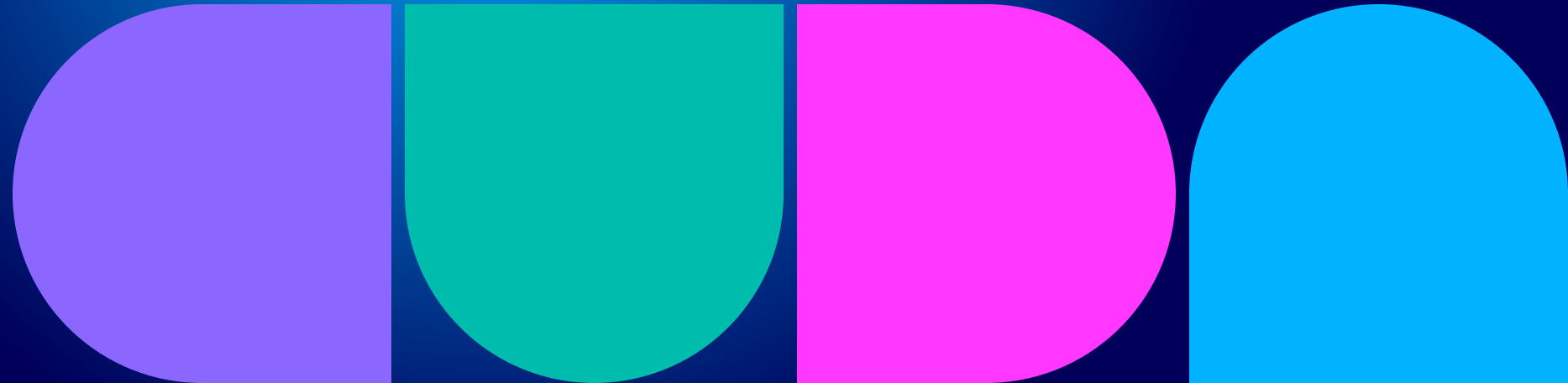


Prison and drugs in Europe:

main challenges and available responses

Linda Montanari, Luis Royuela, Liesbeth Vandam - EUDA

EUOPRIS WEBINAR
17 OCTOBER 2024



European Union Drugs Agency (EUDA)

European Union Drugs Agency – providing Europe with greater capacity to respond effectively to a more complex and rapidly changing drug phenomenon

Supporting EU MS with services:

1. **Anticipating** new and future challenges
2. **Alerting** on emerging risks and drug-related threats
3. **Assessing** needs and available responses
4. **Assisting** stakeholders by evaluating and disseminating new knowledge and best practice.

Reitox network of national drug focal points



European Drug Report 2024: Trends and Developments

https://www.euda.europa.eu/publications/european-drug-report/2024_en



Today, drug-related issues appear almost EVERYWHERE in our society - Almost EVERYTHING with psychoactive potential can be a drug - EVERYONE can be affected, whether directly or indirectly

Main trends/1

- **Supply-related indicators:** availability remains high across nearly all substance types in EU and a **broader range of drugs**.
- Substances often available at **high potency** or **purity** or in **new forms, mixtures** or **combinations** - including novel substances.
- **Growing diversity** in drug forms and routes (e.g. cannabis edibles, vaping).
- People who use drugs at **greater risk of experiencing health problems**, including potentially fatal poisoning, through **consuming**, possibly **unknowingly**, higher-potency or more-novel substances due to limited knowledge.
- **Mental health** – comorbidity.
- **Polydrug use:** use of two or more psychoactive substances, licit or illicit, simultaneously or sequentially - cannabis or MDMA adulterated with synthetic cannabinoids, highly potent synthetic opioids+ alcohol and illicit drugs



Main trends/2

CANNABIS

- **Prevalence:** 15 % (15 million) 15-34 year used it last year.
- **Treatment 2022:** 92000 clients or 43% of all treatment demands.
- **Harms:** chronic respiratory symptoms, cannabis dependence, psychotic symptoms. Regular use associated with poorer educational achievement, risk of involvement with criminal justice system.

COCAINE

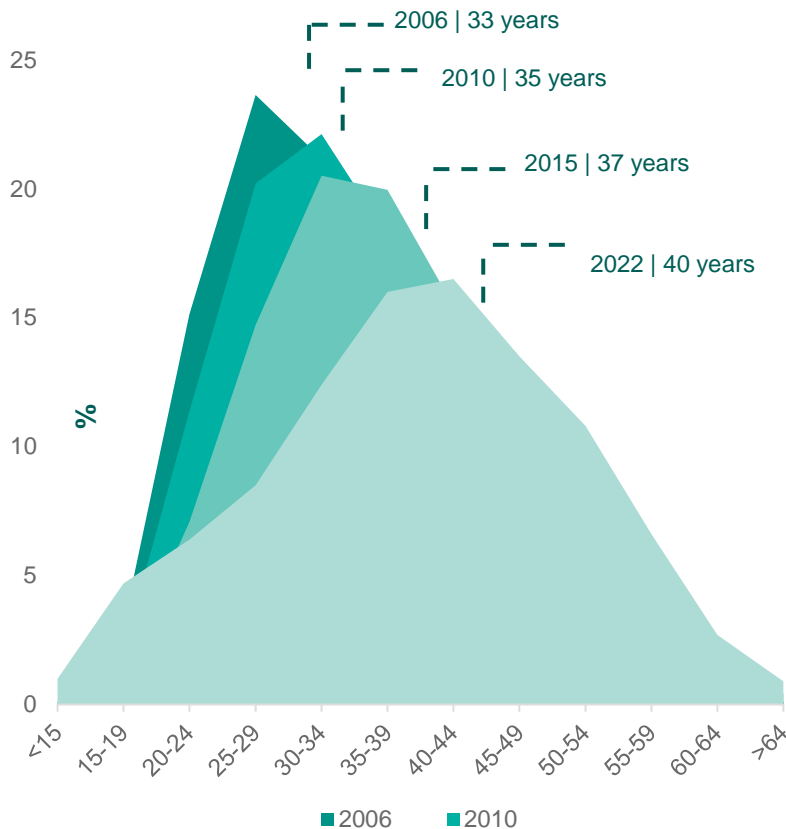
- **Prevalence:** 2.5% (2.5 million) 15-34 year used it last year.
- **Treatment 2022:** 29000 or 28 % of all treatment demands.
- **Harms:** psychosis, cardiovascular problems, cocaine and alcohol use creates cocaethylene in liver, injection risks HIV and HCV. Involved in 996 deaths with opioids.

HEROIN AND OTHER OPIOIDS

- **Prevalence:** 0.3% adult population (860000 people-530000 received OAT)
- **Treatment 2022:** 12000 or 12% of treatment demand for heroin.
- **Harms:** most commonly implicated in overdose deaths (6392 or 22.2 millions per adult pop.) and risks associated to injection (blood borne viruses). OAT as protective factor.



