

# **DRUGS AND PRISONS IN PORTUGAL**

## **Synopsis and Technical Appendix of a Research**

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## Synopsis

The concept of drugs circulating and being trafficked and consumed in prison just as in the outside world is in the first instance not only strange, but it also tends to go against our commonsense notions. Do we not have the image of prison establishments as being fortresses, closed institutions, impenetrable by the outside world, where surveillance is a constant factor? How can illicit business be conducted when there is permanent control over the lives of the inmates and no privacy at all?

When we look closer, however, these ideas start to vanish. Just as in the free world, drug circulation in prisons is a reality in all developed countries, independently of their penal systems and legal frameworks.

In fact, these fortresses are much more permeable than they appear to be. There are daily and permanent contacts established with the prison world by the suppliers of goods and services – e.g. meals, maintenance, education, training, health, medicines and other pharmaceutical and clinical products. Visitors are another source of almost daily interaction between prisons and the outside world, and so are the prison staff – e.g. administrative, health and rehabilitation technicians, surveillance and maintenance personnel. Last but not least, a specific group of inmates contacts the free world almost daily thanks to its special regime. These regular exchanges are the weak links, virtually unpreventable, by an institution that seems invulnerable and impenetrable.

Other factors explain, however, this permeability to drug trafficking and consumption in the prison system. The reasons that make drugs a highly profitable business opportunity – i.e. their illicitness and the high returns of their trade – also apply in the prison environment and are even taken to a higher and more serious level. Our major research aim is to assess and understand the prevalence and characteristics of the drug issue in Portuguese prisons.

In this synopsis we shall detail the main results and conclusions of the investigation, synthesizing the five aspects that correspond to the fundamental questions of our research:

1. **What are the kinds of crimes** committed by those who enter the Portuguese prison establishments and what is their relationship with drugs?
2. **What is the social profile** of those who come to the prison establishments? Who are the drug users and what kind of substances do they take? What are their drug abuse trajectories, what relationship can be established between drug trafficking and circulation, consumption and criminal acts? What kind of health problems do they carry?
3. **What are the drug abuse practices** inside the prison establishments? Do inmates continue to take the same substances as before? And what are the prevailing drug abuse practices and usage? What kind of risks do those practices entail?
4. **What do the inmates think** of life in the prison establishments, what are they mostly worried about? How do they view drug abuse and addiction, what drug-related measures do they deem necessary to be implemented?
5. **What do the wardens of the prison establishments think** about living conditions in prisons, what are they mostly worried about? How do they view drug abuse and addiction? What drug-related measures do they deem necessary to be implemented?

We shall also endeavour to synthesize some comparative results with related national and international studies.

## 1. Drug-related crimes prevail

The first relevant finding of our research concern the fact that the drug issue is strongly correlated to detention. Indeed, 73% of the inmates in Portuguese prisons were arrested for crimes directly or indirectly related to drugs. We can thus say that drugs, and all that is related to their trafficking and abuse, dominate the prison scene.

Secondly, those who are detained for crimes of drug abuse, and trafficking and abuse, represent in the prison environment a larger number than those specifically arrested for trafficking only.

Thirdly, criminal relapse is related to the drug issue, and those who relapse are more involved in drug-related crimes than those who do not; those who relapse also declare themselves to be heavier users than those who have been arrested for the first time.

On closer observation:

1. There are two fundamental reasons for detention for drug-related offences. Either trafficking-related crimes were committed, as a means to obtaining high income derived from the illicitness of trafficking, or crimes were committed to obtain financial resources to feed drug addiction.
2. Research results clearly lead to the conclusion that the latter – **those who have committed crimes to feed addictions** – represent the majority of those who are detained for drug-related crimes. In fact, if we take the total number of crimes, i.e. as trafficking, trafficking and abuse and abuse, the sum of the last two is always higher than the number of detentions for trafficking only. Almost half of those detained for trafficking (47,4%) admitted to having used some kind of drugs in their lives, whereas, 94,9% of those detained for trafficking and abuse had used drugs before.
3. As for those who relapsed, it is clear that those who have been in prison more than once are also those who commit more drug-related crimes and who use drugs more frequently. The logic of the delinquency trajectory seems to assume a specific configuration, as it is closely

associated with the abuse and addiction trajectories. But it may also be associated with keeping a lifestyle and obtaining income, the meanders of which are already known, and which pose as more attractive opportunities than the possibly available alternatives. As we shall demonstrate, this population has scarce school qualifications and professional skills, being thus strongly conditioned in obtaining resources for better social integration.

Let us consider the figures supporting these first findings:

**Of the total number of inmates, 72,9%** are detained for crimes directly or indirectly related to drugs (Chart no. 1):

- **50,3%** (trafficking, trafficking and abuse, abuse);
- **22,6%** (robbery, theft, etc. to obtain money for drug abuse).

**Out of the total number of crimes** that caused detention, **41,5%** are related to trafficking, trafficking and abuse, or just abuse (Chart no. 2). The sum of the latter two (**22,3%**) represents the relative majority of crimes. Please note that the total number of crimes is higher than the total number of inmates, as a person may have been detained for more than one crime.

**Out of the subset of inmates detained for trafficking, 47,4%** had already used drugs (Chart no. 3). **Out of the subset of inmates detained for trafficking and abuse, 94,9%** have admitted to **also having taken drugs sometime in their lives.**

**Out of the subset of inmates who relapsed into crime** (38% of the total number of inmates), **80,3%** are detained for drug-related crimes, whereas in the **subset of those who have been arrested for the first time**, that percentage is **68%** (Chart no. 4).

In what concerns their penal situation, **72,3%** of the total of inmates have been **convicted** and **27,4%** are **in preventive custody**. The **average detention time** is **29,6 months**, **8,7 months** for those **in preventive custody** and **37,7 months** for the **convicted inmates** (Chart no. 5).

## 2. The vast majority of those who have entered the prison system in the last few years had already used drugs and committed drug-related crimes

Those who enter the prison system are mainly those who already had drug-abuse practices and who have started those practices very early in their lives. Indeed, 65,4% of the inquired inmates had already used drugs sometime in their lives. In that subset the habit of consuming hard and extremely addictive drugs prevails. The indicated values for drug abuse are clearly higher than those for the total population of Portugal.

It is interesting to notice the increased visibility and concern that the issue of drugs and prison has acquired in the last decade. As we conclude from our research, out of the total number of inmates who have committed drug-related crimes, 97,5% have been in prison for 8 or less years. Let us now take a closer look at the social profile of the detained population.

From the research results we identify a relatively clear **predominant profile** of those arriving at the prison establishments. As the figures below indicate, this population consists mainly of young males, mostly residing in the extended Lisbon and Oporto Metropolitan Areas. Women are a small inexpressive group and are largely less young than men (37 years old against 33 years old on average). Low school education predominates, the illiteracy rate (never attended school and cannot read or write) is also high, especially for women. Although the majority were employed before detention (67,7%), those unemployed (15,8%) represent a higher figure than the country's unemployment rate (3,9%, in the 1<sup>st</sup> quarter 2001).

- **89%** of inmates are **men** (Chart no. 6) and **young, average age is 34 years** (Chart no. 7).
- **56,6%** have had up to **6 years schooling**. Women have a larger representation (26,9%) in the subset of those who never attended school (Chart no. 8). There is also a high **illiteracy rate (7,2%)**, more expressive among women (16,9%).



The most majority of inmates performed previously professional activities in sectors demanding little qualifications, involving manual labour and commerce and implying low income.

We also concluded that **the younger inmates have lower schooling levels than young people in the same age groups amongst the resident population.** This is noteworthy, since the contrast between schooling levels is not as marked when we compare the older inmates to the resident population in the same age group. **The growth of the drug issue in the outside world has introduced a subset of mutations that came to bear weight upon the specific type of population that arrives at the prison establishments.**

**65,4% of the total number of inmates admitted to having used drugs sometime in their lives (Chart no. 9):**

- In this subset, the vast majority of inmates is young male (Charts nos. 10 and 11). In the group aged 16-25, **77,1%** of the inmates have used drugs sometime in their lives; the percentage is **74,9%** in the group aged 26-35; and **60,5%** in the 36-45 age bracket.
- **46,8% of the inmates that have sometime in their lives used drugs, drug abuse first started between the ages of 15 and 19, but 26,1% started between the ages of 10 and 14 (Chart no. 12).** The average age for initiating drug abuse is 18 years old.

These values are always higher than the estimated values for the same age groups amongst the general population.

Indeed, as we can conclude from our research, it is possible to establish a set of connections or significant events: the high poverty rate amongst the Portuguese population, the low family incomes, the low schooling level, the difficult integration into the work force, the employment opportunities for the young arising in low-qualification sectors and therefore originating hard and ill-remunerated jobs, the contact with the drug world, the beginning of addictions and, later, the pursuit of delinquent activities to feed those addictions.

Knowing the type of substances used before imprisonment allows a better evaluation of later behaviours. Amongst those who admitted to having taken drugs at least once in their lives, virtually all mentioned *cannabis* and the large majority also admitted to having taken highly addictive drugs such as *heroin* and *cocaine*.

Let us look at the numbers that underlie the aforesaid statements:

### **Drug abuse by substance once in the lifetime**

**Amongst the total number of inmates**, the following substances were used (Table no. 1):

- **56%** of the total of inmates acknowledged having already taken *cannabis*;
- **46%** of the total of inmates acknowledged having already taken *heroin*;
- **47%** of the total of inmates acknowledged having already taken *cocaine*.

**In the subset of the 65,4% of the inmates who acknowledged having taken drugs at least once in their lives**, the most used drugs were:

- *Cannabis* - **96,4%**;
- *Heroin* - **84,1%**;
- *Cocaine* - **84,4%**.

As for the **drug abuse manner**, namely by injection (Table no. 2):

- **27% of the total of inmates** acknowledged having injected themselves at least once in their lives;
- **63,2% of the subset of inmates who have used drugs** acknowledged having injected themselves at least once in their lives.

The **average age for initiating injected drugs** is **21** years old.

In the subset that has used drugs sometime in their lives, **46,7%** declared having joined **treatment programmes** (Chart no. 13).

