

IN THE SPOTLIGHT

# BREAKING FREE OF ADDICTION

The EU is assisting five Central Asian countries in developing effective policies for the treatment and prevention of drug addiction. Services for drug-dependent prisoners have a key role to play here. Poland is setting high standards and recently hosted a study visit by a delegation from Central Asia.

**Text** Bernd Kubisch

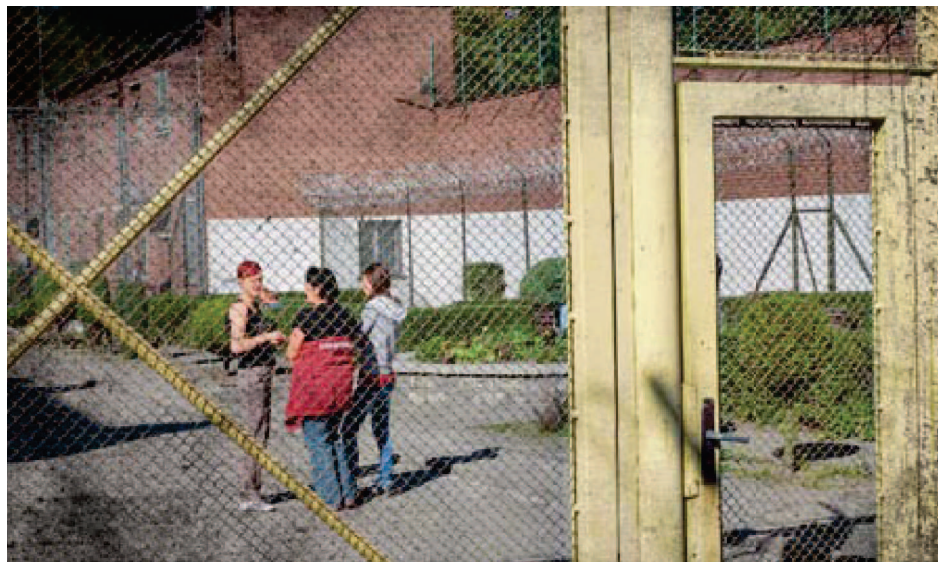


In a small reception area in Lubliniec women's prison in Poland, Director Lidia Olejnik has arranged for tea, coffee and cakes to be served. Today, she and her staff are preparing to welcome a 15-person delegation from Kyrgyzstan, Kazakhstan, Turkmenistan, Tajikistan and Uzbekistan. The visitors are keen to see how Lubliniec and other Polish prisons deal with drug-dependent prisoners. Poland established treatment facilities for drug- and alcohol-dependent inmates within its prison service some time ago, and its system now serves as a model for a number of former Soviet republics.

'This study visit forms part of the Central Asia Drug Action Programme (CADAP), which is funded by the EU and assists the Central Asian countries in implementing policies for the treatment and prevention of drug addiction,' explains Ingo Ilja Michels from GIZ, former Head of the Office of the Federal Government Drug Commissioner and now Project Leader for Phase 5 of the CADAP programme. 'During their visit, the delegates will be visiting six Polish prisons. The aim is to give them an insight into modern approaches to treating addictions in a prison setting so that they can implement these systems, as far as possible, back in their own countries – not only in prisons but also in public health facilities.'

The Lubliniec prison currently has 226 inmates, all of them women. At present, 63 are placed in the Drug Dependency Unit, where they are attempting to break their addictions – with robust support from therapists, medical staff and social workers. There's one major difference between Lubliniec and many prisons in other countries: treatment and therapy are delivered inside, not outside the prison as an integrated and coordinated service package.

