

**ILLICIT DRUG TREATMENT
IN PRISON:
DETOXIFICATION, DRUG-FREE UNITS,
THERAPEUTIC COMMUNITIES AND OPIOID
SUBSTITUTION TREATMENT**

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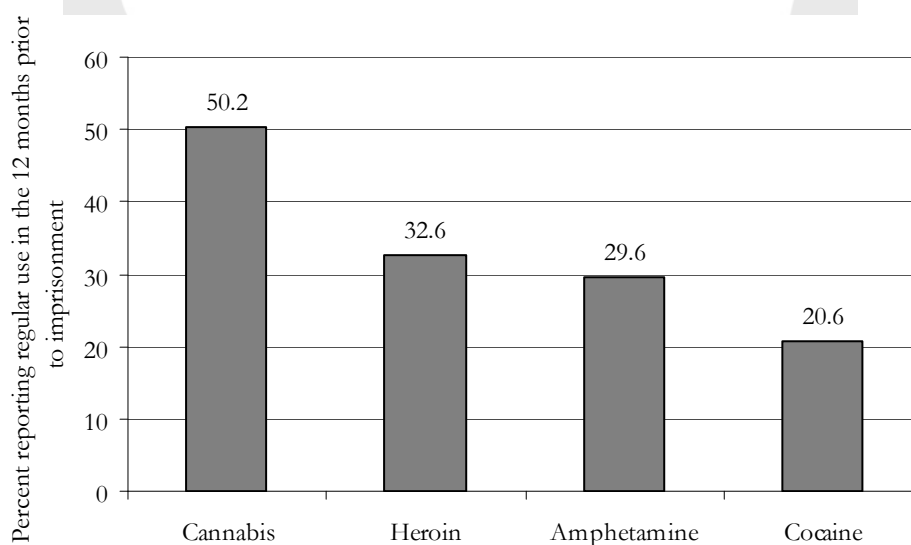
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1. INTRODUCTION

The relationship between drugs, crime and subsequent imprisonment is acknowledged around the world. Estimates of the prevalence of illicit drug use and dependence among male prisoners range from 17-30%; among female prisoners, this rises to 30-60% (Fazel, Bains, & Doll, 2006). In the United Kingdom, 80% of surveyed prisoners reported having ever used any illicit drug (Boys et al., 2002). Of sentenced prisoners surveyed, 43% of men and 41% of women met criteria for dependence on at least one illicit drug (Singleton, Farrell, & Meltzer, 1999). In New South Wales (NSW), Australia, inmate health surveys have shown that two thirds of male prisoners, and three quarters of female prisoners, had used illicit drugs regularly in the twelve months prior to imprisonment (Butler & Milner, 2003). The proportion of prisoners reporting regular use of selected illicit drugs is shown in figure 1.1.

Figure 1.1: Percent of NSW prisoners reporting regular drug use in the 12 months prior to imprisonment, by drug type.



Source: Butler, T., & Milner, L. (2003). *The 2001 New South Wales Inmate Health Survey*. Sydney: Corrections Health Service.

Although it is recognised that offering drug treatment to drug-using offenders may contribute to reducing re-offending, treatment availability is often limited (Kothari, Marsden, & Strang, 2002). In many countries, resources within prisons are scarce and

devoted to areas such as security. However, prisoners retain the right to adequate healthcare, including access to effective treatments for drug dependence. Furthermore, according to the principle of equivalence of care, prisoners have the right to receive healthcare equivalent to that available in the community (World Health Organization, 1992). The issues of drug dependence and treatment in prison take on added importance in the context of the global HIV epidemic. Prisons are important sites of HIV transmission due to sharing of drug injecting equipment and unprotected sexual activity (UNAIDS, 2006). Yet through the provision of effective drug treatment, prisons can also be sites for HIV education and prevention.

This report summarises the published literature on illicit drug detoxification and treatment interventions in prisons. Where relevant, literature on community-based interventions is also discussed. This report is not intended to be used as a guide for clinical practice; rather, its aim is to draw attention to various approaches for the treatment of illicit drug dependence in prison settings.



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