If admitting to having taken drugs at least once in the lifetime does not mean that the person is a drug addict, the fact is that of the total number of inmates who admitted to having taken drugs, as in the table above, almost half declared they had joined treatment programmes. This means that a still rather expressive subset not only took conscience of their drug addiction problems, but also sought help in overcoming them.

In what concerns health related problems, it is worthwhile to stress, these aspects concerning the bearers of infectious diseases.

Out of those who had made tests to find out whether they were infected with **HIV/AIDS**, and who told us what the result was:

- **16%** declared that result to be positive (Chart no. 14). This is a much higher value than that for the total population, but it seems to coincide with values of the same kind concerning the drug addict population undergoing treatment in the national public system.

As for hepatitis the value is also high:

- **Hepatitis B: 10%** declared positive results (Chart no. 15);
- **Hepatitis C: 27%** declared positive results (Chart no. 16).

Let us now find the different **profiles of the inquired inmates** and their **proportional weight on the sample**, through two multivariate analyses, one of **multiple correspondences** and another of **clusters**. In the analysis of multiple correspondences the categories of different variables are associated, such as sex, age, education level, number of detentions, situation that caused detention and situation in relation to drug abuse. These variables are also used for the construction of clusters.

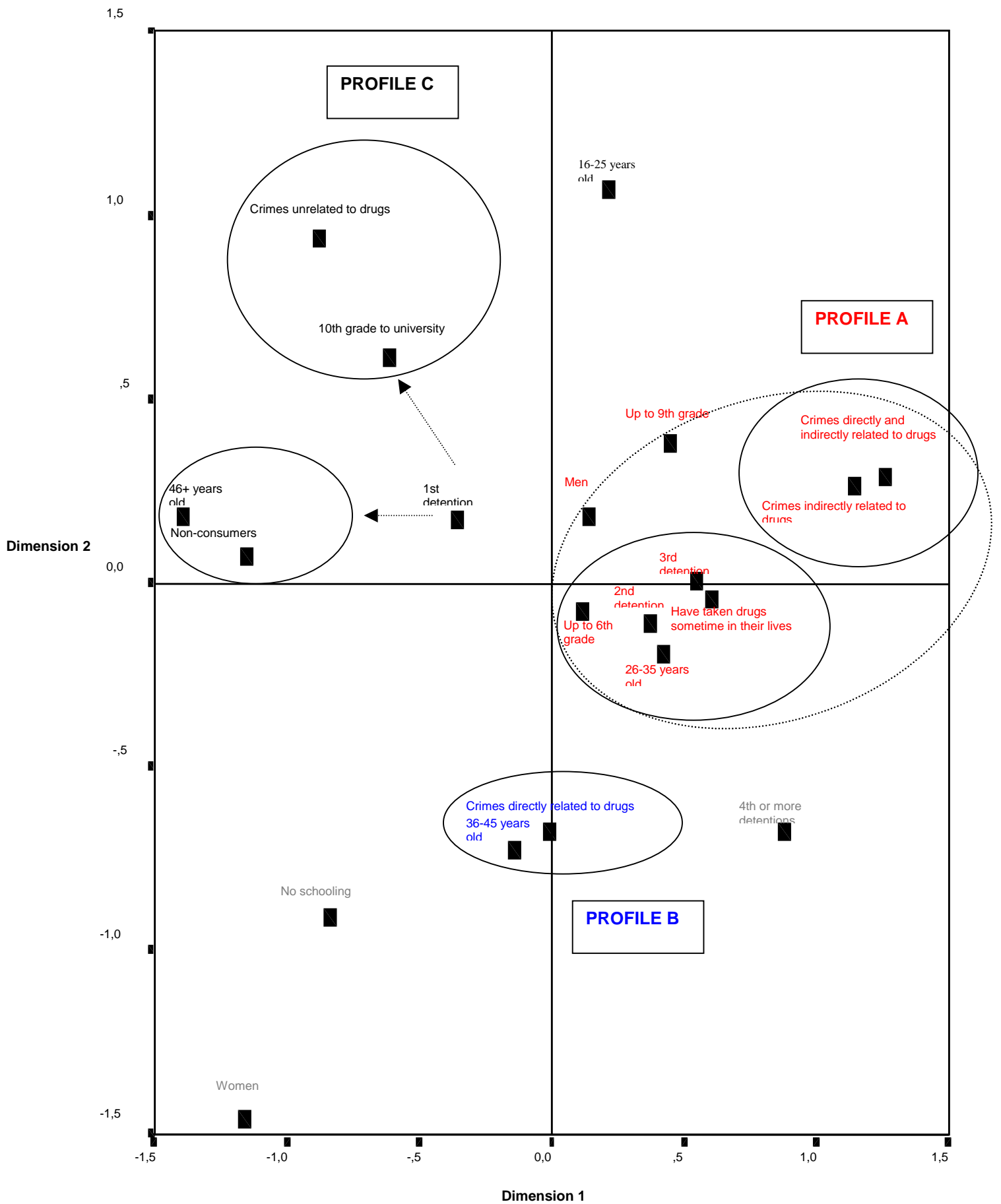
The schematic identification of three main profiles may be made in the following tables. These result from the strong association between the different characteristics of the inmates (categories such as users and non-users, crimes related or unrelated to drugs, age group, sex, etc.):

- 1) **“Drug users”**, those who use or are addicted to drugs and those who commit drug-related crimes (Profile A). This is the predominant profile representing 52,8% of the total sample.
- 2) **“Traffickers”**, those who traffic drugs, much less associated to drug abuse (Profile B) as a proportion of 19,3% of the total inmates;
- 3) **“Others”**, those who are detained for drug-unrelated crimes and have never used drugs (Profile C), which represent 27,9% of the inmates.

### Clusters Analysis

Profiles	%
Profile A – “Drug Users”	52,8%
Profile B – “Traffickers”	19,3%
Profile C – “Others”	27,9%

# Topologic space of the inmates



### **3. Drug abuse in prison continues for those who already used drugs, but in a smaller scale and in a different manner**

One important objective of our research was to find out whether there was continuity or discontinuity in the practices of drug abuse upon entering the prison system in order to determine the trajectories and behaviour of those who take drugs. Another important aspect was to find out what happens to those who, despite having committed drug-related crimes, are not regular users. Will they start using drugs or abuse drugs in a more regular way in prison? And what is the effect of drug circulation, trafficking and abuse by other inmates on those who go to prison for drug-unrelated crimes?

Information on these questions also allowed evaluation on the interaction of the different groups. In fact, it becomes obvious through the multiple correspondence analysis, that the relationships between these specific groups – those who use and/or are addicted to drugs, those who traffic drugs, those who are not detained for drug-related crimes – contribute towards explaining the relationship between drugs and prison.

Although, it cannot be said that all of the 65,4% inmates who used drugs before detention were addicts, the truth is that their number is certainly large. Once they enter the prison system, access to drug abuse is clearly much more difficult than in the outside world. In order to feed their addictions, and subject to the internal pressure to use drugs that the very detention situation naturally propitiates, drug addicts are often involved in complex situations.

Illicit circulation of such substances in prisons, on the other hand, increases significantly their price in relation to the price practiced outside prison. This situation may therefore become a good “business” opportunity for the other two groups in prison establishments – traffickers and inmates who are not detained for drug-related issues. And, although there are also increased risks associated with such business, this population also has the time to think of ways to better counter those risks, which are considered of lesser importance in view of the specific situation of that population. Such business opportunities may be tempting even to prison staff members.

**There is** demand from those who consume and/or are addicted to drugs and an additional opportunity for those who benefit or may start benefiting

from drug trafficking. It is also important to noting that, given the enclosed space and specific logic of the prison environment, it is very difficult to do so, even for the inmates who wish to stay completely uninvolved. There are always complicities to be established, silences to be bought. These are some of the main characteristics that contribute to the fact that the drug issue, beyond mere drug consumption, dominates the prison scene.

Despite the existing barriers to drug circulation in prisons, there is a decrease in consumption in prison by those who already used drugs before detention. However, the majority of those who used drugs before detention go on consuming, particularly in the case of *heroin* and *cannabis*.

Decrease in consumption of cocaine is more significant than that of other substances, presumably for the reasons pointed out in the book. On the other hand, the number of those who initiate drug abuse in prison is virtually insignificant.

Let us now consider some data on the consumption of substances in prisons.

## Drug use in Prison

Out of the total number of inquired inmates, following percentages acknowledged **drug using in prison** (Table no. 3):

- *Cannabis* - **39%**;
- *Heroin* - **27%**;
- *Cocaine* - **20%**.

In the subset of inmates who already used drugs in prison those values are (Table no. 3):

- *Cannabis* - **66,1%**;
- *Heroin* - **48,5%**;
- *Cocaine* - **37,3%**.

The majority of inmates who acknowledge having consumed drugs before detention admits to **continuing consumption** in prison, though in a **smaller scale**, i.e. one third less for *cannabis* (-30,3%) and for *heroin* (-35,6%). Consumption decreases almost a half (-47,1%) for *cocaine* (it is interesting to compare these data to those relating to drug abuse sometime in life – Table no. 1).

A very small number of users have **initiated consumption in prison**: **4,4%** for *cannabis*, **4,9%** for *heroin*, **3,1%** for *cocaine*. Only consumption of *pharmaceuticals* has been a practice initiated in prison by **17,9%** of inmates (Table no. 4).

By identifying the inmates who **acknowledged consuming in prison at least one of the substances**, we obtain the following values (Table no. 5):

- **47,4%** amongst the total of inquired inmates;
- **73,7%** in the subset of those who had consumed drugs at least once in their lives.



As for the manner of consumption in prison (Table no. 6):

- **11%** of the **total of inquired inmates** acknowledged having injected drugs in prison;
- **26,8%** of the **inmates who acknowledged having consumed drugs at least once in their lives** admit to having injected drugs in prison.

We thus conclude that **the manner of consumption of heroin or cocaine** (the most injected drugs) **changes in prison**. For example, of those who already consumed drugs, **48,5%** acknowledged continuing *heroin* consumption in prison (Table no. 3), but it was not by injection, as, from these, only **26,8%** acknowledged having injected drugs. On the other hand, of those who have consumed drugs sometime in their lives, **63,2%** acknowledged having injected drugs **before detention** (Table no. 2).