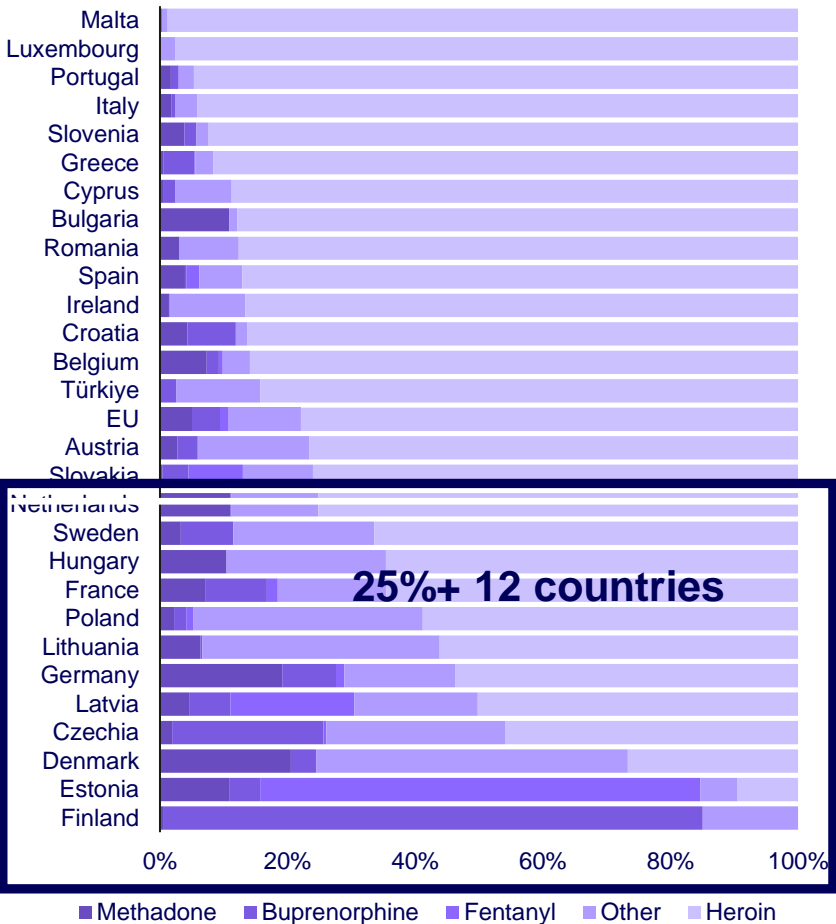
Challenges for the future



Ageing population of opioid users

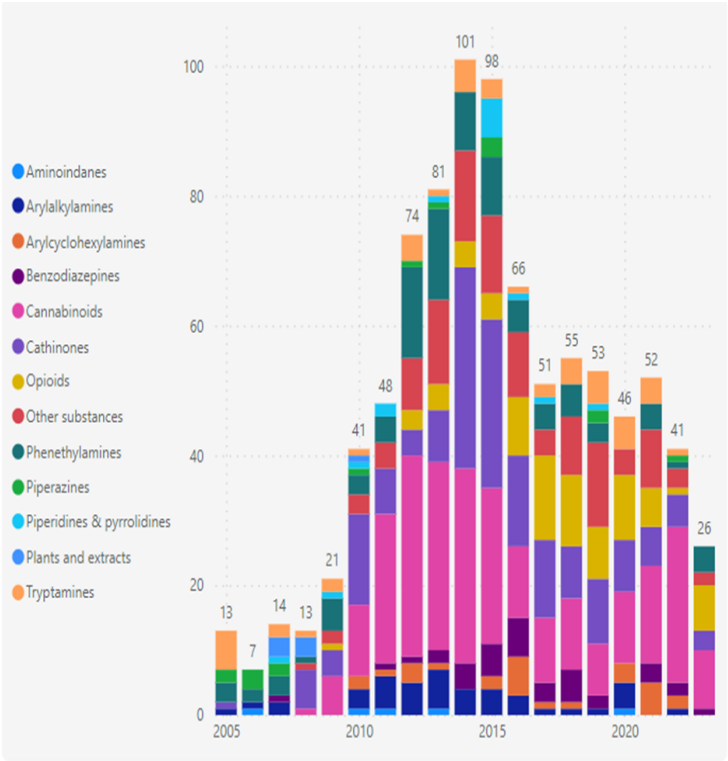


Statistical Bulletin 2024 - https://www.euda.europa.eu/data_en
 European Drug Report 2024 - https://euda.europa.eu/publications/european-drug-report/2024_en

