

Covid-19 and prisons: a reflection on public health and human rights

Covid-19 e prisões: Reflexões sobre saúde pública e direitos humanos

Covid-19 y las cárceles: Reflexión sobre la salud pública y los derechos humanos

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ABSTRACT

Background and Objectives: The 2019 coronavirus pandemic (Covid-19) is a public health challenge. Identifying risk groups is essential for establishing prevention, screening, containment, and treatment strategies. In Brazil, prisons overcrowding and unhygienic conditions have been a historical problem that enables infectious diseases. This study sought to reflect upon incarcerated population vulnerability and present strategies to face the pandemic. **Methods:** This is a theoretical-reflective study based on the review of scientific publications and Covid-19 coping guidelines. **Results:** Prison populations are highly vulnerable to Sars-Cov-2 infections. Such vulnerability is aggravated by prisons' structural conditions, which accelerates diseases spread, especially respiratory illnesses, and hinders the adoption of preventive measures. Healthcare strategies aimed at this population are still scarce. **Conclusion:** Covid-19 outbreaks in prisons affect prisoners, staff, and family members, possibly leading the health system to an unprecedented collapse. Considering that, strategies to reduce coronavirus impact in prisons and on public health are urgent. Preventive measures of virus spread among this population must be supported by priority health measures, contingency protocols, and coordinated actions between the health and justice sectors.

Keywords: Prisons. Coronavirus Infections. Communicable Diseases. Pandemics. Public health

RESUMO

Justificativa e Objetivos: A pandemia do coronavírus 2019 (Covid-19) é um problema de saúde pública desafiador. A identificação de grupos de risco é fundamental para o estabelecimento de estratégias de prevenção,

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rastreamento, contenção e tratamento. No Brasil, a superlotação e as condições insalubres das prisões são um problema histórico que facilita a disseminação de doenças. O objetivo deste estudo é refletir sobre a vulnerabilidade da população penitenciária e apresentar estratégias de enfrentamento à pandemia. **Métodos:** Estudo teórico-reflexivo construído a partir da revisão de publicações científicas e diretrizes de enfrentamento da Covid-19. **Resultados:** A PPL apresenta alta vulnerabilidade clínica para contaminação pelo Sars-Cov-2, o qual é agravado pelas condições estruturais das prisões que potencializam a disseminação de doenças, sobretudo respiratórias e dificultando o estabelecimento de medidas de prevenção. Surtos de Covid-19 em prisões afetam presos, funcionários e familiares e podem levar o sistema de saúde a um colapso sem precedentes. As estratégias de atenção a saúde desta população ainda são insuficientes. **Conclusão:** O estabelecimento de estratégias para reduzir o impacto do Covid-19 nas prisões e o seu reflexo na saúde pública é uma urgência. A prevenção da propagação do vírus nesta população deve ser apoiada por medidas prioritárias de saúde, implementação de protocolos de contingência e estabelecimento de ações coordenadas entre os setores de saúde e justiça.

Descritores: Prisões. Infecções por Coronavirus. Doenças Transmissíveis. Pandemias. Saúde Pública.

RESUMEN

Justificación y Objetivos: La pandemia de la enfermedad por coronavirus 2019 (Covid-19) es un problema de salud pública desafiante. La identificación de los grupos de riesgo es esencial para establecer estrategias de prevención, detección, contención y tratamiento. En Brasil, el hacinamiento y las condiciones insalubres en las cárceles son un problema histórico que facilita la propagación de enfermedades. El objetivo de este estudio es reflexionar sobre la vulnerabilidad de la población carcelaria al Covid-19 y presentar estrategias de afrontamiento a la pandemia. **Métodos:** Estudio teórico-reflexivo con base en la revisión de publicaciones científicas y guías de afrontamiento del Covid-19. **Resultados:** La población penitenciaria presenta una alta vulnerabilidad clínica a la contaminación por Sars-Cov-2 agravado por las condiciones estructurales de las cárceles, lo que aumenta la propagación de enfermedades, especialmente respiratorias, y dificulta el establecimiento de medidas preventivas. Los brotes del Covid-19 en las cárceles afectan a los presos, al personal y a los miembros de la familia, y podrían llevar al sistema de salud a un colapso sin precedentes. Las estrategias sanitarias de esta población aún son insuficientes. **Conclusión:** Las estrategias para reducir el impacto del Covid-19 en las cárceles y su impacto en la salud pública son urgentes. La prevención de la propagación del virus en esta población debe apoyarse en medidas prioritarias de salud, la implementación de protocolos de contingencia y el establecimiento de acciones coordinadas entre los sectores de salud y justicia.

Palabras clave: Cárceles. Infecciones por Coronavirus. Enfermedades Transmisibles. Pandemias. Salud Pública.