Inside prison, consumption clearly tends to change from injection, in the case of *cocaine* and *heroin*, to inhalation.

It was also concluded that the manner of consumption varies according to the dimension of the prison establishment (small, medium and large) (Table no. 7). It is in the **large** prison establishments that there are **more inmates** who **used drugs** (Table no. 8) and who are **detained** for drug-related crimes (Table no. 9). But those are also the establishments where there are **fewer inmates who injected drugs before detention** and where **fewer inmates presently inject drugs under detention**. (Table no. 10).

The figures for drug consumption in prison are **minimum values**. There were some inmates (about 10%, for the total of substances used) who acknowledged having taken drugs for at least one year, but who did not indicate for how long they had been detained, or whose detention time was shorter than their consumption time (we classified these individuals as "consumers in an undetermined place"). We may assume that some of them were in fact in prison, but it is not possible to guarantee that it was indeed the case. These cases were therefore not counted in as consumers in prison.

Bearing in mind that there were some inmates who refused to participate in the survey, and assuming that some of these refusals were related to the fact that the subject of the survey was known, we may also assume that among these individuals there were some who did not want to acknowledge that they consumed drugs in prison.

#### 4. Brief comparative notes

The book stressed methodological differences that make immediate comparability difficult<sup>1</sup>. The surveys mentioned hereafter are either not representative of the prison populations of the respective countries, or do not present figures for drug consumption inside the prison establishments.

- In what concerns the survey conducted in Portugal in 1989<sup>2</sup> (Rodrigues *et al.*, 1989), and though it is worth remembering that it was limited to the Central PEs in Mainland Portugal, there is an increase in consumption before and during detention. While in 1989, according to this survey, the values for consumption before detention, for the male population, were 60,4% for *cannabis*, 42,3% for *heroin* and 39% for *cocaine*, in the present survey the values for the subset of those who had already used drugs at least once in their lives are, respectively, 96,4%, 84,1% and 84,4%. In regards to drug use in prison, those values were in 1989, for the male population, 47,5%, 20% and 14,2%. In 2001, for the same subset of those who had already used drugs at least once in their lives, the respective values are 66,1%, 48,5% and 37,3%, respectively.

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<sup>1</sup> Several volumes were published within the scope of the Drugs-Crime Survey Programme, sponsored by the Ministry of Justice through the Office for Planning and Coordination of the Fight Against Drugs (GPCCD), under scientific direction of Prof. Doutor Cândido da Agra, which relate the drugs issue to criminality. One of these volumes, *“Drugs Consumption in Portuguese Prisons”* (1997), authored by Prof. Jorge Negreiros, uses a basically qualitative methodology and the drugs consumption figures concern the four-month period before detention, which makes a comparative analysis with the present data impossible. However, the pioneer work conducted by the teams coordinated by Prof. Doutor Cândido da Agra in these areas is commendable.

<sup>2</sup> In a survey coordinated by Luísa Machado Rodrigues and conducted in 1989 by GPCCD in articulation with the Prison Authority (DGSP), a questionnaire was applied to two random samples of male and female inmates (2152 in total) of the Central Prison Establishments of Mainland Portugal only. In the available information about this survey, there is no specific reference to the methodological steps taken to carry out the research. This fact makes systematic comparability of data virtually impossible.

With a view to synthesizing the comparisons in the book, we mention hereafter some values found in surveys in other countries.

- As for **injected drugs before prison**, the available data always refer higher values in others countries. In Sweden, for example, in a representative survey of the prison population, (n=3536) in which the inmates were only inquired about their consumption practices **in the last year before detention**, it was concluded that **47%** had injected drugs practically daily. In the Portuguese case, if we take the total inmates into account, the value is only **27%**. However, for those who acknowledged having consumed drugs sometime in their lives, this percentage rises to 63,2%. However, the Swedish value seems to apply to the total number of inmates.
- In Ireland, in a non-representative survey carried out in 9 prison establishments (n=1188) it was concluded that 43% of the inmates had injected drugs sometime in their lives. This is a much higher value than the one found in Portugal (27% for the total number of inmates).
- As for **consumption in prison**, when comparing the Spanish and the Portuguese cases, through a non-representative survey in 62 prisons (n=1011), it was concluded that the identified value for the total Portuguese population that consume drugs in prison establishments is **lower** than the Spanish value. Among the total number of Portuguese inmates, **47,4%** acknowledge having consumed any drugs in prison, while in Spain that value is **56%**.
- As for **life-long consumption by substance**, the Portuguese values tend to be higher than those in countries like Denmark, Great Britain and Ireland, as shown in the book.

**5. The views of the inmates: inadequate living conditions in prison; drug-addicts need help; implementation of drug-addiction treatment programmes is much needed**

As to living conditions in prison, the inmates rate the following aspects as **the most negative**, in a scale of **good, reasonable, inadequate** and **bad** (Chart no. 17):

**1<sup>st</sup> Food (46,2% consider it to be bad);**

**2<sup>nd</sup> Health services (32% consider them bad and 19,2% inadequate);**

**3<sup>rd</sup> Lodgings (30,4% consider them bad and 14,4% inadequate).**

The least criticised aspect is the **visiting system**. The least positive evaluations on the living conditions in the prison establishments relate to the larger the PE (Chart no. 18).

Although it is understandable that the inmates stress the negative aspects, since they are deprived of freedom, it is nevertheless surprising to find positive evaluations, which result from the sum of the "reasonable" and "good" marks, in many aspects of their living conditions (Chart no. 17).

As to the most worrying aspects for the inmates, in a scale of **very worried, worried, little worried** and **not worried** (Chart no. 19):

**1<sup>st</sup> Infectious diseases (64,8% are very worried);**

**2<sup>nd</sup> Overcrowded PEs (59,4% are very worried).**

In what concerns **drugs**, the inmates show extreme positions. In fact, **39,7%** are **very worried** about drugs and **32,1%** say they are **not worried**. We find a similar situation when studying the aspect of **violence amongst inmates**, as **31,8%** state they are **very worried** and **24,3%** declare **not** to be **worried**.

As for **violence between prison staff and inmates**, the sum of **very worried** plus **worried** is **smaller** than **little** and **not worried**, which is the opposite of the answers about violence amongst inmates. It is noteworthy that there is still a **very worried** group (**27,6%**), though **smaller than** those who declared to be **not worried** (**33,6%**).

Also here, **the larger the PE, the higher** the number of those who declare to be **very worried** and **worried** in all the analysed variables (Table no. 11).

As for the views of the inmates on **drug addicts** and **addiction** (Chart no. 20):

- **91%** agree with the concept **"a drug addict is someone who needs help"**;
- **80,5%** agree with the concept **"a drug addict is a sick person"**;

The strongest **disagreement** lies on the concept **"a drug addict is a delinquent person"** (**62,4%** disagree).

As to the relationship between **drugs and prison**, the inmates clearly assume the following positions (Chart no. 21):

- **79,9%** of the inmates believe that **"the solution to the problem of drugs in prison lies on more support programmes for drug addicts"**;
- **69,4%** consider that **"it is very difficult to control drugs entering prisons"**.

Still on this relationship there are some differences:

- **drug consumers** are much **more sceptical** as to the effectiveness of greater control and surveillance as a possibility of preventing drugs from entering prison; and there are also more of them who believe that it is very difficult to control drugs entering the PEs.

There are fewer inmates who believe that it is possible to prevent drugs from entering the large PEs with greater control and surveillance.

As to the measures related to **drug addiction**, the majority of the inmates consider **more important and important** the following measures (Chart no. 22):

- **81,3% easier access to treatment programmes;**
- **66,9% more drug-free aisles/unities;**
- **65,4% easier access to substitution programmes;**
- **63,6% greater surveillance;**
- **51 % syringe exchange programmes;**
- **40,4% assisted injection rooms.**

The larger the dimension of the PE, the more important the inmates consider the implementation of these measures. Although, in what concerns the syringe exchange programmes, the variation is almost zero, in what concerns the assisted injection rooms, the larger the PE the more important the inmates consider these rooms.

When comparing opinions about the measures related to drug addiction from inmates who have consumed drugs sometime in their lives and those who never consumed drugs, the following is concluded:

- Those who have consumed drugs always consider, more than the others, important or very important, any kind of measure related to drug addiction, except for reinforcement of surveillance.

**6. The views of the Prison wardens: there is lack of money; the living conditions of the inmates are reasonable, drug-addicts need help, it is difficult to control drugs entering the PEs**

In what concerns the living conditions in the PEs, the wardens have a rather different view. While the inmates stress more negative aspects, Prison wardens stress more positive aspects (Chart no. 23). Considering the sum of Good and Reasonable, their positions vary between 100% (in food, for example) and 62,5% (lodgings). When analysing closer:

- **55% consider food to be good, and 45% reasonable;**
- **22,5% consider lodgings to be good, and 40% reasonable.**

In these matters there is a great discrepancy between the views of the wardens and those of the inmates.

As for the **number of guards** in each PE, the wardens generally consider it to be **insufficient** (Table no. 12). However, they consider the **general staff (workers)** (85,2%) and the **medical staff** (73,2%) even **more insufficient**.

The following lists what **worries** the wardens the most, in a scale of **very worried, worried, little worried** and **not worried** (Table no. 13):

- 1<sup>st</sup> **Lack of money** (77% are **very worried**);
- 2<sup>nd</sup> **Drugs** (48,8% are **very worried**);
- 3<sup>rd</sup> **Infectious diseases** (48,7% are **very worried**);
- 4<sup>th</sup> **Overcrowded PEs** (39,5% are **very worried**).

As for drugs and infectious diseases, as well as lack of money, when adding the answers **very worried** and **worried** these are close to 100%.

As for the views of the wardens on **drug addicts** and **addiction** (Chart no. 24):

- **97,8% agree** with the concept **“a drug addict is someone who needs help”**;
- **97,6%** believe that **“there are different kinds of drug addicts”**.