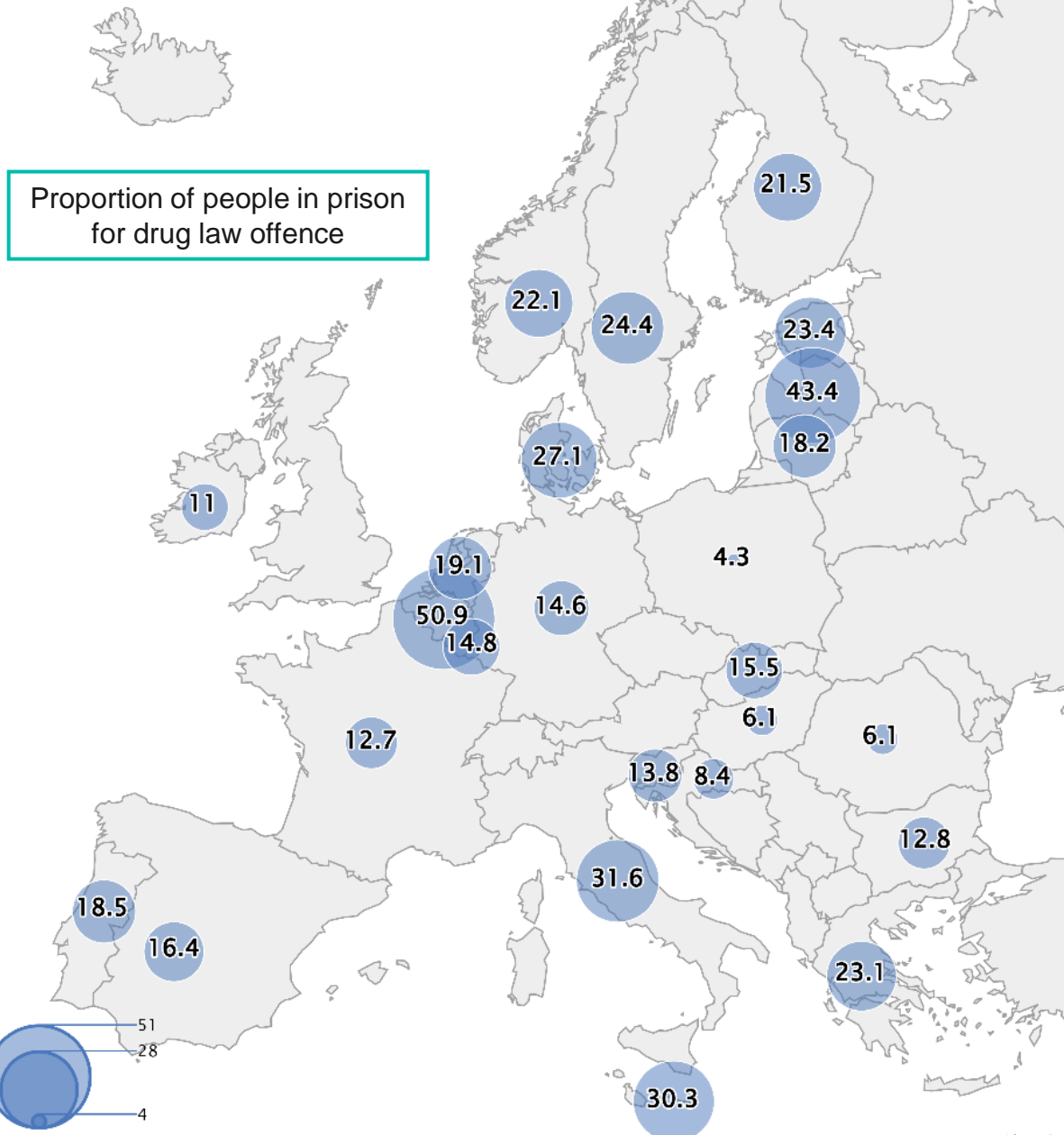


Other opioids

Number of new psychoactive substances reported for the first time to EU Early Warning System, by category, 2005–23



Drug and prison in Europe



People in prison for drug law offences

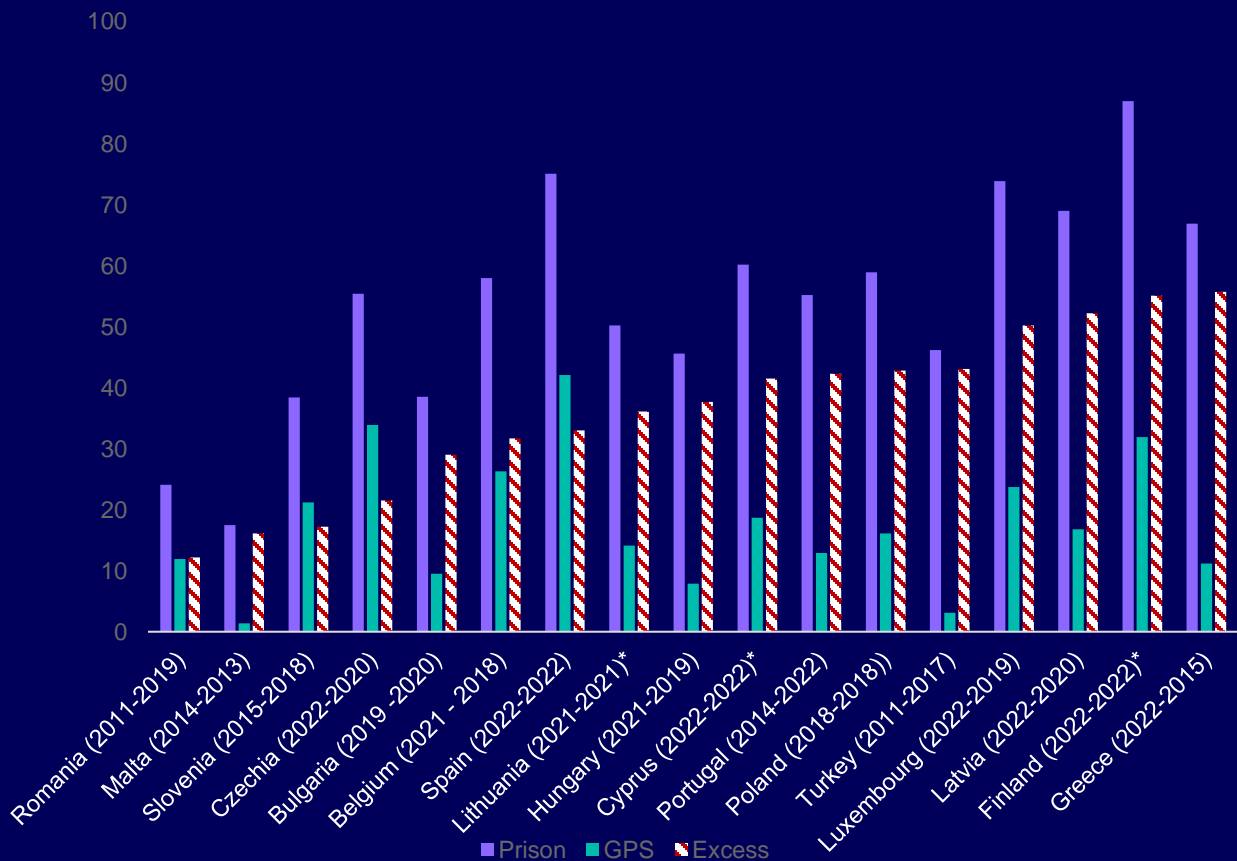
People who use drugs and are in prison for offences not directly related to drug use

People in prison for offences committed to support their drug use

Sources: EUDA (2021), Prison and drugs in Europe: current and future challenges, Luxembourg; Aebi, M. F. and Tiago, M. M. (2022), Council of Europe annual penal statistics SPACE I: prison populations survey 2021, Council of Europe, Strasbourg

Lifetime prevalence of illicit drug use before imprisonment and in the general population

