



WHO

REGIONAL OFFICE FOR EUROPE



PROMOTING THE HEALTH OF YOUNG PEOPLE IN CUSTODY

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Abstract

This Consensus Statement draws attention to the principles, policies and practices which member countries agree provide the best chance to maintain the health and wellbeing of young people in custody. It includes recommended ways of helping those young people achieve a more positive, productive, satisfying and healthier lifestyle whilst they are in custody and on release.

It is written for policy-makers, governors/directors and staff in all custodial settings involving young people. It recognises the importance of collaboration between those staff and custodial services and the many other agencies which share the goal of helping these largely vulnerable, disengaged and socially excluded young people in countries throughout Europe. Indeed co-operation must cross the physical boundaries created in custodial settings, and prison health and social care staff should, with consent, have access to the previous health and social care records of young people in custody. Only by agencies and staff working together, and listening to and involving the young themselves, might the following objectives of the Statement be met:

1. To promote the physical, mental and social aspects of the health of young people in custody;
2. To help prevent the deterioration of young people's health during or because of custody;
3. To help young people in custody develop the knowledge, skills and confidence they need to enable them to adopt healthier behaviours that they can take back into the community with them.

Keywords

JUVENILE DELINQUENCY
ADOLESCENT
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Introduction and purpose

This Consensus Statement draws attention to the **principles, policies and practices** which member countries agree provide the best chance to maintain the health and wellbeing of young people in custody. It includes recommended ways of helping those young people achieve a more positive, productive and healthier life style whilst they are in custody and on release.

It is written for policy-makers, governors/directors and staff in all custodial settings involving young people. It recognizes the importance of collaboration between those staff and custodial services and the many other agencies which share the goal of helping these largely vulnerable, disengaged and socially excluded young people in countries throughout Europe. Indeed cooperation must cross the physical boundaries created in custodial settings, and prison health and social care staff should, with *consent*, have access to the previous health and social care records of young people in custody. Only by agencies and staff working together, *and listening to and involving the young themselves*, might the following **objectives** of the Statement be met.

1. To promote the physical, mental and social aspects of the health of young people in custody.
2. To help prevent the deterioration of young people's health during or because of custody.
3. To help young people in custody develop the knowledge, skills and confidence they need to enable them to adopt healthier behaviours that they can take back into the community with them.

While the purpose of this Statement is not directed to reducing re-offending, by addressing the wider health needs of these young people it will assist greatly in their rehabilitation, and thereby help reduce that risk.

Making the most of an opportunity

The prison setting is not one which should be a first choice when trying to improve an individual's health and wellbeing, as all too often it may itself be a factor leading to deterioration in health. From a health viewpoint, whenever a sanction can be imposed in the community this will be the preferred option. However, custodial sentences are a fact of life for a number of young people in each country in Europe. The aims listed above must therefore be rigorously pursued for them.

Whilst not producing a country by country analysis, this **Statement** is based on the wide range of experiences within the World Health Organization Health in Prisons Project, together with selected expert advice. It concentrates on **principles, policies and practices** which, it is felt, best underpin the objectives of all those

involved in promoting the health of youth in custody. Whilst the Statement covers a wide range of important issues, the following over-riding factors and cross cutting issues need to be emphasised.

- The importance of recruiting suitably qualified and trained staff.
- The importance of initial and continuing professional development for staff so that they continue to meet the needs of young people appropriately.
- The importance of the involvement of the young people themselves.

These issues are developed in the **Management checklist at Annex 1**.

Some definitions used in this Consensus Statement

Youth or young person:

The UN Convention on the Rights of the Child definition covers children and young people up to age 18. However, for the purpose of this Consensus Statement a broader definition is used to include the transition period from youth custody to adult custody. Young men and women up to the age of 21 are therefore included.

Custodial settings:

This includes all the custodial settings or secure accommodation used for children and young people dealt with by each Member's criminal justice system.

Health:

A state of complete physical, social and mental wellbeing, and not merely the absence of disease (WHO, 1948).

A resource for everyday life, not the object of living. It is a positive concept emphasising social and personal resources as well as physical capabilities (Ottawa Charter for Health Promotion, 1986).

Context

In order to improve the health of young people deprived of their freedom, it is vital to recognise fully the legal and other contexts within which such improvements might be made. International law provides, through the United Nations Convention on the Rights of the Child, minimum standards in respect of the rights of young people. In its preamble, it notes that the UN proclaimed that childhood is entitled to special care and assistance.