As to the relationship between **drugs and prison** (Chart no. 25), amongst the wardens:

- **92,5 %** believe that **“it is very difficult to control drugs entering prisons”**;
- **58,5%** disagree that **“with greater control and surveillance, drugs can be prevented from entering prisons”**;
- The majority of the wardens (**82,5%**) agree or agree totally with the concept **“prison is an institution where rehabilitation of the drug addict is possible”**.

As to measures related to drug addiction, the majority of the wardens have the means to implement the following measures (Chart no. 26):

- **90,2%** and **87,8%**: **training on drug issues, with prison staff and the inmates**, respectively;
- **92,5%**: **easier access to treatment programmes**;
- **67,5%**: **greater surveillance**;
- **66,7%**: **easier access to substitution programmes**.

The **clinical services** estimate that the average value of services to drug addicts in prisons is **51,6%**. This is a very close value to that for drug abusers, **47,4%** of which declared having consumed at least one substance in prison, in the total number of inquired inmates.

In the picture below it is possible to observe, through an analysis of multiple correspondences, the associations that can be established between categories of the different variables of social characterization of Prison wardens.

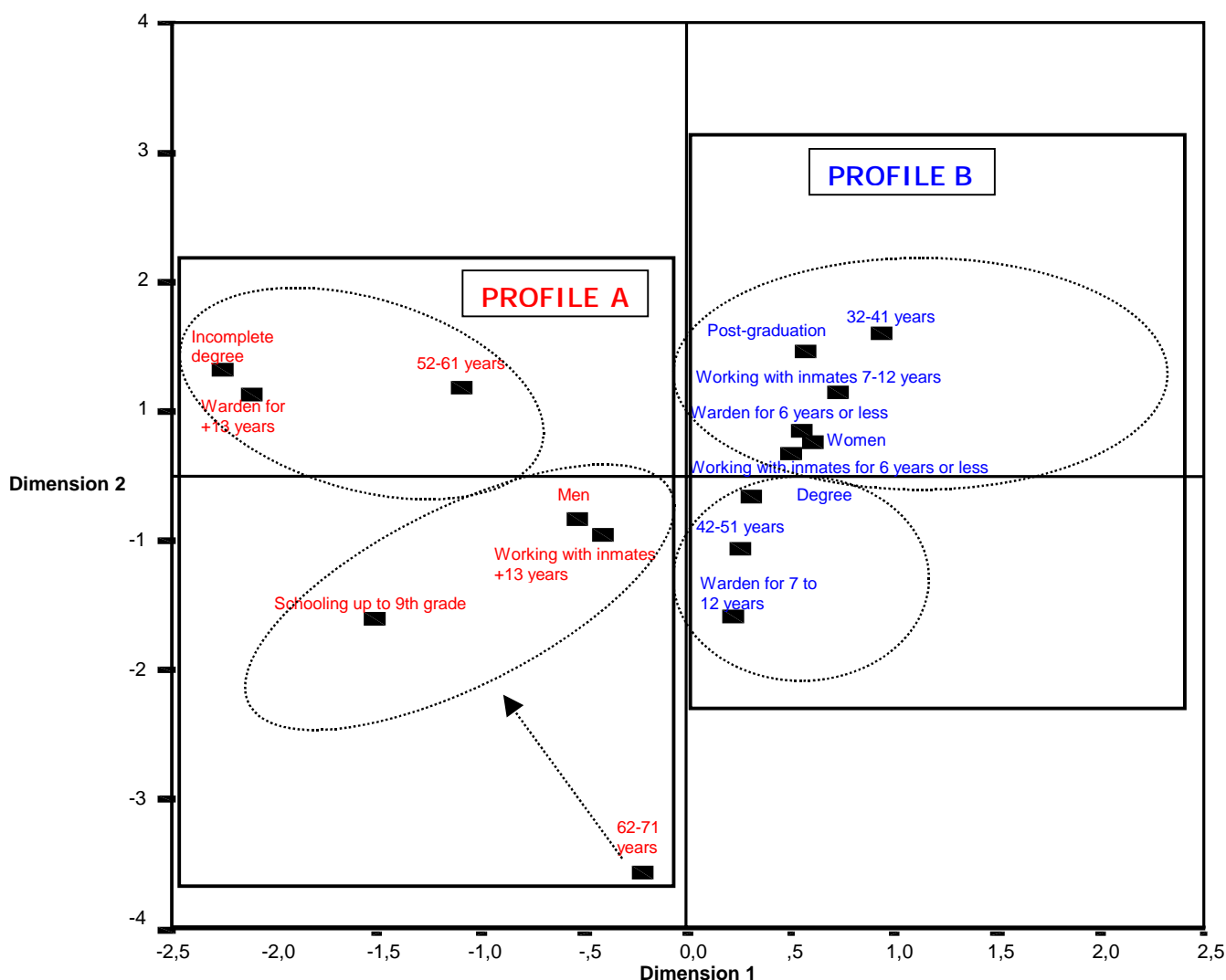


Two profiles appear clearly defined:

1. Older male wardens, with lower academic training (9th grade up to an incomplete degree) and larger working experience, both in dealing with inmates and as wardens (Profile A);
2. Younger wardens, mainly female, higher academic training (degree and post-graduation), working experience of last than 12 years with inmates and as wardens of PEs (Profile B).

Other finer distinctions may be established. This subject is developed in detail in the chapter relating to inquiring.

### Topologic space of the wardens of the Prison Establishments



## Technical Appendix

The setting of this study resulted from a joint deliberation of both the Minister for Science and Technology, Professor Dr. José Mariano Gago, the Minister of Justice, Dr. António Costa and the State Secretary to the President of the Council of Ministers, Dr. Vitalino Canas of the XIV Constitutional Government.

- **The survey was commissioned by:** the Instituto Português da Droga e da Toxicodependência (IPDT)
- **With the collaboration of:** the Direcção-Geral dos Serviços Prisionais (DGSP)
- **The analytical concepts and methods were developed by:** the research team of the Centro de Investigação e Estudos de Sociologia (CIES) of the Instituto Superior de Ciências do Trabalho e da Empresa (ISCTE).
- **The methodological concept and application of the survey to the inmates was made in collaboration with:** METRIS - Métodos de Recolha e Investigação Social, Lda. (market studies company).

### 1. Inquiry to the inmates

- **Universe:** 12,656 inmates (on May 1st, 2001) of 47 prison establishments (PEs) in the mainland Portugal and the Autonomous Regions of Madeira and the Azores.
- **Sample:** 2,601 individuals (20,6% of the universe), out of which, 2,057 valid questionnaires were obtained. The difference between the intended and used samples results from 533 refusals and 11 questionnaires that were later annulled for not conforming to the validity standards established by Metris. The Metris sample was built with data supplied by the DGSP. In each prison establishment, the number of inquired individuals was randomly selected in proportion to the total number of inmates. A further 2% of the total universe were randomly selected for

substitutions for no-show<sup>3</sup>. The random sample of 2,057 individuals has an associated **acceptable maximum sample error of 2% for a level of reliability of 95%**.

#### **Specific methodological procedures:**

- The questionnaire was **filled in by the inquired individuals**, placed in a **closed ballot box** (on view). The help of an interviewer occurred in the cases of illiteracy and with the consent of the inquired individual.
- **Total anonymity** of inquiries and **confidentiality** of answers (the majority by large being multiple choice, as only two implied writing the answers).
- Non-identification of data per prison establishment.
- Meetings were held with wardens, guards and staff of the medical and rehabilitation services prior to the application of questionnaires in order to explain the technical requirements needed to **strictly preserve the anonymity and confidentiality** of the inmates' answers.
- **Distribution of informative booklets** about the survey to all the inmates in each prison establishment in the morning of the application of the questionnaires. The booklets explained that the objective of the survey was to understand the real facts and that it was developed by institutions that were independent of and external to the PEs.
- Application of the questionnaire in rooms with 20 inmates maximum and without the presence of the surveillance staff.
- Clarification of doubts only by the researchers or interviewers of Metris, being external to the PEs.

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<sup>3</sup> Such as Court appearances, appointments at the Hospital or other health services outside the PE; inmates who do not understand (speaking, reading and writing) the Portuguese language and inmates suffering disciplinary sanctions.

## 2. Inquiries to the wardens and medical services

- **Universe:** wardens (male/female) and medical services of 47 PEs.  
43 Answers were received from wardens and medical services.

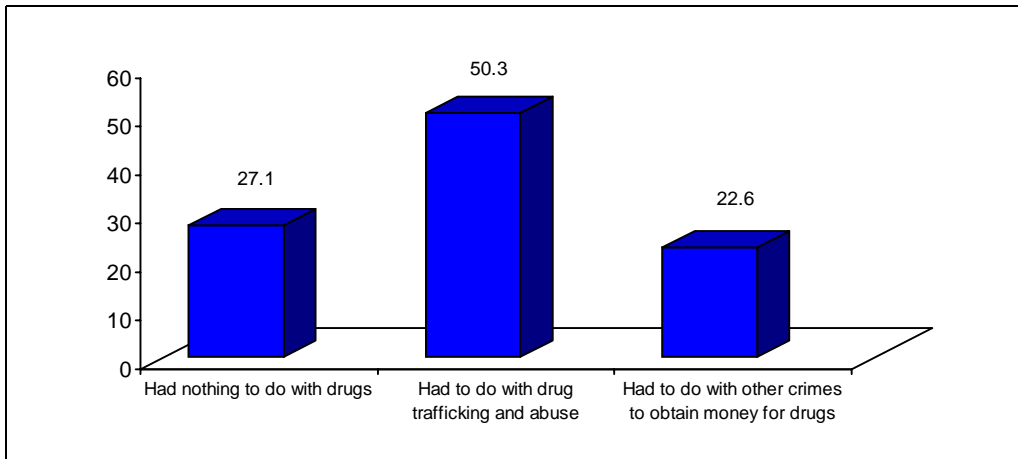
### Specific methodological procedures:

- Anonymity of the PEs and confidentiality of the answers;
- Inquiries to the wardens and medical services were sent by mail, with a return envelope (without identification of the PE).