Excess of drug use among people living in prison compared to general population



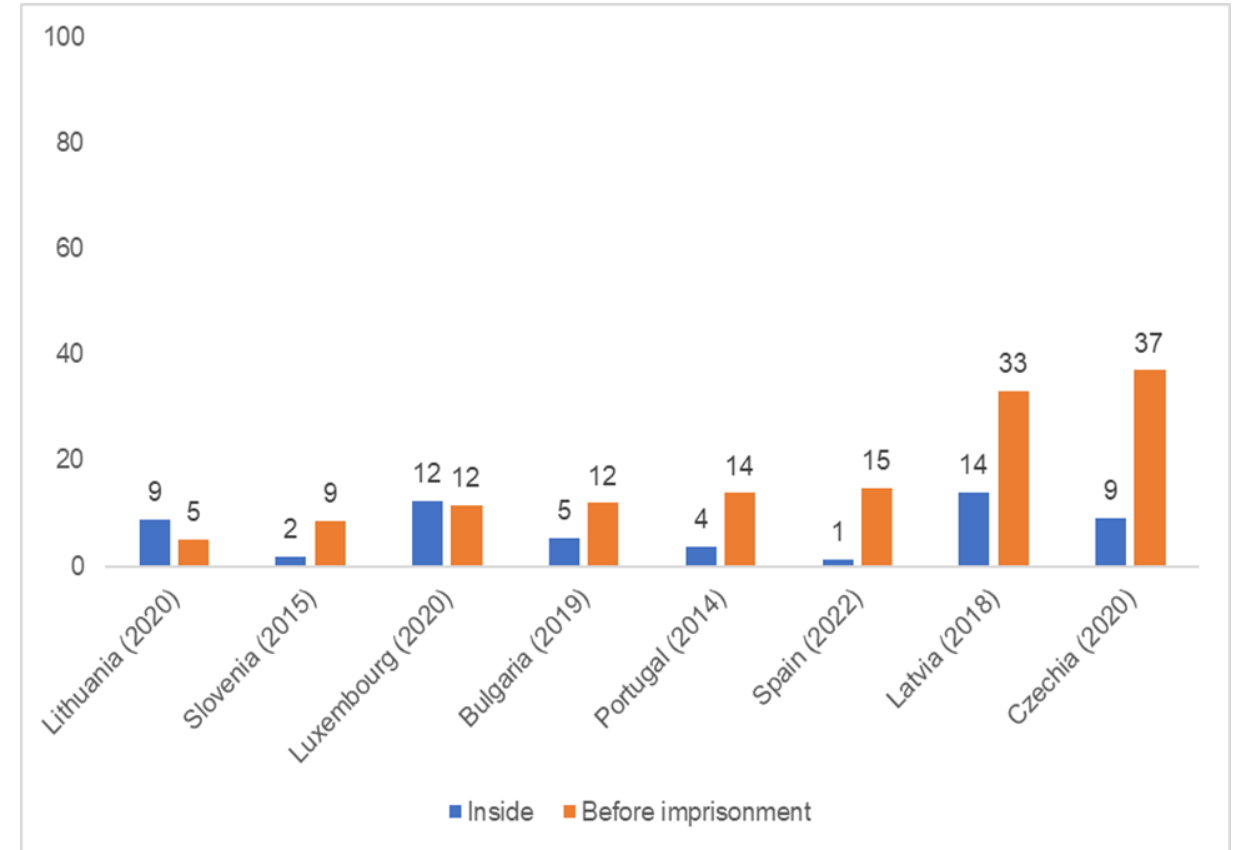
Drug	Max. % Prison population	Max. % General population
Cannabis	87%	45%
Cocaine	71%	11%
Ampheatamines	47%	8%
Heroin	36%	0.9%

Source: EUDA: Statistical Bulletin 2024—General Population Survey (GPS) & Drug Use and Prison (DUP).



Drug use and drug injecting inside prison

- Many people stop using drugs when they enter prison
- But others:
 - reduce their use
 - continue to use drugs
 - change their drug using patterns
- Some start to use drugs (1/3 of those using inside).
- 11 countries with data report the existence of drug use inside prison: LTP: cannabis: 2% - 53%; cocaine: 2%-19%; amphetamines: 0%-23%; heroin: 1%-16%.



Drug use is reported inside prison

Life time injecting inside and outside prison in nine countries between 2000-2019





Drug use inside prison

- **Main routes :**

- external visits
- people movements
- new technologies
- throw over the walls

- **Supply reduction measures:**

- regular controls
- drugs dogs
- scanning technology
- drug testing, etc.

- **Drug testing:**

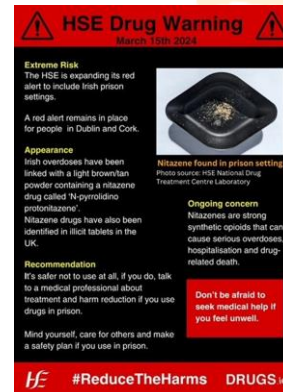
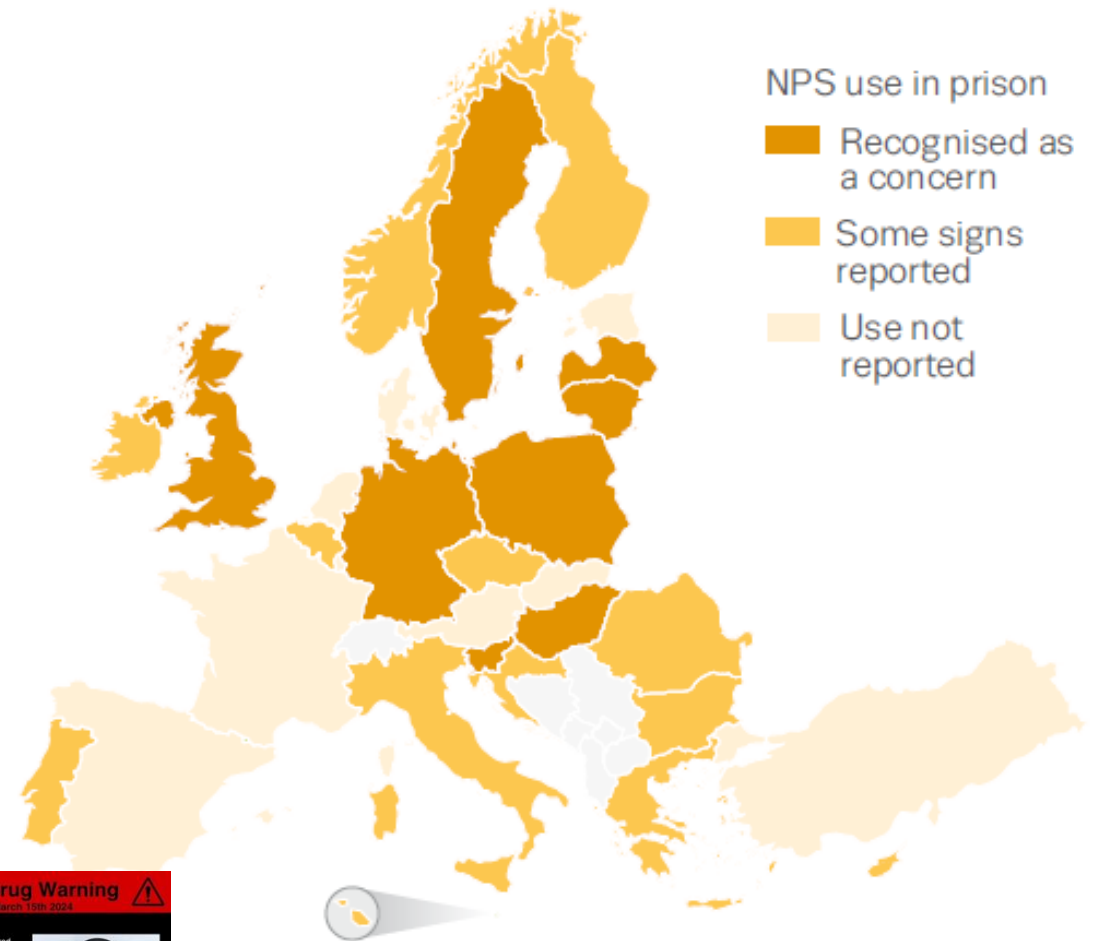
- in three countries not available (GR, FR, CY)
- in 24 is available: in 14 with purposes -security and treatment; in 9 for security; in 3 for treatment.
- cost? Effectiveness?

