RECOMMENDATIONS FROM THE
3RD ASIAN AND PACIFIC
CONFERENCE ON PRISON HEALTH
MANILA, 13 TO 15 NOVEMBER 2019
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HEALTH DESPITE BARS

(Set down in Manila on 15 November 2019)

The 3rd Asian and Pacific Conference on Prison Health was held in the Philippines from 13 to 15 November 2019 on the theme “Health Despite Bars”. Organized by the International Committee of the Red Cross (ICRC), the conference was attended by approximately 150 participants from more than 20 countries with the overall objective of:

a) Providing the participants with an opportunity to share experiences, challenges, lessons learnt and research;

b) Promoting a “whole-government” stewardship approach to prison health;

c) Promoting awareness and understanding of current international standards and providing guidance for their implementation;

d) Enabling and encouraging the participants to be part and an active member of the “worldwide prison health research & engagement network” (WEPHREN), along with professionals and institutions involved in prison health from other countries.

The participants were represented by senior management and health services staff from various national prison authorities, officials from the ministries responsible for prisons and health, representatives from international organizations, academics and public health scientists across the Asian and Pacific region as well as international experts.

The extensive professional experience of the participants formed the basis of discussion and debate over the course of the conference. Relying on this experience, augmented by international standards on the treatment of prisoners, relevant guidelines and statements from the United Nations, WHO, Council of Europe and the World Medical Association, participants provided the following recommendations with the intent to strengthen the governmental approach to prison health in a manner that contributes to the public health goals of countries within the Asia and Pacific region:

1. Prison health should be an integral part of public health.

2. There should be a firm engagement from the governments to improve prison health; symbolic commitment alone is not enough. Prison health should become priority agenda at national level.

3. National and local health policies should encompass prison health. Nevertheless, prison health improvements require not only policies but their actual implementation.

4. Functional coordination mechanisms for quality health services for prisoners should be established between the prison health services, the public health services and the prison administration, at national and local levels.

5. The assessment of the government performance should include key indicators for prison health.

6. Partnership and active involvement of WHO and other key stakeholders in prison health is needed.

7. Strategic deployment of human resources for prison health should be a whole-government approach based on needs.

8. Strengthen public dialogue to remove the stigma associated with prisons and to promote a vision of prisons as places for care and rehabilitation rather than punishment.
9. Support the development and establishment of a minimum data set for prison health for Asia-Pacific region to be used efficiently for planning and budgeting.

10. Establish an integrated health information system between detention settings and the community.

11. Utmost respect for confidentiality of prisoners’ medical information must be guaranteed and access must be restricted to authorized medical staff only.

12. Governments should report on their expenditure on the penitentiary system and prison health in a transparent way. Analysis of such expenditure, together with a detailed knowledge of the health needs of prisoners, should be done to ensure effective allocation of resources.

13. Cost-effectiveness studies of alternatives to incarceration should be systematically conducted by governments and reported in a transparent way.

14. If possible, the Ministry of Health should be responsible for prison health budgets. A detailed plan should be elaborated in a timely manner to incorporate the prison health budget into the Universal Health Coverage.

15. Essential medical supplies and technologies should be made accessible free of charge to all prisoners and should be based on disease patterns of each country.

16. Prison health programmes should be of the same standards as those available in the community. Equity and continuity in delivery of health services to prisoners must be ensured.

17. Professional independence of prison health care personnel is essential and must be guaranteed at all times.

18. People deprived of liberty should be put at the center of prison health systems and be empowered to take charge of their own health. Prison health services, public health services and the prison administration should work closely with prisoners to design and implement more relevant and sustainable health responses.
The ICRC helps people around the world affected by armed conflict and other violence, doing everything it can to protect their lives and dignity and to relieve their suffering, often with its Red Cross and Red Crescent partners. The organization also seeks to prevent hardship by promoting and strengthening humanitarian law and championing universal humanitarian principles.

People know they can count on the ICRC to carry out a range of life-saving activities in conflict zones and to work closely with the communities there to understand and meet their needs. The organization’s experience and expertise enables it to respond quickly and effectively, without taking sides.

For more info about the conference, visit: www.apcph.icrc.org

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