Article 3 provides that when any action is taken concerning children, the primary concern is their best interests. Specifically, **Article 24** provides that children have the right to the enjoyment of the highest attainable standard of health and to access health and medical services, and particularly primary and preventative healthcare and to health education. Further, this article encourages international cooperation to ensure this right for children. The UN General Assembly Twenty-seventh special session, held in 2002, emphasised the importance over the coming decade of promoting child health, prevention, education, protection against abuse and violence, and combating HIV/AIDS.

Domestic law in Member states also provides a context and member states report back to the UN as provided for in **Article 44**, on the measures they have adopted which give effect to the rights recognised in the Convention and the progress made.

Article 27 provides further legal underpinning for the Statement and guarantees the right for all to have an adequate standard of living.

Young people

Much is now known about the characteristics, needs and behaviour of young people in Europe and of the problems that many of them face. There is recognition too, that these problems continue to change as society has changed. In England for example: 1 in 4 young people now experience the breakdown of their parents' marriage; childhood has been extended, with young people remaining dependent and at home for far longer than ever before; only some 6% of 16 year olds leave school and become employed directly now compared with 70% as recently as 1975. Puberty starts earlier.

Young people in custody

There is, however, a marked contrast between the majority of young people and the minority who are detained in custodial settings. Among the latter the following adverse background factors predominate: poverty, social disadvantage, family dysfunction, low self-esteem, truancy, poor educational attainment. Crucially, many young people in the criminal justice system often lack support in their early life; have poor adult role models; poor personal and social skills, and have experienced physical and /or sexual abuse, and neglect. All these issues impact negatively upon their health and prospects for employment, and many suffer mental health problems and other effects of their risky behaviours. Many misuse drugs and/or alcohol or other substances, including tobacco. Many are at increased risk of sexually transmitted infections and/or parenthood at an early age, and there is a clear risk that a cycle of deprivation is established affecting the next generation. For those who are addicted to drugs, they may well have become involved with crime to pay for such habits and lifestyles.

Meeting need in custodial settings

The health needs of all young people are a priority in all societies, not least as an investment in the future generation of adults. The health needs of young people in custody are a particular priority given their greater needs and disadvantages and their lack of power and opportunity to speak for themselves. Lack of proper provision may lead to young people whose potential is wasted and who become a strain and cost both to the family and the community.

It is therefore important that the health needs of each individual young person in custody are assessed and a plan made to address them. Such needs may range from specific health care issues to the wider determinants, such as education and social skills, which impact so fundamentally on their health. As many have missed out on normal schooling, need for basic health education is likely.

Acknowledgements

The considerable amount of effort already spent in prisons across Europe helping young people in custody is acknowledged. This Statement is therefore designed to ensure that standards reflect best practice and best evidence on what works well.

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We wish in particular to acknowledge the contribution to this document of colleagues in the Department of Health in England, and the National Children's Bureau, a non-governmental organisation in England. They provided us with access to the work they are developing to create a 'National Healthy Care Standard' for children looked after by the state in England. That work has provided a model for this work.

Principles, policies and practices

Principle One

All young people, regardless of situation, should have opportunities for healthy physical, social and mental development. It is an inherent part of their human rights.

Policy to support Principle One

Progressive regimes and management should be in place wherever young people are kept in custody to support this principle.

Practices likely to support the above principle and policy

Staff must be selected, resourced and trained so that young people in their care can take full advantage of opportunities in custody.

Regimes shall be developed to enhance individual capacity in terms of health, social skills, and emotional and spiritual development.

Incentives should be created to encourage young people who, at time of admission may be apathetic and lacking in motivation, to participate in and gain from developmental opportunities.

Principle Two

Young people in custody have a right of access to good quality health services (including comprehensive healthcare, preventive services and health promotion) that are broadly equivalent to those offered in the outside community.

Policy to support Principle Two

Health provision shall be targeted to the assessed health needs and lifestyle risk factors of young people.

Staff employed by the custodial/prison service must be able to conduct their professional work within the same ethical and good practice codes as bind their colleagues in the health services in the wider community.

Practices likely to support the above principle and policy

The recruitment of a professional multi-disciplinary team of health care staff to meet the needs of young people in custody should be on the same basis as staff recruited into local health services in the wider community.

Where the services in custodial settings are not from the local health service, active steps should be taken to create professional contact on equal basis, between staff in these services.