Use of new psychoactive substances (NPS) in prison

- Wide range of physical and mental health **harms** associated with acute intoxication and chronic consumption of NPS in prison

- **Motivations of use:** easily accessible, initial undetectability, often more potent, cheaper, producing intoxication at lower doses for a lower cost, easier to conceal and taken into prison

- **Recent developments:** anecdotal reports of synthetic opioids in prisons settings/**Nitazenes**

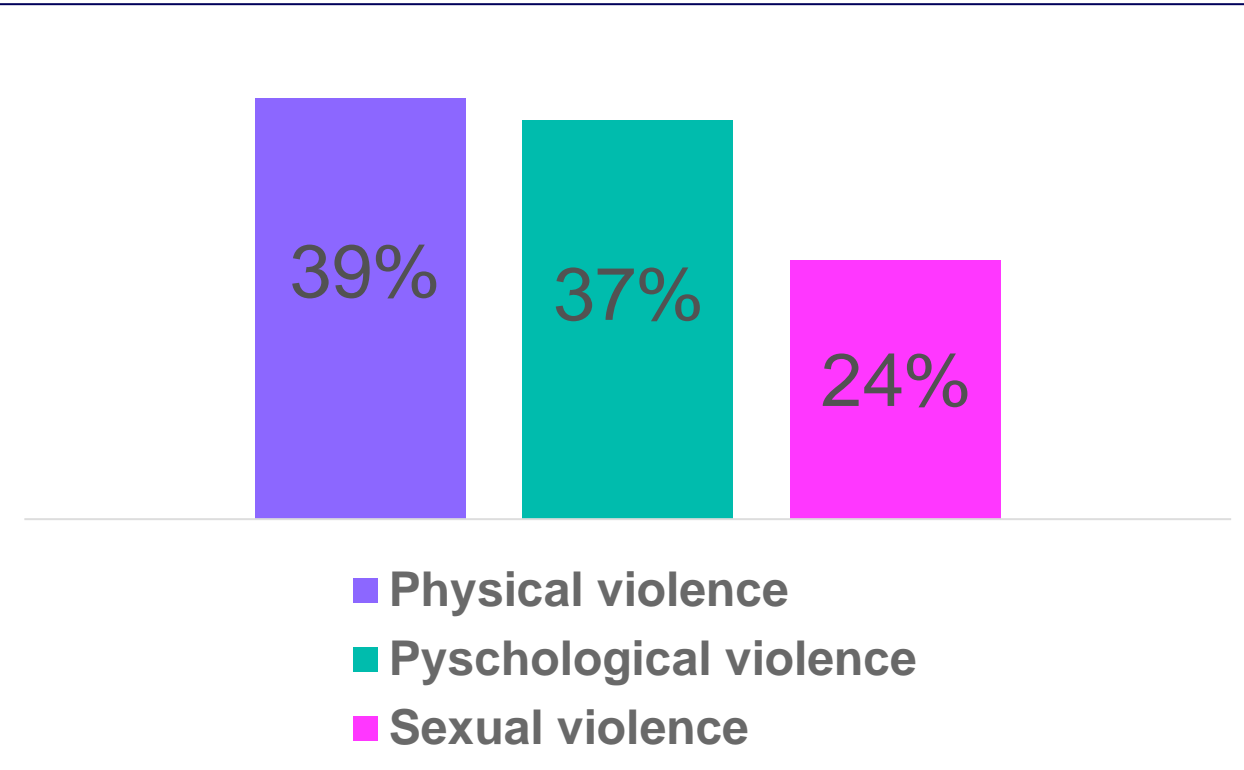


Women in prison in 2022

Crime for current imprisonment (% M and F)



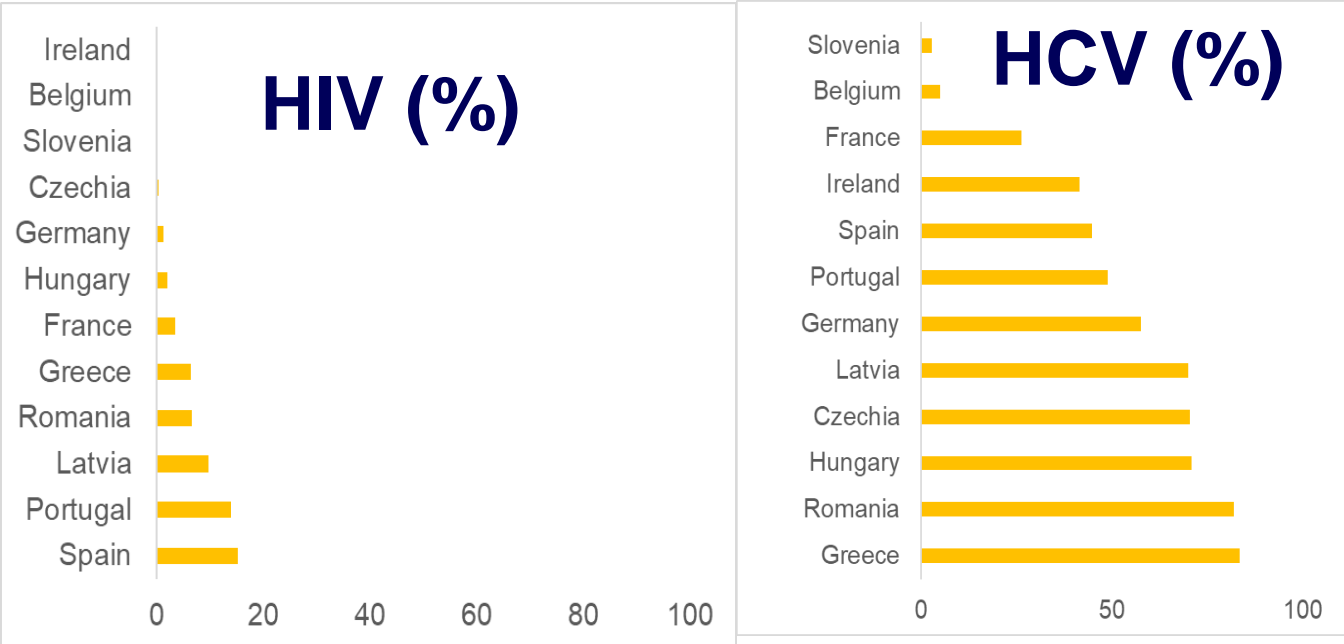
% victims of violence in four prisons in Italy and Portugal (n. 309)



Source: Aebi M., Cocco E., Molnar L. (2023), Space I – 2022 – Council of Europe Annual Penal Statistics: prison population. Council of Europe and University of Lausanne - SPACE I - Reports 2010-2022. Graph source: EMCDDA elaboration. Data on 2017 extrapolated from adjacent years. Total from all countries Members of the Council of Europe

Data source: Montanari L. (2024), Women, drugs and prison in Italy and Portugal- Presentation at the international Congress on Gender Studies, Lisbon, 29-31/1/2024

High burden of drug related infectious diseases and psychiatric comorbidity



**Psychiatric comorbidity
in prison population:
20% - 90%**

High risk of:

Suicide/Self-harm/Reoffending

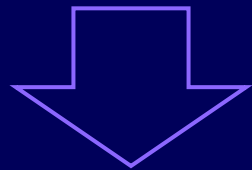
HIV: 0.06% IE to 15% ES
HCV Data from 3% in SI to 84% in GR

**Psychiatric comorbidity in the general
population: 2% to 51%**

Mortality during imprisonment and after release

Mortality inside prison

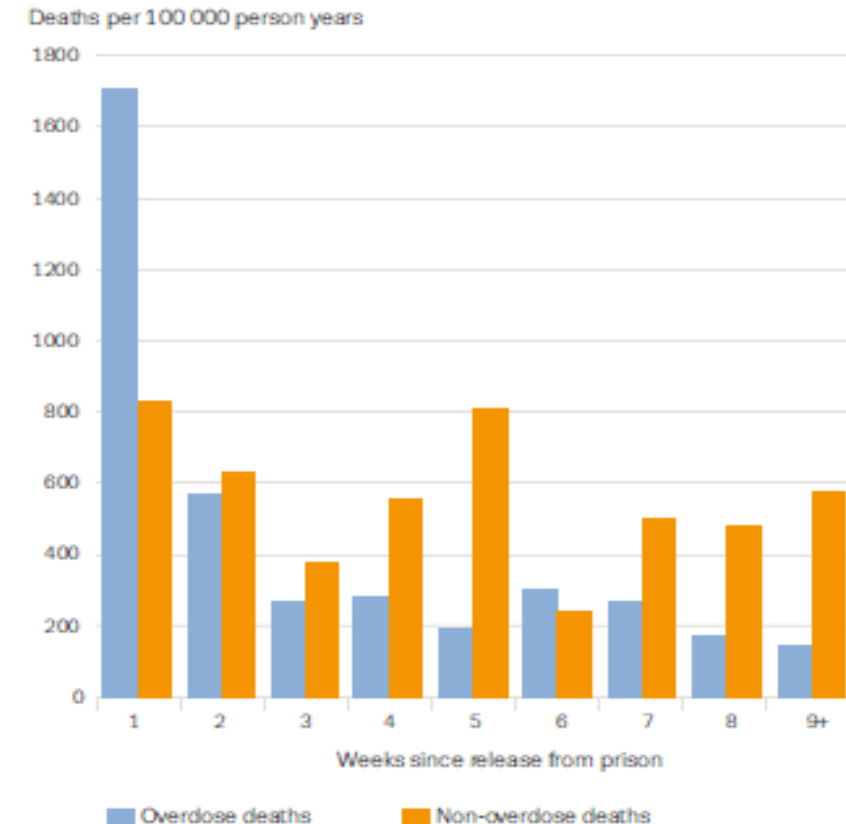
- Risk of suicide among people in prison in EU: 10.5 per 10000 (vs 1.5 general pop.)
- 78% of deaths are violent deaths 1 in 10 of those violent deaths are due to



**intentional or accidental drug overdose
or intoxication**



Mortality after prison release



Source: Binswanger et al., 2013.

Drug related interventions in prison: evidence of effectiveness

Scarce evidence

Little research

Is there a need?

→ OAT

→ Test, prevention and treatment of infectious diseases

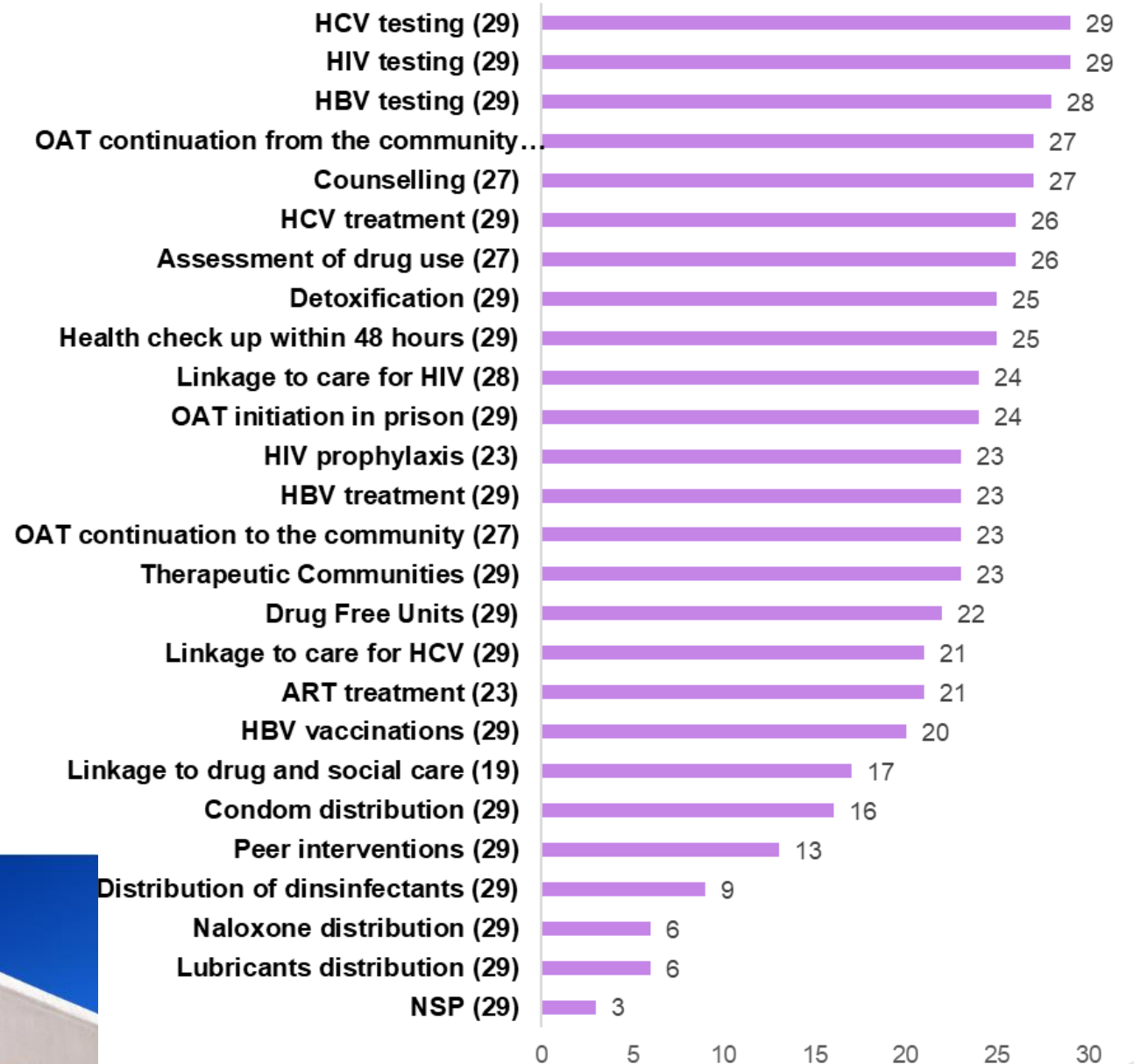
CHAPTER 6

Available evidence and good practice addressing drug use and related harms in prison settings

