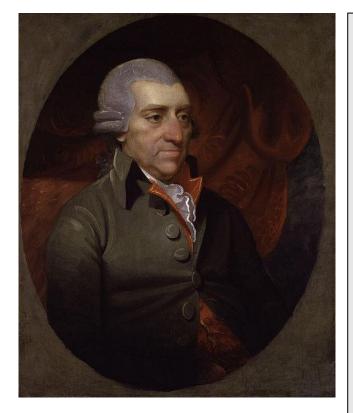






Institut für Suchtforschung Frankfurt am Main

Prof. Dr. Heino Johann Stöver



John Howard 1726 - 1790

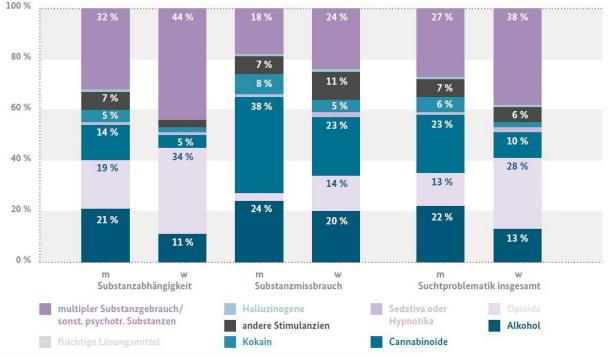
1774 "Act for Perserving the Health of Prisoners in Gaol, and preventing the Gaol Distemper"

"The late act for preserving the health of prisoners requires that an experienced Surgeon be appointed to every gaol: a man of repute in his profession. His business is, in the first place, to order the immediate removal of the sick, to the infirmary; and see that they have proper bedding and attendance. Their irons should be taken off; and they should have, not only medicines, but also diet suitable to their condition. He must diligently and daily visit them himself; not leaving them to journeymen and apprentices. He should constantly inculcate the necessity of cleanliness and fresh air; and the danger of crowding prisoners together: and he should recommend, what he cannot enforce. ..."

European Court of Human Rights in the case of Wenner vs. Germany – 1st Sept. 2016

European Court of Human Rights, Wenner v. Germany, no. 62303/13, § 59, ECHR 2016

Drug use in prisons in Germany: 44% pf people living in prisons have drug-related problems (addicition/misuse)



Gesamtüberblick zur Hauptsubstanz differenziert nach Geschlecht (Angaben in Prozent)

Anmerkung: Werte unterhalb von 5 % werden zur besseren Lesbarkeit nicht ausgewiesen.

Stichtag: 31.03.2018 unter der Beteiligung von 12 Bundesländern) zeigt auf, dass **44 Prozent der 41.896 erfassten Gefangenen eine stoffgebundene Suchtproblematik** (Abhängigkeit und Missbrauch nach den Kriterien der WHO ICD-10) zum Zeitpunkt des Haftantritts aufweisen: 27 % Abhängigkeit 17 % schädlicher Gebrauch von psychotropen Substanzen (einschließlich Alkohol; vgl. Die Drogenbeauftragte der Bundesregierung. Drogen- und Suchtbericht 2019. 2019.

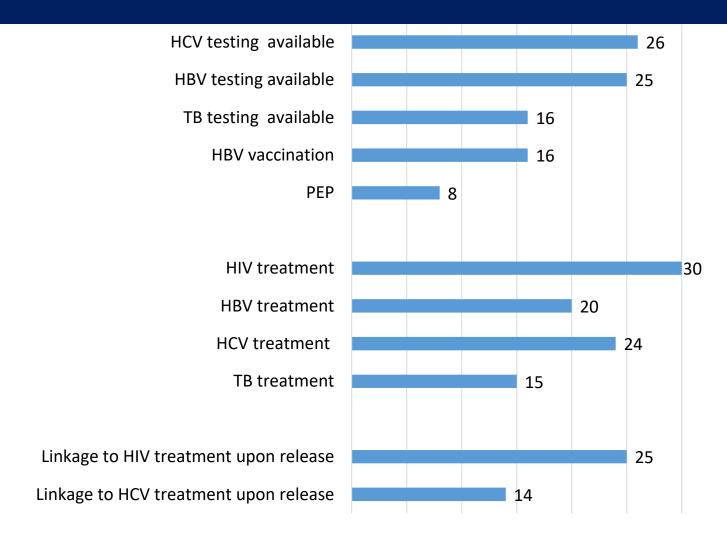
OST in prisons in Germany: often unequal, often insufficient