Wherever possible, professional staff should be able to visit each other's facilities for purposes of postgraduate education, and the promotion of collaboration.

A plan of action should be drawn up and regularly reviewed to address these young people's assessed health needs.

Principle Three

Young people in custody should expect to live in a positive care environment that promotes their health, wellbeing and development.

Policy to support Principle Three

Standards and practices shall be developed in order that a young person in custody is provided with a safe, secure, caring and stimulating environment where he/she can be helped to develop and achieve his/her physical, emotional, educational and spiritual potential.

Practices likely to support the above principle and policy

Each young person in custody has a care plan which reflects the needs of the individual.

There is a whole custody approach, so that all staff who come into contact with a young person are suitably selected and trained to understand the developmental needs of adolescents and to help create a *nurturing environment* for the development of health and well being.

Principle Four

Young people in custody should be consulted and listened to concerning their health and wellbeing, both as individuals and as a group.

Policy to support Principle Four

A variety of opportunities should be created in custody, which would strengthen the feelings of personal responsibility and of empowerment within the constraints of custody. An atmosphere of participation and consultation should prevail, so that young people feel they have some influence on their lives despite the loss of freedom.

Where possible, and consistent with maintaining discipline and security, young people should have the opportunity of being involved in decision making in the institution in an atmosphere of participation and personal consultation.

Opportunities should be available in areas such as education or in developing a personal health plan, that enable a young person to have an understanding of his/her needs and responsibilities in promoting his/her health and well being.

Practices likely to support the above principle and policy

An early health assessment should be conducted in such a way (e.g. offering privacy) that the young person feels empowered to ask questions and make choices regarding findings and recommendations from the clinical staff. A listening attitude by the clinical staff is important.

Health education should be offered so that young people in custody can develop an understanding of the components of healthy living, the choices available to them, and consequent health risks and gains.

Education and social skills development should be made available as required (e.g. to learn about positive and abusive relationships, and to develop the skills and confidence to maintain positive relationships).

Staff must be appropriately trained in the use of relevant materials provided for the health education of young people in custody.

Principle Five

Young people in custodial settings should have opportunity to develop and maintain relationships with one or more suitable adults in the community to which they will return.

Policy to support Principle Five

Each young person in custody should have the choice and opportunity to make safe, caring and stable relationships for when they return to the community. Developing such relationships with the carer(s)/suitable member of the supervising staff may help to promote this.

Practices likely to support the above principle and policy

Key workers: The aim while in custody is to ensure that the young person knows that there is at least one person, ideally a personal officer, who is interested in him/her as a person, who cares about his/her health and well-being and who can help the young person to build/maintain relationships back in the community.

- Where appropriate the participation of the young person's family/parents is strongly encouraged, not just as part of preparation for resettlement, but to maintain as wide a support network for each young person as possible.
- Each young person must be able to express and have respected their own views and wishes about family contact.
- Practices should cover the following areas of need which all young people have:
 - giving and receiving nurture;
 - care plans that reflect the need for stability and an opportunity to make significant relationships;
 - fostering of social relationships to promote a sense of self, attachment, belonging and identity.

Principle Six

Young people in custody should have their cultural beliefs and identity respected.

Policy to support Principle Six

Young people should be supported in building their own positive self-perceptions and self-esteem by respecting who they are in terms of culture and identity. All within the custodial setting should be encouraged to value diversity in culture, race and religion.

Practices likely to support the above principle and policy

- Staff should have the time to discuss with individuals what they hold to be important to them from their cultural and ethnic background.
- Every opportunity should be taken to promote a positive understanding about cultural differences and to indicate how these differences can strengthen communities and countries in the nature of the world of today.
- Within the democratic framework of the institution, agreements should be reached for the celebration of cultural differences, in order to promote the understanding and enjoyment of these differences.

Principle Seven

Young people in custodial settings should have the right to education, training and healthy lifestyle skills and work skills opportunities.

Policy to support Principle Seven

The broad vision or stated objectives of the institution holding young people in custody should make it clear that personal development, self improvement and better preparation for a productive and crime-free life once back in the community is the overriding emphasis of plans and programmes.

Practices likely to support the above principle and policy

Custodial settings shall offer each young person:

- Opportunities to develop his/her personal, social and life skills to understand his/her emotions and behaviour, and those of others.
- Opportunities to explore and develop learning potential, discover personal strengths and be proud of learning achievements.
- A permanent record of achievement to assist in resettlement.
- Opportunities for sport, culture and arts activities that foster individual creativity.

