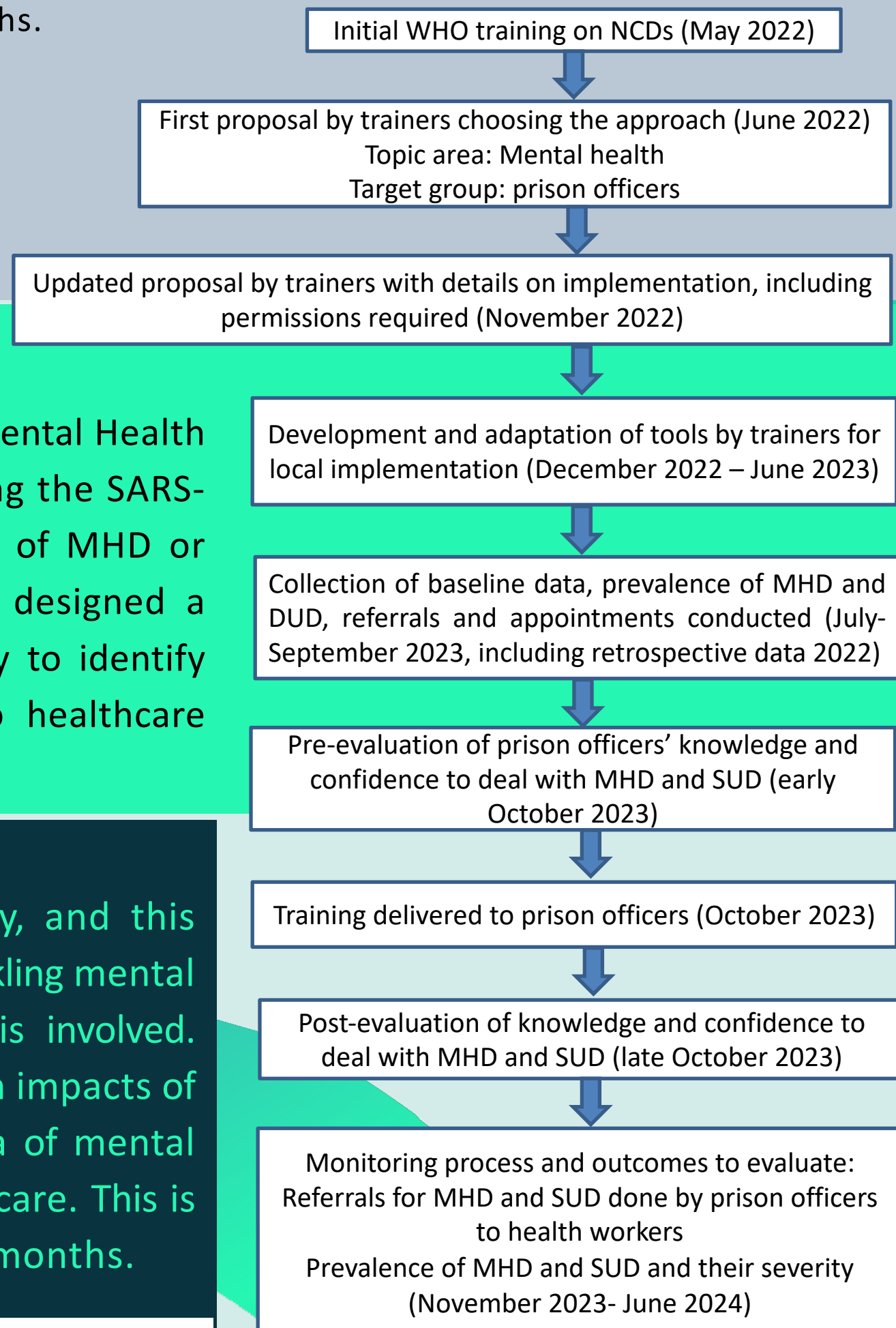


Prevalence on mental health disorders before release- 2020/2022 (1)



Methods

WHO provided training for prison health-care workers aiming to empower and enhance professional development and clinicians working with prisons by implementing WHO recommendations, including WHO Mental Health Gap Action Programme (mhGAP) to ensure efficient implementation and scaling up. The course used a train-the-trainers methodology focusing on skill development, including obtaining a mental health history, screening for suicidality, and observing for signs of mental health deterioration, with follow-up ensured over 6 months.



Results

In a study conducted by the Regional Federation for Research in Mental Health and Psychiatry, national data collected in 28 French prisons during the SARS-CoV-2 pandemic showed that during incarceration the burden of MHD or SUD increased from 48.5% to 67.1%. At Nancy prison, we have designed a specific training to equip prison officers with tools and capacity to identify signs and symptoms of MHD and SUD and ensure referral to healthcare providers.

Conclusions

Prisons have a duty to care for all people deprived of liberty, and this includes identifying and treating mental health conditions. Tackling mental health requires a whole prisons approach where all staff is involved. Training prison officers may mitigate the negative mental health impacts of infection control measures, challenging the associated stigma of mental health conditions and facilitating access to appropriate healthcare. This is ongoing work whose benefits can only be assessed after various months.

References

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