Federal State	Year of evaluation	Number of people living in prison in the reference year	Approx. number of people with opioid disorder living in prison (reported number, or 30% of total people living in prison)	People with opioid use disorder living in prison, who receive OST, N (approx. %)
Bremen	2018	620	186	90–120 (48–65%)
Northrhine-Westphalia	2018	16,219	3,660	2,048 (56%)
Schleswig-Holstein	2018	1,150	350	130–150 (37–43%)
Hamburg	2018	1,900	570	150–200 (26–35%)
Hesse	2018	4,600	1,380	430 (31%)
Berlin	2018	3,050	915	246 (27%)
Lower Saxony	2018	4750	1425	310 (22%)
Saarland	2018	765	230	27 (12%)
Rhineland-Palatinate	2018	3,050	915	105 (11%)
Baden-Wuerttemberg	2018	7,390	1,832	168 (9%)
Sachsen-Anhalt	2018	1,566	470	36 (8%)
Thuringia	2018	1,500	450	30 (7%)
Bavaria	2018	11,000	3,300	240 (7%)
Brandenburg	2018	1,000	300	9 (3%)
Saxony	2018	3,400	1,020	10 (<1%)
Mecklenburg-Western	Not available			

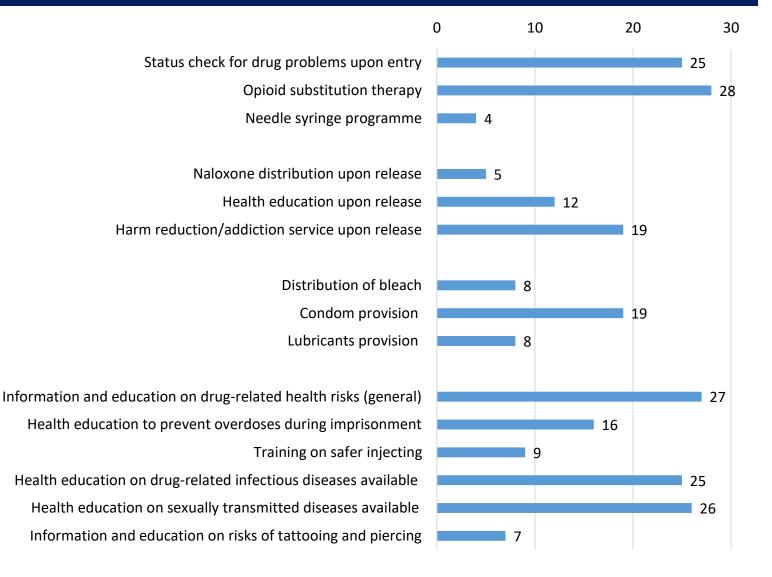
(Stöver, Keppler et al. 2019)

Pomerania

Infectious diseases related services available in prisons



Infectious diseases related services available in prisons



Conclusions:

- A shift in the responsibility of healthcare from Justice to the ministry in charge of healthcare generally – like WHO, UNODC and many other international player are recommending – would probably lead to more and efficient healthcare and acknowledgement of human rights, closely connected to community services.
- Alternatives to imprisonment would be an effective treatment to avoid health risks and health and social inequality.

"... Prisoners are the community. They come from the community, they return to it. Protection of prisoners is protection of our communities "

(Joint United Nations Programme on HIV/AIDS (UNAIDS) Statement on HIV/AIDS in Prisons)

hstoever@fb4.fra-uas.de

https://www.researchgate.net/profile/