Lara Tavoschi, Linda Montanari and Dagmar Hedrich

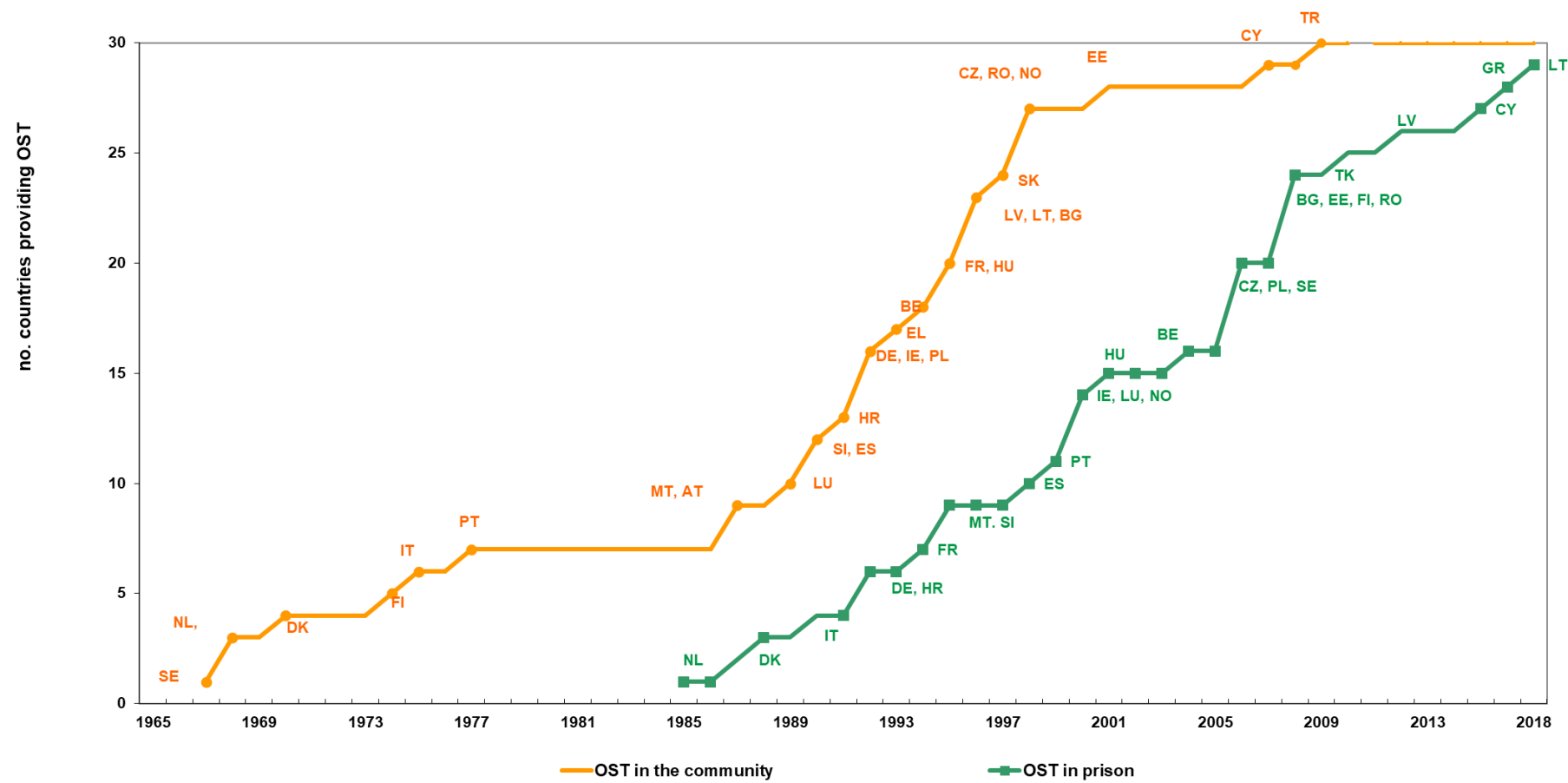


Overview of official availability of drug related interventions in prison in 27 EU MS + Norway and Turkey



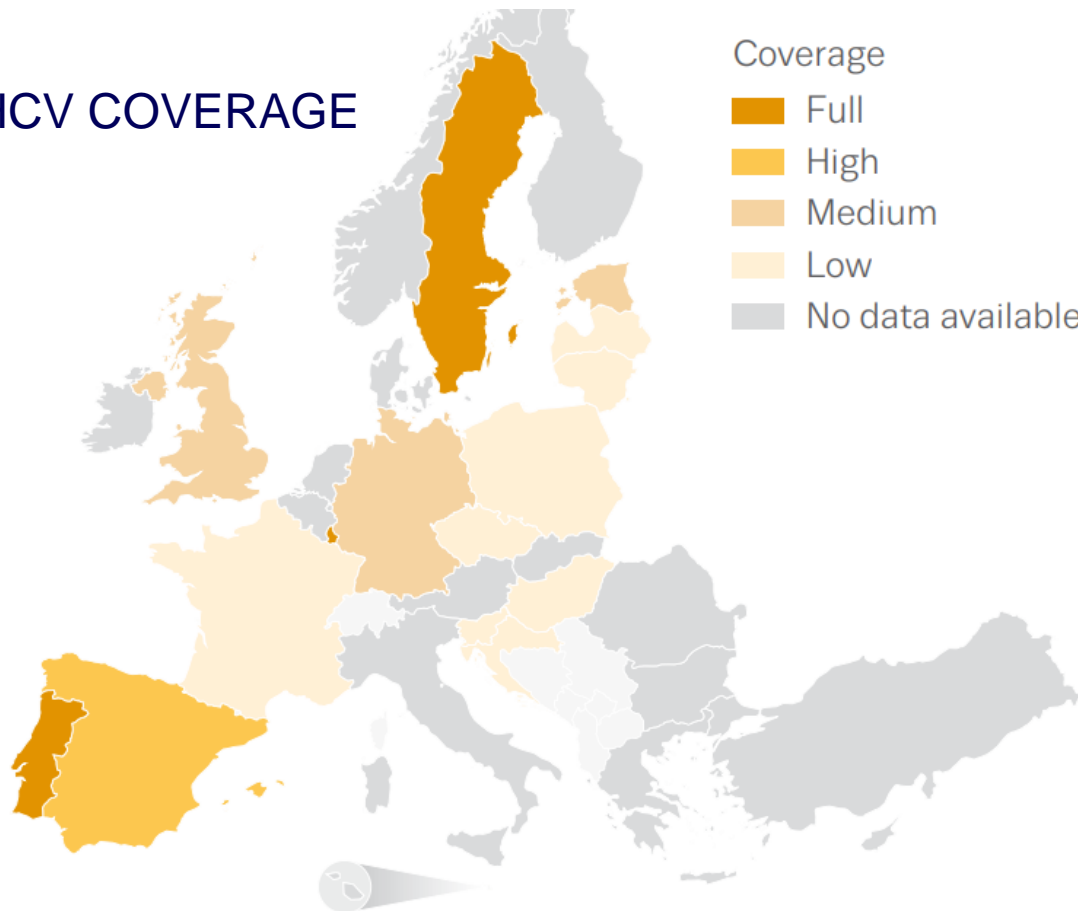
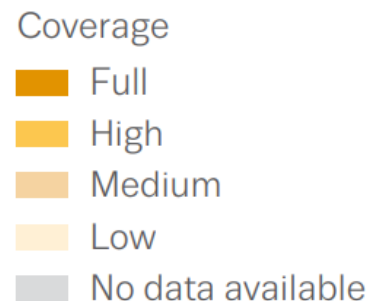
Prisons and drugs: responses miniguide