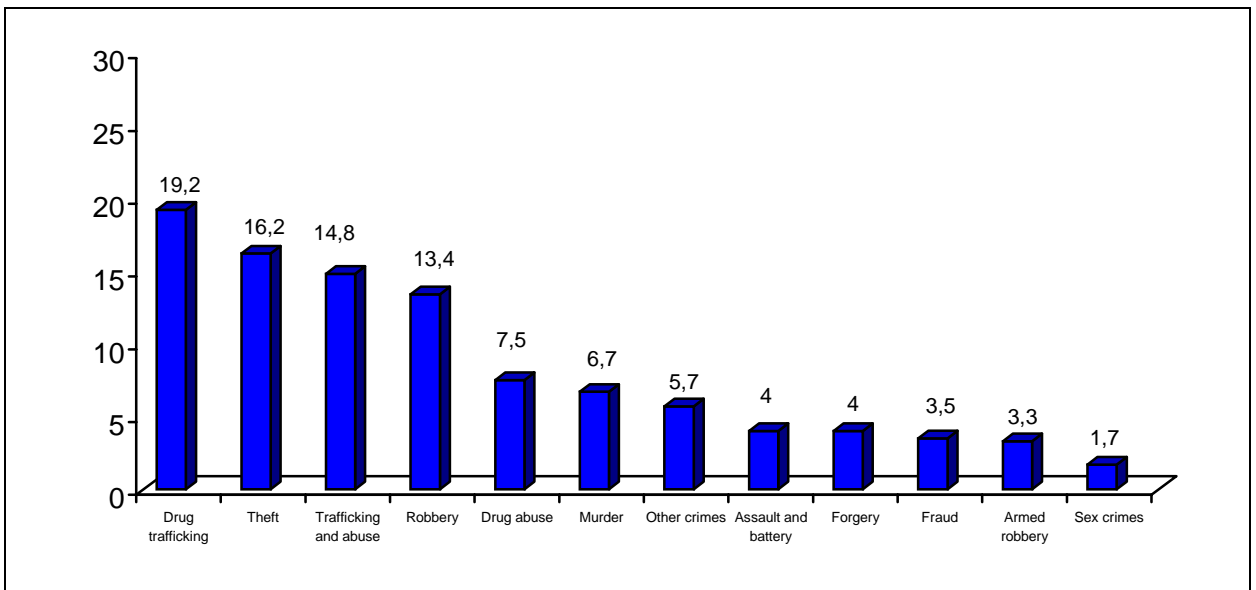
# **Annexes**

## **Charts and Tables**

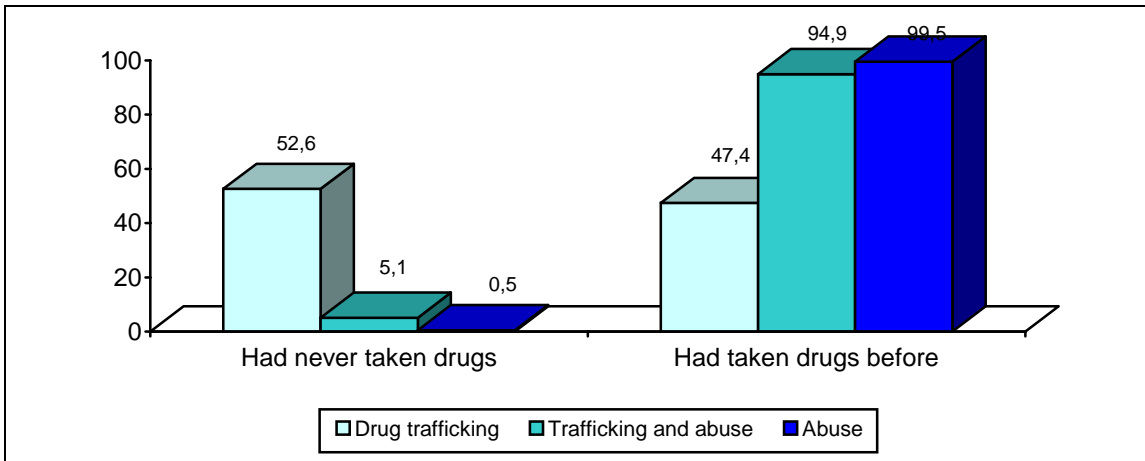
**Chart no. 1**  
**Situations that caused detention (%)**



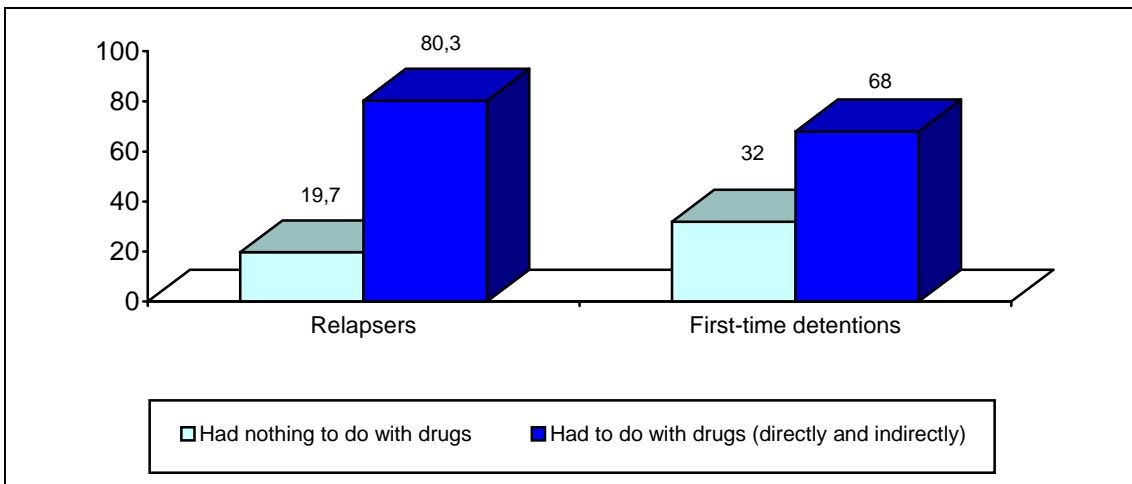
**Chart no. 2**  
**Crimes that caused detention (%)**



**Chart no. 3**  
**Drug abuse and drug-related crimes (%)**



**Chart no. 4**  
**Situations that caused detention and criminal relapse (%)**



**Chart no. 5**  
**Penal Situation (%)**

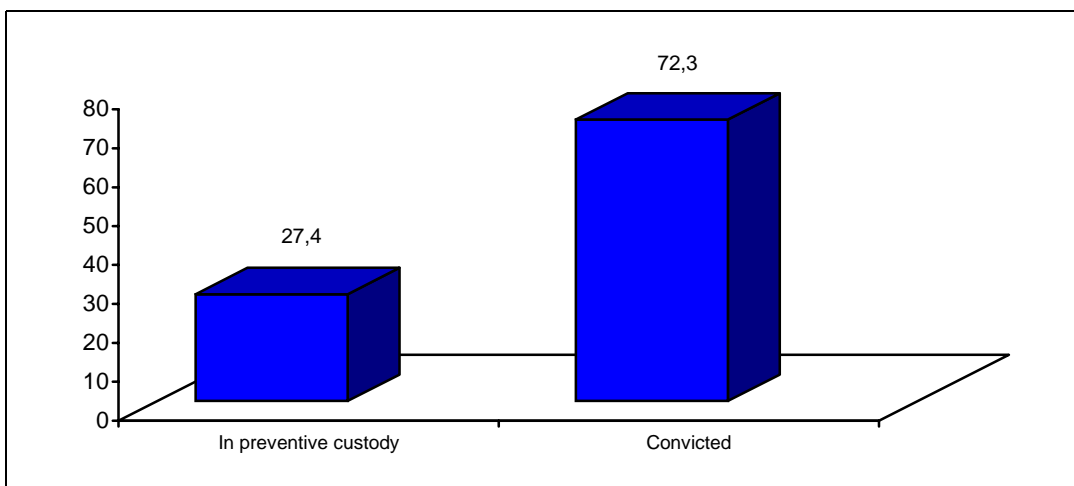


Chart no. 6  
Sex (%)

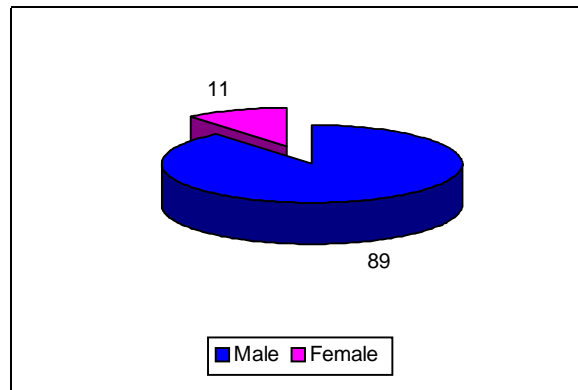


Chart no. 7  
Ages (%)