Activities aimed at building the women's confidence and equipping them with practical skills for life after their release are an important component of the programme. 'As a reward for good behaviour, inmates who are sufficiently well-motivated can do voluntary work for a few hours a week at a nearby care home or other social facility, helping to look after the elderly or children with disabilities, for example. In this way, they can give something back to society,' says Lidia Olejnik. The arts and theatre also



Women in Lubliniec prison have the chance of a drug-free life.

play a major role: the prison has set up a theatre group that performs in schools and then discusses the dangers of drugs with the audience. 'We recently performed in front of 1,800 people in Częstochowa,' says a 27-year-old inmate who is about to successfully complete her drug treatment programme. 'That was an amazing feeling – really empowering.' The Polish prison service's leading international role in drug treatment for prisoners is largely due to the efforts of its former director, the sociologist, criminologist and prison reformer Paweł

Moczydłowski. As an advisor to many Polish ministers and presidents, including Lech Wałęsa, he successfully advanced his concept of prisoners' rights and decent prison conditions. Moczydłowski has been involved with the EU programme since 2004, becoming Senior Consultant within the Treatment Methodologies (TREAT) component of CADAP in 2009. Today, he joins the Central Asian visitors for coffee in Lubliniec prison – and engages them in animated conversation. Moczydłowski is well aware of the problems facing their countries, »

## CENTRAL ASIA DRUG ACTION PROGRAMME

### AT A GLANCE

The Central Asia Drug Action Programme (CADAP) is a key pillar of the Action Plan on Drugs between the EU and the five Central Asian states. The number of drug users in the Central Asian countries has risen dramatically, and infectious diseases and deaths among drug users are increasing. The EU is supporting these countries' efforts to reduce drug use. Coherent action is needed, along with effective prevention and better treatment methods for addicts. The programme is designed to ease the difficult transition from the punitive policies which date back to the Soviet era to a modern drug policy in line with EU standards. Phase 5 of the programme, now under way, began in early 2010 and will run until July 2013. The budget for this phase of the programme amounts to EUR 4.9 million. GIZ has now taken over the management of the programme on behalf of the German Government, with funding from the EU. GIZ is responsible for coordination and networking among all the stakeholders, including the United Nations Office on Drugs and Crime (UNODC), the World Health Organization (WHO) and various non-governmental organisations. The programme's remit also includes analysing and evaluating drug policy structures and mechanisms in all five Central Asian countries. The Centre for Interdisciplinary Addiction Research (ZIS) at the University of Hamburg is responsible for facilitating the introduction of effective treatment methodologies for addicts, while Czech partners lead on data collection and analysis. The National Bureau for Drug Prevention in Poland deals with information and prevention campaigns.

👉 [www.cadap.eu](http://www.cadap.eu)

having initiated a number of reforms there as well. 'Respect for human dignity and support to enable prisoners to overcome their addictions and reintegrate into society are key tasks for the prison system,' Paweł Moczydłowski emphasises and points out that decent treatment of prisoners brings real benefits for the in-

stitutions themselves: 'There hasn't been a single prison riot in Poland for 20 years.'