OAT introduction in the community and in prison (EU27, NO, TK)

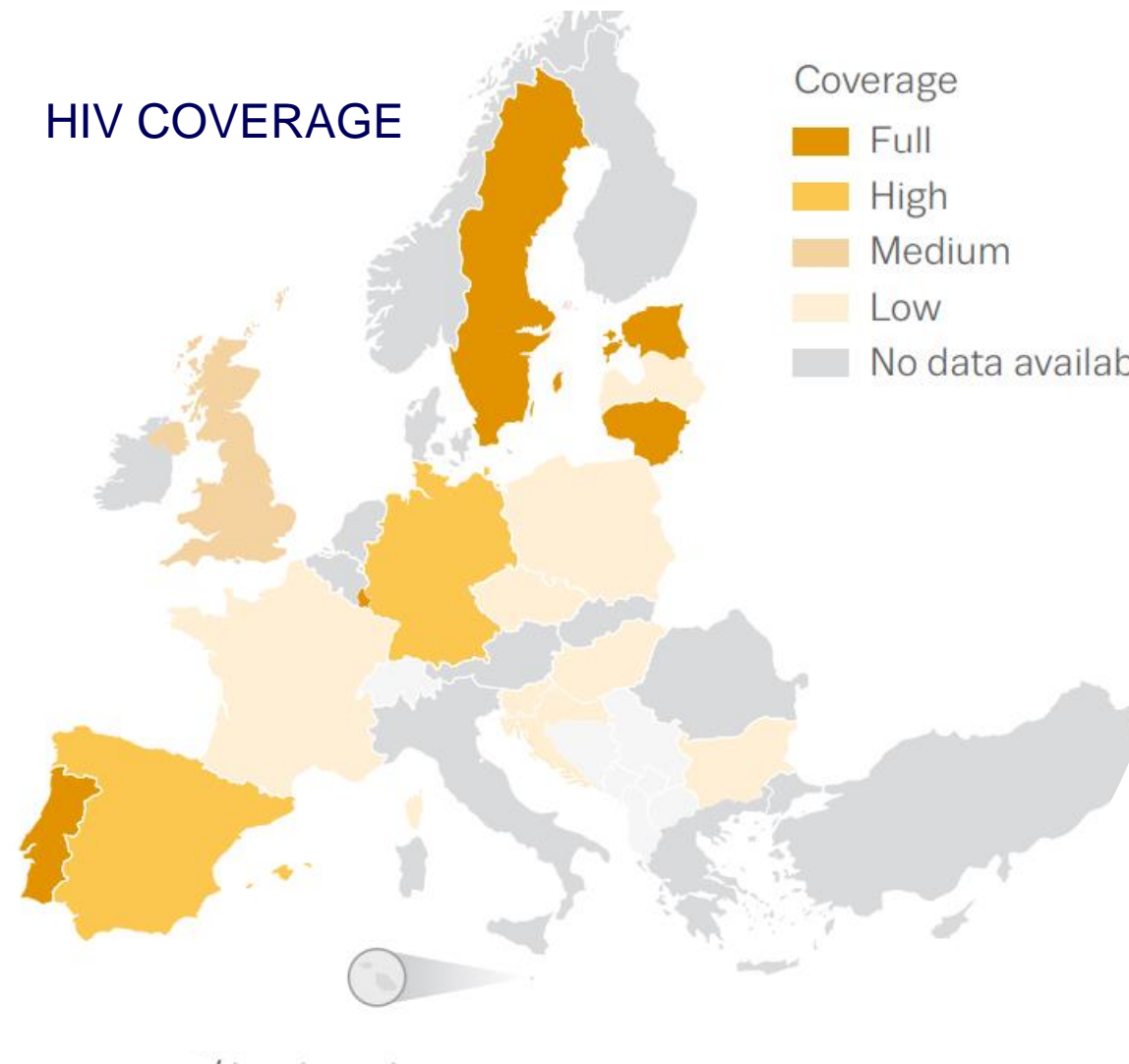
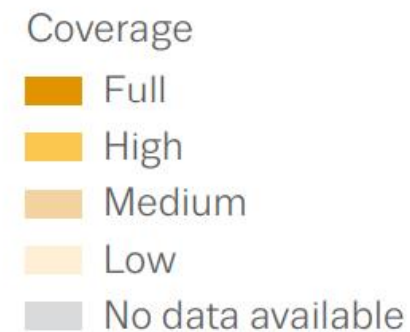


Coverage of HIV and HCV testing in prison

HCV COVERAGE



HIV COVERAGE



Training on Prison and Drugs in Europe

Prison and drugs in Europe

Current and future challenges

25

Trainer manual for
stakeholders in the field
of prison and drugs

- 7 modules mirroring Prison Insight
- **4 to 6 activities per module**
- **40 to 60 minutes** per module/per week

1. Introduction

Students are introduced to the macro issue discussed in the module and received indications on the material that will be presented

2. Learning outcomes

The objectives of the module and the opportunities to improve the prison staff knowledge on specific topics related to prison and drugs are explained

3. Study materials

Learning activities are proposed to students. Based on:

- Reading slides and materials
- Listening recorded classes

4. Optional resources

Further material are proposed to students. Videoclips extracted from the webinar and reading materials from the report

Key issues

Alternatives to incarceration
for people who use drugs

- **People Who Use Drugs overrepresented** among people in prison
- **High burden** of physical and mental health disorders and social problems
- Intervening in prison means intervening on **multiple vulnerabilities**

- **Drug use inside prison** exists and pose security and health problems
- Necessary to find a balance between **care and control**
- Challenges of **NSP and community** drug challenges

- **Increase coverage** of drug related interventions in prison
- Prison health as **public health**
- **Improve skills and acceptability**



**LISBON
ADDICTIONS
2024**

21- 22 October 2024

4th European Conference on Prison Health

+ Side Event At Lisbon Addictions 2024

Thank you More information

Linda.Montanari@euda.Europa.eu

Acting today, anticipating tomorrow.

euda.europa.eu

**Women, drugs, prison:
a global perspective**

LX Addictions conference: Side event organised by Health Without Barriers (HWB) and European Drugs and Gender Group (EDG)

**21 October 2024
Lisbon Congress Centre**