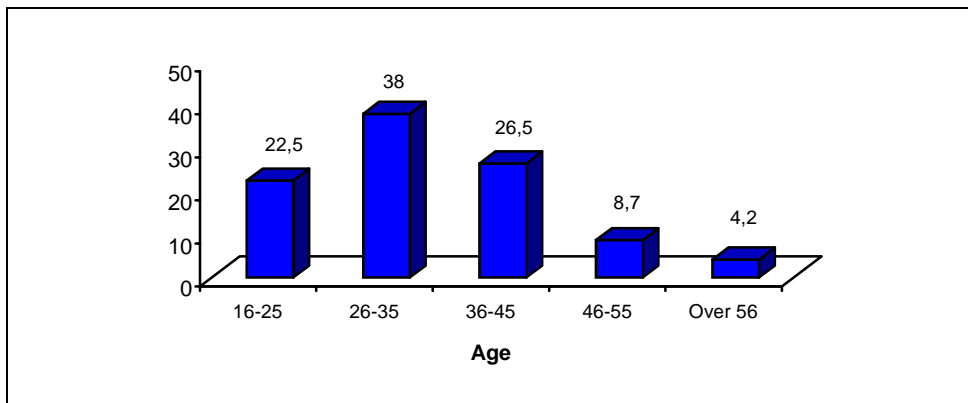
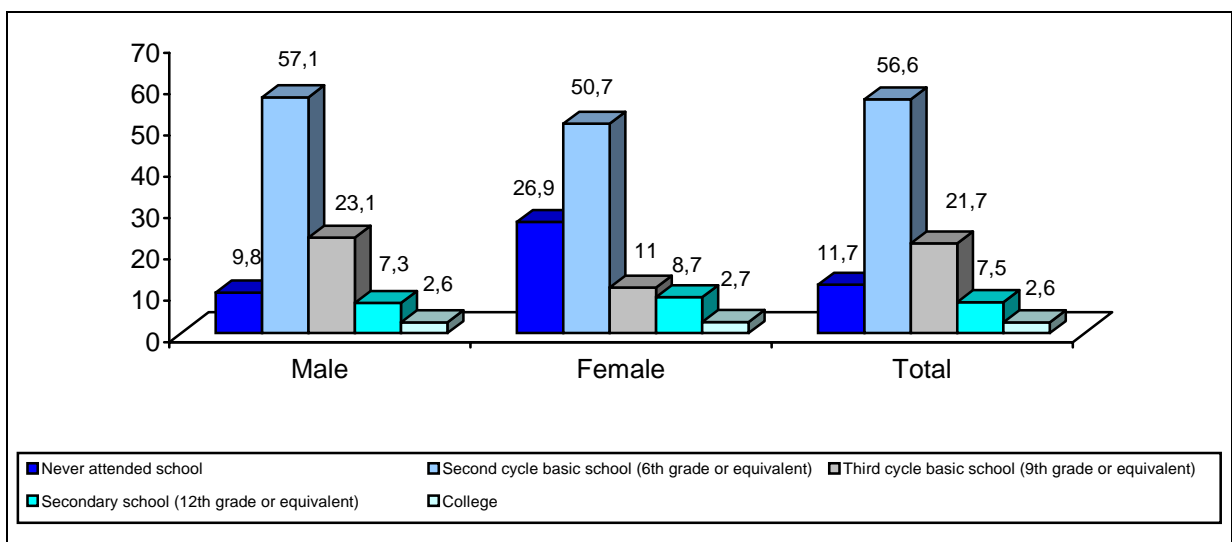
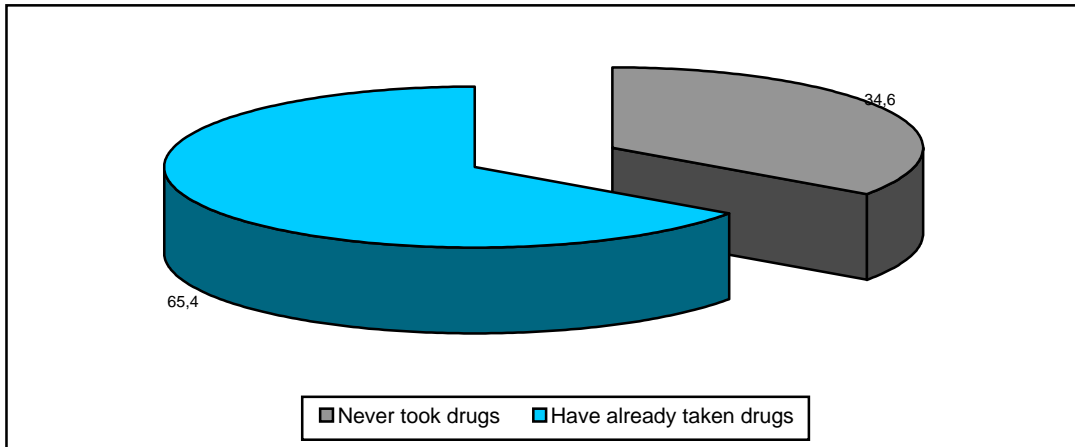


Chart no. 8  
Schooling level (complete or incomplete) (%)

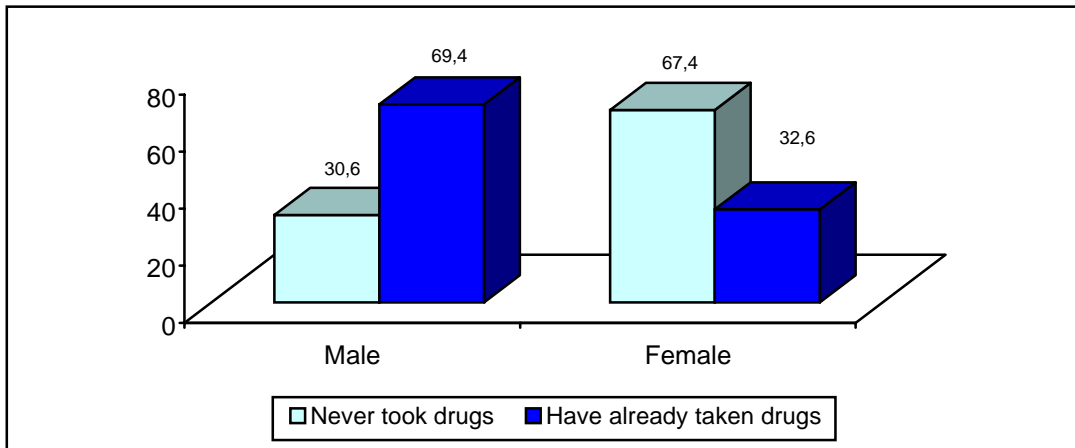




**Chart no. 9**  
**Declaration of drug use at least once in the lifetime (%)**



**Chart no. 10**  
**Declaration of drug use at least once in the lifetime by sex (%)**



**Chart no. 11**  
**Declaration of drug use at least once in the lifetime by age group (%)**

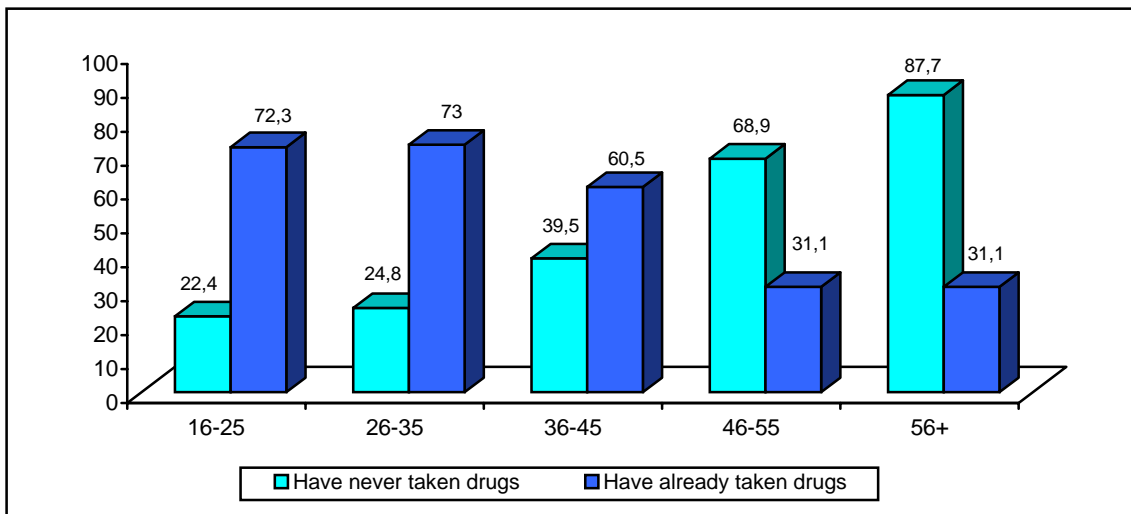


Chart no. 12  
Age when first started using drugs (%)

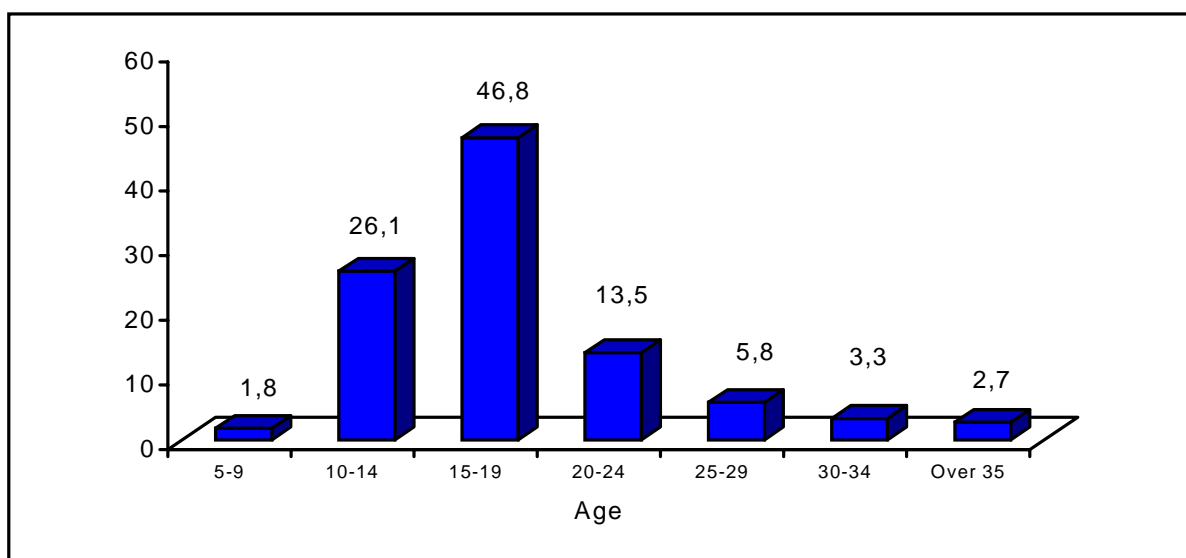


Table no. 1  
Declaration of drug use at least once in the lifetime by substance (%)

Substance	% declaration of drug use amongst the total number of those who declared having taken drugs at least once in their lives (basis=1322)		% declaration of drug use at least once in lifetime amongst the total number of inquired inmates (basis=2057)
	n	%	%
Cannabis	1162	96,4	56,5
Heroin	964	84,1	46,9
Cocaine	937	84,4	45,6
Pharmaceuticals	660	66,1	32,1
Amphetamines	394	41,6	19,2
Ecstasy	349	37,2	17,0
Other substances	174	19,2	8,5