Principle Eight

Young people in custody have a right to privacy.

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Policy to support Principle Eight

Protocols should be developed for:

- Sharing information on each young person in custody in a way that preserves their privacy, confidentiality, and is accessible to appropriate personal officers during imprisonment and resettlement.
- Ensuring each young person knows what information is held and how it is used.
- Ensuring each young person in custody has appropriate personal and private space in his or her living conditions.

Practices likely to support the above principle and policy

- Staff should normally ensure a young person in custody knows when a confidential meeting or conference is going to take place, what is to be discussed, and that his/her own views can be expressed and taken into account.
- Personal and social education should ensure that:
 - A young person knows what they are able to keep private and confidential; and
 - He/she knows about sources of help and support and will be able to access them.

Annex 1

A CHECKLIST FOR GOVERNORS AND SENIOR MANAGEMENT

1. A vision statement

Is there a vision statement describing the main aims of the institution?

One of the main recommendations in this Consensus Statement is that all institutions where young people are kept in custody should create an encouraging and developmental environment. This will need all staff to be aware and suitably trained. A “vision statement” which is written in clear language, easily available and which is given to all new staff and to the young people on admission can help create the necessary atmosphere of the place as a whole.

2. Selection of staff

All staff who are appointed to work with young people must be vetted for suitability, including their training and empathy towards young people in custody.

Selection criteria and the requirements for vetting as regards past history and other relevant aspects should be made clear in advertising for staff.

3. Training

Is there a recognized continuing education programme which includes opportunities to be with other people outside the prison service who are undertaking similar duties, for example teachers and youth workers?

While staff who are employed will have received some training in normal developmental needs of young people, they will need regular up-dating and will constantly need to be aware of the “normal” as well as the special needs of those young people admitted to custody. Experience and confidence will be improved if the staff meet others who are undertaking similar work or whose duties can influence their own work.

4. Rewards/sanctions

Is there a clear system for the allocation of appreciation and privileges, which is not punishment driven? Is the desired effect of sanctions known and clearly outlined in the operational policy document?

The maintenance of discipline and good order requires a clear policy of rewards and sanctions. However, this need to be age appropriate and the importance of continuing some support from staff during any punishment should be stressed. Segregation should be avoided if at all possible.

5. Reception/induction

Are reception policies and procedures clearly established so as to stress the critical importance of this phase? Is there something in writing for newly admitted young people to have with them and keep? This should be an outline of the ethos of the place, of what is expected of them and why and especially of how they can at any time get help and advice.

Reception remains one of the most crucial of the stages in the transition between community and custody. As well as clear policies and practices, it may require particular skills from selected staff. There must be obvious organization and visibly controlled by staff. The big emphasis must be on the assessment of vulnerability and of personal worries and anxieties which if not dealt with would considerably hamper the young person's ability to cope with their situation.

6. Searching/other invasive procedures

Routines should be established which at all times recognize the sensitivities of the young person and the highly stressful situation they find themselves in. Adequate time should be available. Written protocols should be prepared and readily available to staff.

Routines should be appropriate for this age group. Whatever is necessary should be undertaken in a kindly manner and with clear indication of what is to be done and why. Showering should be in separate cubicles, and although closely supervised, with due respect to possible embarrassment. Strip searching should be an exceptional measure and should be undertaken with especial care and sensitivity. Drug testing should also be exceptional and should be undertaken as part of a full medical examination.

7. Encouraging development

Is there an agreed emphasis on a generally encouraging atmosphere?

In trying to ensure that young people in custody gain fully from the opportunities available to them, staff should feel free to include the help of families, youth club leaders, activity organizers, career guidance and those who can provide arts and sports activities.

8. Support and encouragement

Is it clear to all those in the institution that the staff are there to listen, help and encourage young people?

The advantages from having a listener service, to help in times of stress, and other supportive peer group activities, are well known. They should be available in every custodial setting for young people. The value of regular personal assessments of progress made by young people as a way of giving encouragement should be maintained.

9. Support for staff

Are the staff aware of how they can get the support they need?

To be at the receiving end of what been described as the “woodpecker” effect of constant questions from anxious young people requires special people if they are to cope. But they need to feel they are doing a worthwhile and difficult job. As well as selection and further training, staff require the support which they can get from regular staff meetings at which they can raise any difficulties they are having with individuals. Line managers are very important; personal experience of working with young people in custody is necessary so that they appreciate the particular stresses to which staff are exposed.



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