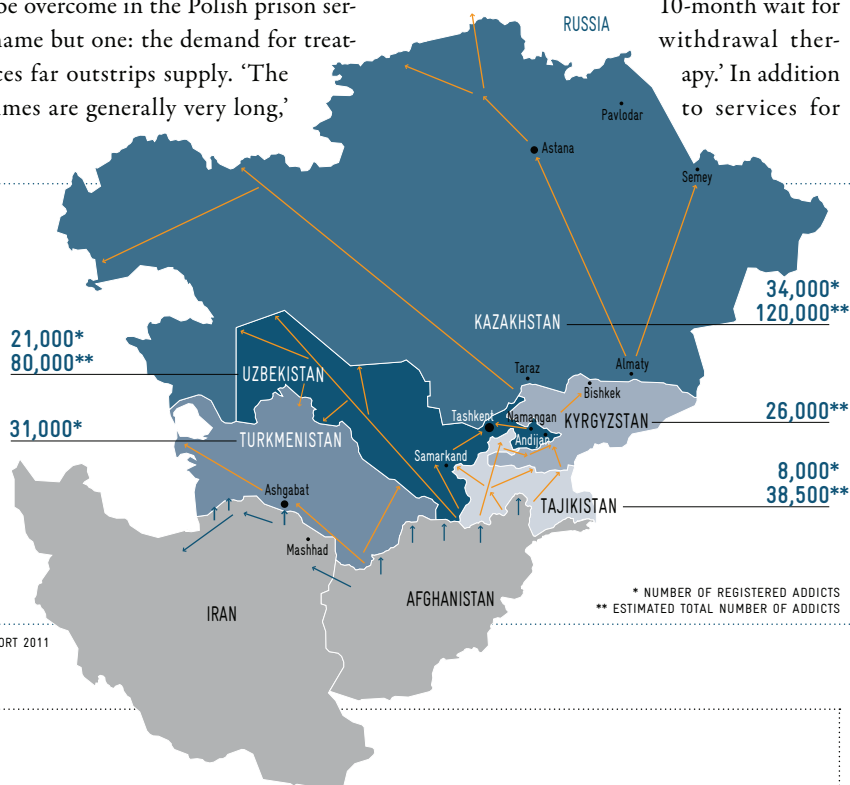
That does not mean that there are no challenges to be overcome in the Polish prison service. To name but one: the demand for treatment places far outstrips supply. 'The waiting times are generally very long,'

says Elzbieta Staud regretfully. She is a psychologist and therapist at the Podgórze men's prison in Kraków. 'In our facility, inmates have a 10-month wait for withdrawal therapy.' In addition to services for

## THE MAJOR HEROIN TRAFFICKING ROUTES THROUGH CENTRAL ASIA

The major heroin trafficking routes from Afghanistan to Russia and Western Europe pass through Central Asia. Along these routes, there has been a sharp increase in drug use and its associated problems over the past two decades.

SOURCES: CENTRAL ASIA DRUG ACTION PROGRAMME, ANNUAL REPORT 2011; UNODC, WORLD DRUG REPORT 2011



## » INTERVIEW

### 'MORE TIME AND MONEY NEEDED'



**Paweł Moczydłowski** hosted the delegation of Central Asian experts during their visit to Poland.

The Drug Action Programme was launched a full 10 years ago. Why is it taking so long? Since the collapse of the Soviet Union, the five Central Asian countries have faced major challenges, especially in relation to their new responsibilities in the field of drug control and treatment and the prison system. In the past, prisons were simply massive barrack-like buildings where people were locked away, and to some extent, that is still the case. There is a widespread lack of understanding of democracy and the separation of powers, as well as a massive drug problem. These countries are major hubs

for drug trafficking, especially from Afghanistan. There is also a shortage of prevention and treatment facilities. The EU cannot leave the Central Asian countries to deal with these problems on their own. A great deal of investment will be needed – and by that, I mean both time and money.

#### Do you see any progress being made?

Compared with the situation in the past, I do see some progress in all five countries, but mainly in Kyrgyzstan. Things are moving more slowly in the other countries. With support from the EU, Turkmenistan not only has the highest number of treatment units in its prison system; it is also the only country participating in the programme to have set up a clean zone that provides separate accommodation for prisoners undergoing treatment, where they are also given counselling and help with re-

integration. New facilities are planned for prisons in Uzbekistan and Kazakhstan.

#### Where are there still problems?

Progress is still too slow. Take the example of Tajikistan: here, there are plans to set up new treatment units in prisons. Years ago, the programme provided support to open a unit in the prison hospital in Dushanbe, which was to be equipped to run drug treatment programmes. Firm commitments were made, and yet the unit is still not up and running. There is also a shortage of staff with the necessary skills. Old and obsolete structures and extreme mistrust are ongoing problems in many places. And of course, the demand for treatment from prisoners themselves is considerable, and there is a massive shortfall in available places.



Staff at the women's prison in Lubliniec are skilled in the management of drug-dependent prisoners.



The Central Asian visitors were able to gain an insight into the systems in place in six Polish prisons.