Table no. 2  
Declaration of injected drugs use at least once in the lifetime (%)

	n	% declaration of injected drugs use at least once in the lifetime amongst the total number of those who have already taken drugs (basis=1322)	% declaration of injected drugs at least once in the lifetime amongst the total number of inmates (basis=2057)
Declaration of injected drugs abuse sometime in life	550	63,2	27

Chart no. 13  
Declaration of having joined treatment programmes amongst the total of inmates who have taken drugs at least once in their lives (%)

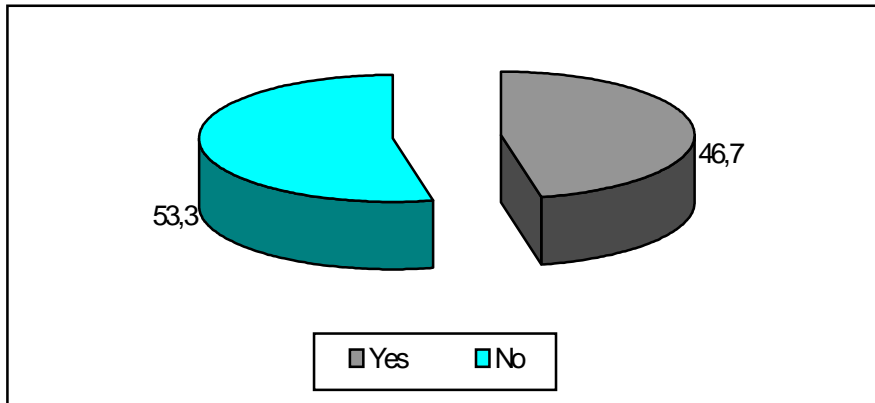


Chart no. 14  
Declaration of results of HIV/AIDS tests (%)

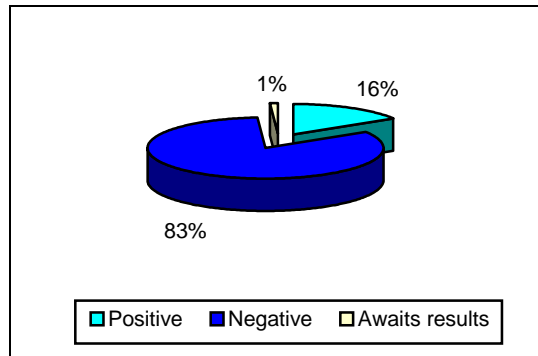
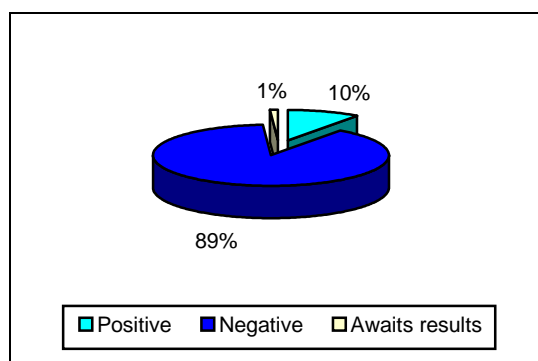
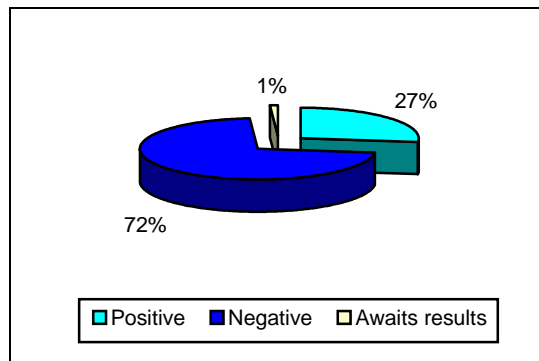


Chart no. 15  
Declaration of results of Hepatitis B tests (%)



**Chart no. 16**  
**Declaration of results of Hepatitis C tests (%)**



**Table no. 3**  
**Declaration of drug use in prison (%)**

Substances	% declaration of drug use in prison amongst the total number of those who acknowledged having taken drugs at least once in their lives (basis=1322)		% declaration of drug use in prison at least once in the lifetime amongst the total number of inmates (basis=2057)
	n	%	
Cannabis	797	66,1	38,7
Heroin	556	48,5	27,0
Cocaine	414	37,3	20,1
Pharmaceuticals	505	50,6	24,6
Amphetamines	145	15,3	7,0
Ecstasy	132	14,0	6,4
Other substances	92	10,2	4,5

**Table no. 4**  
**Declaration of initiating drug use in prison amongst the total of those who acknowledged having taken drugs at least once in their lives (%)**

Took for the first time in prison	%
Cannabis	4,4
Heroin	4,9
Cocaine	3,1
Pharmaceuticals	17,9
Amphetamines	1,6
Ecstasy	1,3
Other substances	2,2

**Table no. 5**  
**Declaration of abuse of at least one substance in prison (%)**

% declaration of drug abuse of at least one substance in prison amongst the total number of those who took drugs sometime in their lives (basis=1322)	% declaration of drug abuse of at least one substance in prison amongst the total number of inquired inmates (basis=2057)
73,7	47,4

**Table no. 6**  
**Declaration of injected drugs use in prison (%)**

% declaration of injected drugs use in prison amongst the total number of those who took drugs sometime in their lives (basis=1322)	% declaration of injected drugs use in prison amongst the total number of inquired inmates (basis=2057)
26,8	11

**Table no. 7**  
**Declaration of drug use in prison by substance and dimension of the PE (%)**

Declaration of drug use in prison amongst the total of those who acknowledged having taken drugs before	Cannabis	Heroin	Cocaine	Pharmaceuticals	Amphetamines	Ecstasy	Other substances
Dimension of the PE							
Small	62	43	31	55	8	6	7
Medium	64	41	33	49	14	13	10
Large	67	52	40	50	17	16	11
Total value	66,1	48,5	37,3	50,6	15,3	14,0	10,2

**Table no. 8**  
**Declaration of drug use at least once in the lifetime by dimension of the PE (%)**

Declaration of drug use amongst the total number of inmates	Have never taken drugs	Have taken drugs at least once in the lifetime	Total
Dimension of the PE			
Small	42	58	100
Medium	36	64	100
Large	32	68	100
Total value	34,6	65,4	100,0

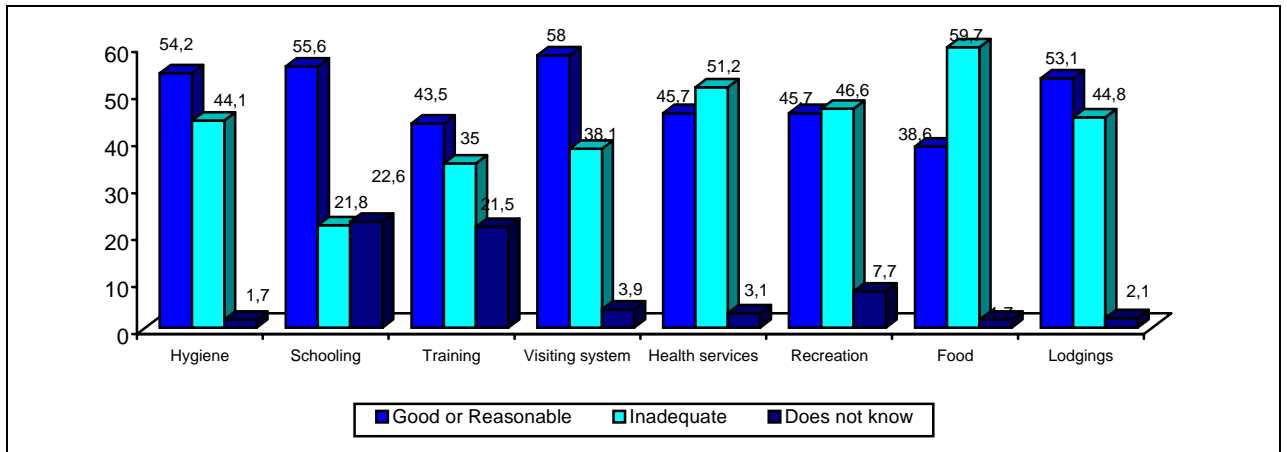
**Table no. 9**  
**Situations that caused detention by dimension of the PE (%)**

Situations that caused detention	Had nothing to do with drugs	Had to do with drug trafficking and/or abuse	Had to do with other crimes to obtain money for drug abuse	Total
Dimension of the PE				
Small	33	46	21	100
Medium	29	49	22	100
Large	25	52	23	100
Total value	27,1	50,3	22,6	100,0

**Table no. 10**  
**Declaration of injected drug use before and under detention**  
**by dimension of the PE (%)**

Declaration of injected drug use amongst the total of those who acknowledged having taken drugs at least once in their lives	Injected drugs before detention	Injects drugs in prison
Dimension on the PE		
Small	76	38
Medium	69	29
Large	59	24
Total value	63,2	26,8

