

Medical ethics in prison

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- How can I trust a doctor who is the employee of the prison director?
- What about the prison doctor's confidentiality?
- What about the prison doctor's professional qualification and professional independence?
- How can I use the doctor to make my prison life easier?



- How to manage confidentiality, privacy and patient's consent in the totalitarian prison environment and how to obtain trust by the prisoners?
- How to balance professional relationships with prisoners and custodial staff?
- How to deal with pressures and expectations by prisoners and the prison administration?
- How to keep professional independence while being employed by the prison administration?
- How to provide optimal medical care in the low-resource setting of the prison?



- Are medical confidentiality, patient's consent and the doctor's professional independence compatible with safety and security in prison?
- Why shouldn't the doctor support security in prison by performing intimate body searches, drug testing and certify inmates fit for punishment?
- Why shouldn't the prison doctor also take over the role of a public health officer ?
- How to warrant expensive medical care costs within paltry prison budgets?



- Why is health in prison important for public health?
- Why spend money for the health care of offenders in times of budget cuts for health care of decent people?

1. Prison physicians must stick to solid medical ethics
2. These ethics must be made known to and accepted by the whole prison community

Conflicting demands in prison

Confidentiality, privacy, consent

Equivalence of medical care

Free access to medical care

Professional independence

Disease prevention

Prison health is public health

Security and safety first

Lack of resources and overcrowding

Employment by prison admin.

Pathogenicity of the prison

Lack of public support



International consented documents on medical ethics in prison

United Nations UNHRC

Council of Europe, CPT

World Medical Association

International Council of Nurses

Penal Reform International

Physicians for Human Rights



COUNCIL
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Council of Europe Documents

European Prison Rules R (87) 3

Convention of the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT), 1987

Prison and Criminological Aspects of the Control of Transmissible Diseases including AIDS and Related Health Problems in Prison. R (93) 6

Ethical and Organisational Aspects of Health Care in Prison. R (98) 7, 1998.

Prison Overcrowding and Prison Population Inflation. R (99) 22

The CPT standards CPT/Inf/E(2002) 1-Rev 2010

Recommendation Rec (2006)2 on the European Prison Rules



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European Prison Rules Rec(2006)2: I. Basic Principles

- 1,2 Human Rights
- 3 Restriction: minimum necessary + proportionate
- 4 HR infringements not justified by lack of resources
- 5 Life as close to life in community as possible
- 6 Reintegration
- 7 Cooperation with public services
- 8 Recruitment, training, working conditions of prison staff
- 9 Regular inspections
- 10 Apply to all detained persons
- 11 Juveniles kept separate from adults
- 12 Mental illness incompatible with imprisonment
- 13 No discrimination

2. Persons deprived of their liberty retain all rights that are not lawfully taken away by the decision sentencing them or remanding them in custody.
4. Prison conditions that infringe prisoners' human rights are not justified by lack of resources

The essence of medical ethics in prison

1. The primary task of the prison doctor and the other health care workers is the health and well-being of the inmates.
2. The 7 essential principles for the practice of prison health care, as set out by the CPT:
 - Free access to a doctor for every prisoner
 - Equivalence of care
 - Patient consent and confidentiality
 - Preventive health care
 - Humanitarian assistance
 - Professional independence
 - Professional competence

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Principle 3

It is a contravention of medical ethics for health personnel, particularly physicians, to be involved in any professional relationship with prisoners or detainees the purpose of which is not solely to evaluate, protect or improve their physical and mental health.

UN Resolution 37/194, 1982

Principles of Medical Ethics relevant to the role of health personnel in the protection of prisoners

A prison doctor acts as a patient's personal doctor.

CPT Standards

Prison doctor:

~~The prison's doctor~~

The prisoners' doctor

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Prison Health is Public Health

WHO Moscow Declaration 2003

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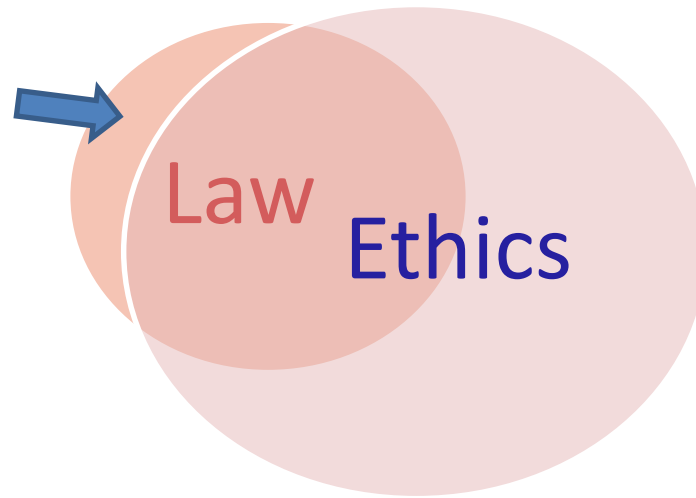
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Compliance with these rules

results in
ethical medical conduct

- ✓ promotes the confidence of the inmates to the medical care in prison
- ✓ leaves no doubt as to the doctor's medical professionalism and ethics
- ✓ prevents misunderstandings
- ✓ provides guidance in situations of conflicts
- ✓ supports quality assurance of the medical work
- ✓ protects against legal appeals
- ✓ gives international support.





„When law is in conflict with medical ethics, physicians should work to change the law. In circumstances of such conflicts, ethical responsibilities supersede legal obligations.“

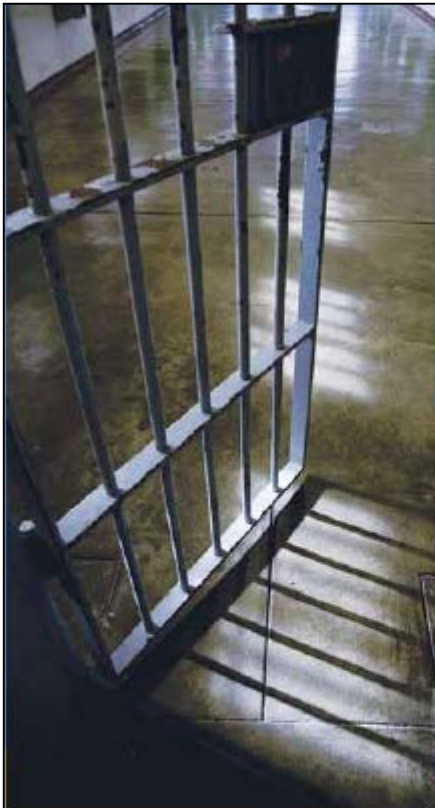
„The WMA further recognizes that physicians must have the right to conscientiously object to participating in legal practices which are contrary to the ethical codes of the profession.“

The Law and Medical Ethics 2003

Doctors working in prison: Human rights and ethical dilemmas

WMA/NMA/ICRC: Web-based course

<https://nettkurs.legeforeningen.no/category.php?id=6>



Охрана здоровья и
медицинская этика
в местах
лишения свободы



Руководство для
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Group work: standards of medical ethics

- 1) Which of the shown principles of prison health care do you regard as the most important ones? Make a list of priorities and explain your choice.
- 2) Are there any principles that cannot be realized in the prison setting where you are working?
- 3) According to the principle of equivalence, is it right that, if health care in the community of is poor, it must be poor also in its prison system? If yes why and if no, why not?