## HIV/AIDS AND HEPATITIS PREVALENCE AMONG HEROIN AND OPIUM ADDICTS IN CENTRAL ASIA

Most heroin and opium addicts in Central Asia are injecting drug users. Often, several people will share a needle, resulting in a high risk of infection with diseases such as HIV/AIDS and hepatitis. Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan are now running programmes that distribute sterile needles to drug users. Only Kyrgyzstan offers a methadone treatment programme in three prisons, although this could be effective in curbing the spread of HIV.



	Number of registered addicts who are injecting	HIV infection and drug dependency
KAZAKHSTAN	91.7%	67.9%*
KYRGYZSTAN	96.1%	62.9%*
TAJIKISTAN	57.4%	55.2%**
TURKMENISTAN	no data	no data
UZBEKISTAN	64.0%	41.1%**

\* Heroin/opium addicts as a percentage of HIV-positive persons in the country; \*\* Percentage of HIV-positive persons who are heroin/opium addicts  
SOURCE: CENTRAL ASIA DRUG ACTION PROGRAMME

drug users, the Podgórze prison also offers 49 treatment places for alcohol-dependent prisoners. The treatment provided for this target group has also an important role to play in Poland's prison system: in 2010, a total of 1,668 drug users and 4,722 alcoholics underwent treatment while in prison. Some inmates who have managed to overcome their addictions have volunteered to talk to the guests from Central Asia in the visitors' area in Służewiec prison in Warsaw. 'Before, I was too scared to admit to my dependency and my weaknesses, but not anymore,' says 33-year-old Krzysztof. Sitting beside him is Jarek, who is in his mid-30s. He has been on day release for the last seven months and has extended his six-month drug addiction treatment to eight months, the maximum possible. 'I had very bad problems with addiction,' says Jarek. 'But now I've been clean for quite a few months.'

Jumanova Saodatkhon from the Uzbek Government's Centre on Drug Control is impressed by the discussions with the therapy groups and the inmates themselves, who benefit from the system of day release. 'I am very surprised by the openness of the debate in Poland.

There's a lot that we can learn.' Kalybek Kachkynaliyev from Kyrgyzstan agrees, but adds: 'We have a long way to go before our prisons and drug treatment services reach the standards in place in Poland and other EU countries.' Even so, compared with the other Central Asian countries, Kyrgyzstan is well ahead in terms of the quality of drug treatment provided in its prisons. 'Kyrgyzstan now has eight units modelled on the Polish system,' says Ingo Ilja Michels. 'They were set up with support from the EU programme.' Kazakhstan has two treatment centres of this kind, while Turkmenistan, Tajikistan and Uzbekistan each have one. The prisoners are very happy with the new treatment offers, says Michels, based on his numerous discussions with inmates: 'It's because they are treated decently. They are able to deal with their addiction because they are not exposed to pressure from criminal dealers, and because they have better conditions than the other prisoners.' In the treatment units, around a dozen inmates share a dormitory, whereas normally, 50 – and sometimes up to 100 – prisoners are accommodated in a single barrack, where there is tremendous pressure from drug dealers. 'The

problem is that after the prisoner has completed the treatment, which takes a few weeks, they are sent back to their old prison surroundings if they still have some time to serve,' explains Ingo Ilja Michels. Methadone treatment is also needed. But there are some rays of light, says Marcus Martens from the Centre for Interdisciplinary Addiction Research (ZIS) at the University of Hamburg, which is also involved in the programme. 'In Uzbekistan, another rehabilitation centre is opening in a prison, thanks to the support from the programme. In Kazakhstan, there are plans to open a unit in a women's prison in the Karaganda region, and in Turkmenistan, we were able to deliver training for a rehabilitation unit in a prison.' It takes time to make progress in the Central Asian states. 'That's why study visits like this one in Poland are so important,' Jumanova Saodatkhon emphasises at the end of the visit. ■

### ► Contact

Julia Jesson > [julia.jesson@giz.de](mailto:julia.jesson@giz.de)