COMMUNITY BASED HEALTH EMPOWERMENT IN PLACES OF DETENTION FOR DETAINEES AND GUARDS - DECISION MAKING FLOW CHART

Objective

To ensure that preventive/proactive health awareness is raised among detainees as well as basic first response to wounded, ill and acutely sick persons in places of detention in order that they receive timely, effective and humane care prior to any need for referred care.

Scope of Community Based Heath in Detention contexts

To strengthen the confidence and the skills of detainee Health responders to promote healthier living and intervene during emergency situations in places of detention.

Selection of the participants

- Main characteristics:
 - Willingness to become Community Health volunteer responder, to promote health and safety amongst fellow detainees and assist wounded and acutely sick people on a voluntary basis.
 - Have a history of behaviour inside the place of detention which would not contravene the fundamental principles.
 - Detainees imprisoned on charge of link with an armed conflict or other situation of violence should be considered as potential Community Health volunteers.
 - Acceptance of the detainee volunteer by the other detainees and the guards;
- Repartition within the place of detention
 - The number and the location of the Community Health volunteers should ensure timely response to an emergency once it is known.

Note:

Health professionals should be skilled in First Aid.

Mobilisation of the Community Health volunteer detainees

- Volunteers should be active within the place of detention carrying out health, hygiene, violence prevention and safety activities with detainees based on a community assessment of the detention centre/prison linked to and guided by Detention/Prison Nurses.
- In cooperation with Detention Centre management, guards and other detainees, agree a contingency/ emergency plan, defining the procedures and the actions to be implemented in case of an emergency (incl. mass casualty situation).
- All activities of Community Health Volunteers must be free of charge.

Corresponding resources

- CBHFA in Prisons/Detention training courses should be ongoing so that replacement detainee/prisoner volunteers can be achieved to replace those who are transferred or released.
- Community Health responders receive first aid training within module 4 of the programme. Refresher courses must be provided at 2 year intervals by certified trainers of First Aid.
- Have a Detention Community Health Action Committee involving the Detention area Officer in Charge, Representative of Guards, Health care, prison education (where possible) and representative of national Red Cross/Red Crescent Society/ICRC/IFRC. The purpose of this is to drive Detention Health promotion and emergency response activities.
- The primary function of CBHFA in Prisons/Detention volunteers is to promote health amongst detainees within the prison/detention community.
 - Transport the detainee who appears acutely ill or injured to the First Aid post or/and the healthcare centre (e.g. stretchers);
 - Provide basic supportive care based on the presenting signs and symptoms. In cases of injuries, control bleeding, to cover wounds and burns (e.g. bandages and compresses). Keep warm and summon trained assistance.

The quantity of materials and equipment depends on:

- the needs (size of the detention place, number of detainees and Community Health volunteers, the types of health risks and potential for emergency situations.
- the replenishment frequency (based on health and safety needs, types of wounded and acutely sick persons assisted during a certain period of time)

Risks and mitigation

In case a **National Red Cross or Red Crescent Society** (NS) would like to implement Community Based Health in Detention empowerment project or is asked by the public authorities to do it, it is recommended that the NS makes contact, where relevant through the Federation, with the heads of the ICRC Deprived of Liberty unit, and Health in Detention program in Geneva.

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Decision making flow chart

Some aspects need to be taken into consideration in order:

- to avoid the risk that providing CBHFA in Detention does more harm than good
- to ensure that the most relevant interventions possible are offered in the context

The following flow chart aims to offer guidance in decision making when considering whether to initiate the programme in a new place of detention, a new part of a place of detention, a new type of detention, or in a new geographical context.