The novel coronavirus 2019 (SARS-CoV-2) has infected millions of people worldwide¹ and Brazil is one of the main outbreak epicenters.² The disease contamination rates are still increasing³, and vulnerable groups such as persons deprived of liberty are at greatest risk of infection.³⁻⁵

Large-scale studies have shown that the prevalence of infectious diseases such as human immunodeficiency virus (HIV), hepatitis C virus (HCV), hepatitis B virus (HBV), and tuberculosis is higher among prisoners than in the general population.⁶ This can be explained by the fact that detainees are predominantly from vulnerable communities with limited access to health services.⁷ Moreover, vulnerability to these conditions is exacerbated during incarceration due to unhygienic and poorly ventilated prison facilities and may be aggravated by other risk factors such as drug use and shared consumption devices (cigarettes, pipes), inadequate nutrition, high-risk sexual behavior, poor hygiene habits, psychological stress of isolation⁸, and overcrowding.

Implementing social distancing in prisons is a laborious task, exposing the imprisoned population to infectious diseases⁹ and making them a potential source of infection.¹⁰ In February 2020, Brazil's inmate population

was 710,000 individuals, 31% of which were provisional (without trial). Considering that the estimated system capacity is 423,000 vacancies, such incarceration rate generates an overcrowding of 287,000 people.¹¹ Given that previous evidence showed that Covid-19 transmission rate is higher among individuals living in the same household than among individuals who have contact but do not live in the same environment,¹² this is a disturbing data that raise awareness to the possibility of high transmissibility among prisoners who share the same cell. More than 40 of the 50 largest Covid-19 clusters in the USA occurred within prisons.³ The number of cases is 55 times higher among incarcerated individuals when compared to the general population.¹³⁻¹⁵ We should also consider the transmission potential to staff, law enforcement officers, family members,¹⁰ and visitors, who can spread the virus within prisons and in their communities. According to the Brazilian National Justice Council, by August 2020, over 17,000 prisoners were infected (2.3% of the total) and about 100 died from Covid-19. However, these data may be underreported given that only 7.8% of detainees were tested and that 7,000 of the 110,000 prison officers were infected and 75 died in this period, demonstrating the vulnerability of the prison system.

Implementing measures to contain the spread of Covid-19 has been challenging in all social spheres worldwide. Such challenges are even potentiated regarding the Brazilian prison system, since the implementation of preventive measures within this environment imply ethical, social, economic, and legal particularities.

For analyzing these issues, we must consider that Brazil is a continental country with the world's third largest prison population, posing barriers for preventive and treatment strategies. Despite recent progress, investments for implementing health services within the prison context are still insufficient and historically weak.⁹ The National Policy for Comprehensive Health Care in the Prison System (PNAISP) was developed in response to this population adverse conditions to healthcare access within the scope of the Brazilian Unified Health System (such as increased spread of diseases, scarcity of health services and lack of health professionals, limited infrastructure, and low-quality healthcare). The PNAISP aims to effectively ensure prisoners' constitutional right to health based on the principles of integrality and intersectorality¹⁶ through primary health care and human rights strategies that implement preventive measures and provide hospital support. Logistical processes may represent a challenge for referring prisoners to medium and high-complexity hospitals, possibly delaying the diagnosis and treatment of infected patients due to security protocols and consequently increasing death risk.¹⁰ The health system may also not be able to provide enough assistance to these patients in view of their clinical aggravations.

Ensuring prisoners' access to health is a matter of concrete human rights responses, health protection, and citizenship defense through a set of actions addressing health promotion and environmental health surveillance. Considering that, the World Health Organization (WHO) issued a series of guidelines¹⁷ concerning the Prevention and Control of Covid-19 in Prisons and other Places of Detention, among which the main are:

1. To perform screening and risk assessment for all individuals entering the prison environment (prisoners, visitors, employees), as well as for those released from prison;
2. To provide special attention for risk groups, especially older adults and individuals with chronic lung diseases;
3. To implement strict daily hygiene and disinfection protocols;
4. To provide the necessary materials (for all people involved) for individual hygiene and hand washing;
5. To develop psychoeducational measures on respiratory hygiene;
6. To establish a contingency plan for individuals suspected of Covid-19; perform medical observation until further evaluations and, if necessary, conduct tests and refer individuals to hospitals in severe cases of Covid-19; and
7. To unify and disseminate protocols to all those involved in contingency planning.

Corroborating these international measures, the Brazilian Justice Council published the Recommendation No. 62/2020¹³, establishing provisional measures to prevent contagion from the novel coronavirus within the scope of the criminal and socio-educational justice system. They also encouraged campaigns promotion to raise awareness concerning risks and hygiene procedures to avoid virus spread, besides recommending restrictive measures for holding hearings, re-evaluating prisons, interrupting visits, and attention to staff. These guidelines are in line with the Inter-American Commission on Human Rights (IACHR).¹⁸

As a result, governments must monitor Covid-19 restrictions considering other public policies and programs compatible with prisoners' right to personal integrity and health, extending outdoors hours or optimizing spaces and leisure times. Considering this population high vulnerability and penitentiary policy fragility, authorities must develop and monitor control- and containment-focused actions to avoid worsening this scenario.

These strategies must be supported by priority health measures, contingency protocols, and coordinated actions between the health and justice sectors, as well as different sectors of society (social services, civil society organizations, non-governmental organizations) to promote an integrated and articulated response that guarantees access to health and human right.

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AUTHORS' CONTRIBUTION:

Felipe Rech Ornell, Silvia Chwartzmann Halpern, Juliana Nichterwitz Scherer designed the study.

All authors contributed to the writing, review, and approval of the final version.