The Public Health Crisis Behind Bars: Reflections on Colombian Prisons

Victor Hugo Piñeros-Baez*
Faculty of Medicine, Doctorate in Public Health, The National University of Colombia, Bogota, Colombia

*Corresponding Author: Victor Hugo Piñeros-Baez, Faculty of Medicine, Doctorate in Public Health, The National University of Colombia, Bogota, Colombia.

Received: September 18, 2020; Published: February 11, 2021

Abstract

In Colombia and Latin America, prisons tend to behave as pathogenic, unjust, unequal and unsustainable societies. Hence, life in prison passes between precariousness, injustice and abandonment.

This situation is not circumstantial, on the contrary, it is the product of the convergence of various structural problems associated with state ineffectiveness, corruption, social apathy, the dysfunctions of justice systems, and the absence of a political agenda consistent with its realities and challenges. At this level, the prison suffers from a double paradox: firstly, society demands to fulfill its function of re-socializing the prisoners and secondly, prison is weakened and marginalized, contradiction that triggers its crisis.

This multidimensional crisis fosters disease, configures harmful environments and institutionalizes unhealthy practices that threaten health and life. In fact, the crisis limits the deployment of the functions and purposes of the penalty, violates human rights, encourages destructive processes in the lifestyles of the prison population and can transfer of health risks to families, prison guards, communities and society in general.

Keywords: Colombia; Prisons; Prisoners; Public Health; Latin America; Risk Factors

Abbreviations

INPEC: The National Penitentiary and Prison Institute of Colombia; CONPES: The National Council of Economic and Social Policy of Colombia

Introduction

During the night of 21 March 2020 and amid a growing tension generated by the spread of COVID-19, serious events occurred in 12 prisons in the country caused by the rioting of inmates, who called for better conditions of confinement and the implementation of measures to minimize the potential risks and effects of the pandemic. As a result of this event, 23 inmates lost their lives, while 83 were injured. In addition, 7 guards had injuries and damage to the prison infrastructure was recorded [1]. After controlling the situation, the national government simply described it as a massive and criminal escape attempt, denying in passing, the existence of health problems that led to the uprising [2].

In passing, to deal with this situation, the National Penitentiary and Prison Institute (INPEC), proceeded without waiting for the precautionary measures, to transfer several inmates indicated to lead the riots, causing the spread of COVID-19 in several centers of seclusion.
Derived from this chain of errors, a health emergency was caused that put the health and life of the entire prison community at risk, once again showing the profound deficiencies in public health.

Undoubtedly, this chronicle illustrates the reality that the Colombian prison lives, a problematic reality that seems distant from the social spectrum. In fact, this crisis, which is organic, is the result of the contradictions between the principles of the social rule of law and the socio-legal model that favors the application of retributive justice.

In this scenario, the prison is committed to behaving as a pathogenic, unfair, unequal and unsustainable society, hence the life inside it passes between precariousness, indifference and abandonment. Added to this, the prison constitutes a social field where multiple situations of daily life happen and converge. Therefore, its crisis has the potential to undermine the life, health and human dignity not only of people deprived of liberty, but also of children who live with their mothers, prison officers and staff, families who visit to detainees and visitors who provide socio-legal support.

That is why society should be concerned about its prisons, since, despite its apathy and indolence, in any case, it will directly receive the effects of the crisis. Moreover, by not worrying about the way health takes place in prison, it will make possible the configuration of scenarios where intramural health problems can be transferred to the communities with broad repercussions on their health and well-being.

**Discussion**

**Crime and punishment**

In general terms, prisons are public institutions whose social function is linked to incarceration and treatment of the criminal body. However, the hegemonic model of society favors the custody and control of the detainee over their resocialization. Colombian prisons are no stranger to this reality. In the country there are more than 181,844 persons in custody [4]. The principal crimes are homicide, theft or robbery, criminal conspiracy, and the production, trafficking or distribution of drugs. Despite this criminality, the prison policy does not assume these crimes as public health problems. The priority is to imprison and apply the penalty not the health of the detainees and the victims.

**Prison policy in Colombia**

In Colombia, penitentiary and prison policy has focused on increasing the physical space of imprisonment, neglecting other series of strategic investments such as strengthening the resocialization processes and improving institutional management. Prison policies are unaware that prisons are social systems with close ties to the outside world, since there are outgoing and incoming flows of detainees, not counting prison officers working in intramural settings and regular visitors. Between 2002 and 2015, (91.09%) of economics resources was allocated to investment in infrastructure and construction of new prisons, (6.94%) in equipment and provision, (1.09%) in management and information systems, (0.6%) in institutional strengthening and (0.27%) in institutional strengthening [5]. These investments were unable to achieve a significant change in prison conditions and in politics social applicable to persons deprived of liberty.

**Destructive processes and life in prison**

Life in prison runs between precariousness, overcrowding and lack of vitality. One of the main problems is unsanitary conditions and the degradation of the intramural habitat, associated with the limited or no maintenance of the penitentiary infrastructure. Added to this is the lack of sanitary facilities, inadequate waste management and the presence of pests and vectors. Added to this are the difficulties in ensuring the availability and access to drinking water. In the same way, this population has problems with the provision of food service,
since it is not carried out in adequate hygiene conditions and does not meet nutritional requirements. Likewise, the population deprived of liberty tends to be sedentary, derived from the limited supply of spaces for recreation, physical activity, and sports.

The overcrowding situation is the circumstance that favors the configuration of unhealthy lifestyles, since a number of people gather without taking into account their needs and requirements of the physical, physiological, mental, psychological and social order.

The health and health care

In Colombia, the burden of disease in prison is related to (62.9%) with non-communicable diseases, (20.8%) with injuries, (14.3%) with communicable diseases and nutritional conditions, and (2%) with maternal-perinatal conditions [6]. Plainly, vulnerability increases because health services in prison are devoid of the formalities and guarantees given to the free population, only focus on individual health services. However, the health services in prison do not meet the needs of the population deprived of liberty, in fact, medical care is limited, imposes barriers and its resolution capacity is low. For this reason, Colombian prisoners often have to go to the Constitutional Court to demand their right to health.

Conclusion

Health in prison is a contemporary problem of public health, not only because of the interest that arouses the deterioration of the health and quality of life of people deprived of liberty, but also the violation of their human rights and the risks to public health that can emerge from intramural spaces.

Certainly, the public health crisis in the Colombian prison system is the result of the contradictions between the principles of the social rule of law and the socio-legal model that favors the application of retributive justice. This paradox is expressed: first, when State’s apparent concern to promote and guarantee the fundamental rights of all citizens, and secondly, when the State is unable to achieve the humanization of life in prison.

Conflict of Interest

The author declare that this paper was written in the absence of any commercial or financial relationship that could be construed as a potential conflict of interest.

Bibliography


Volume 3 Issue 3 March 2021
©All rights reserved by Victor Hugo Piñeros-Baez