**Chart no. 17**  
**Views of the inmates concerning living conditions in the PEs (%)**



**Chart no. 18**  
**“Good or Reasonable” answers about living conditions**  
**by dimension of the PE (%)**

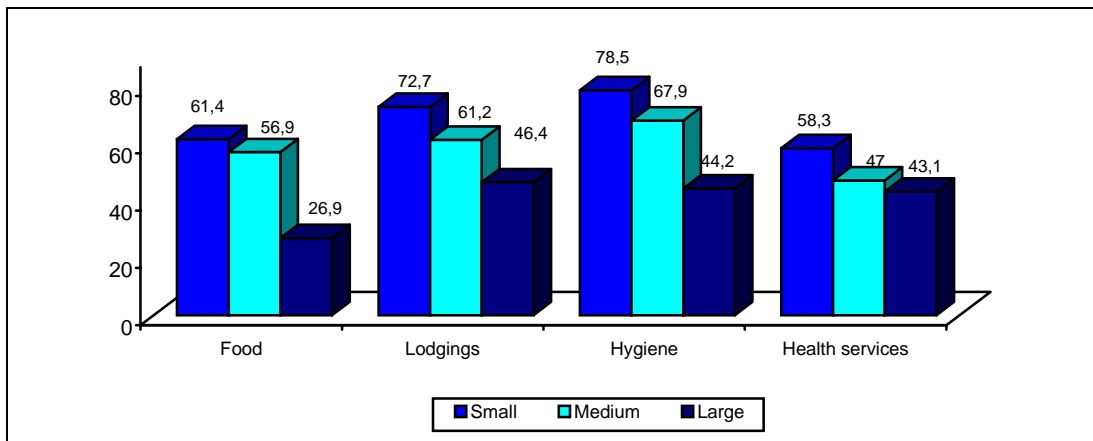


Chart no. 19  
Worries of the inmates

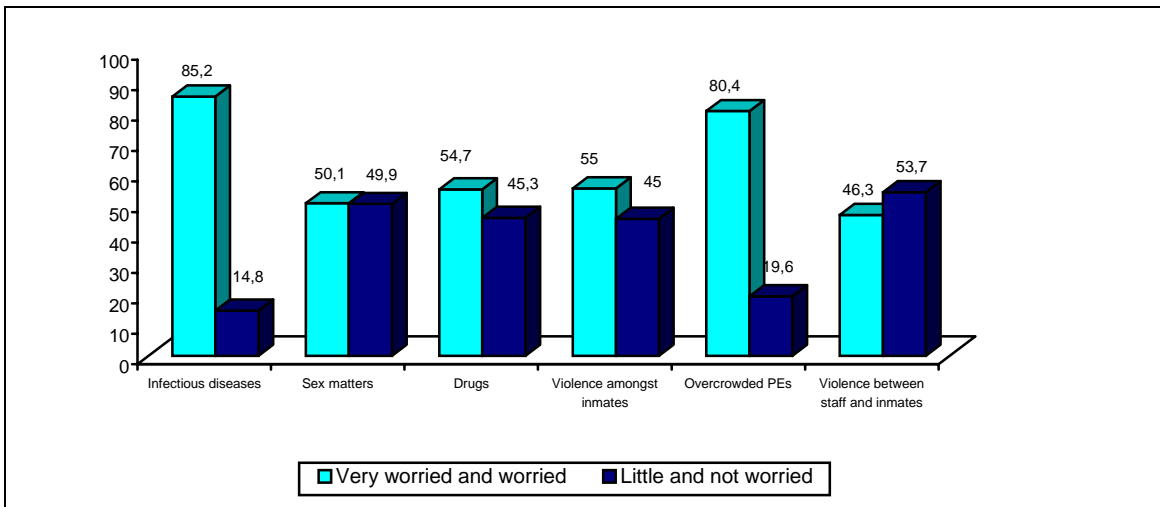
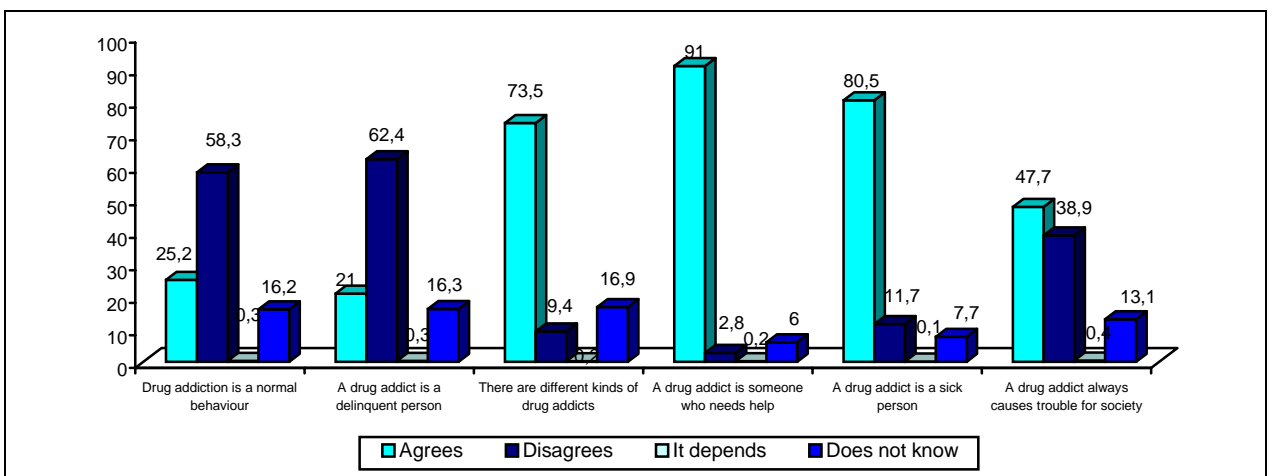


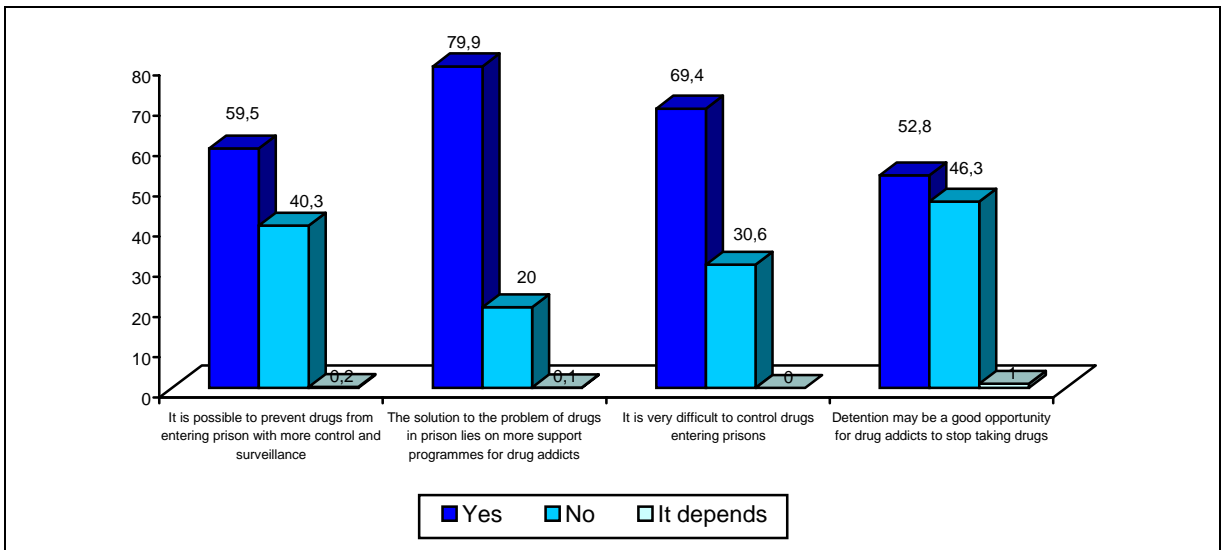
Table no. 11  
Worries of the inmates by dimension of the PE (%)

Dimension	Small		Medium		Large	
	Very worried	Worried	Very worried	Worried	Very worried	Worried
Worries						
Infectious diseases	49,5	24,5	60,0	25,0	69,3	17,8
Sex matters	19,8	20,9	25,5	21,8	30,8	21,8
Violence between staff and inmates	16,1	17,7	20,5	16,1	32,5	20,0
Drugs	21,7	18,0	34,5	13,6	44,9	15,2
Overcrowded PEs	38,5	24,5	54,5	20,7	65,0	20,5
Violence amongst inmates	13,4	18,2	24,9	20,6	37,7	25,2

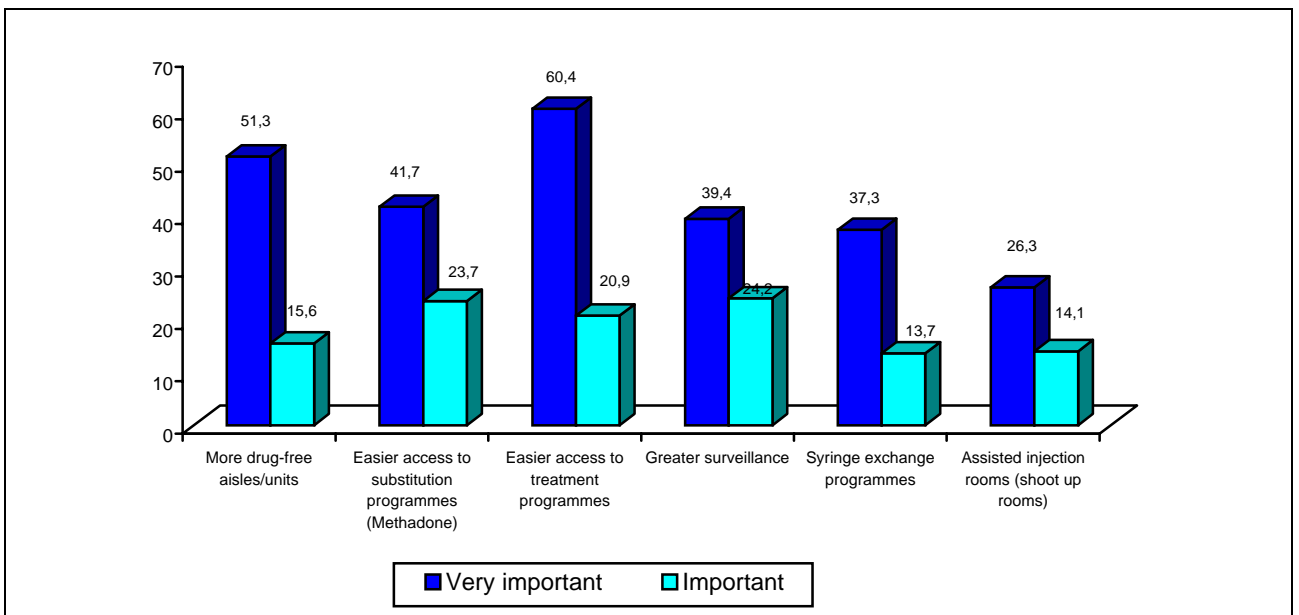
Chart no. 20  
Views of the inmates on drug addiction (%)



**Chart no. 21**  
Views of the inmates on the existence of drugs in the PEs (%)

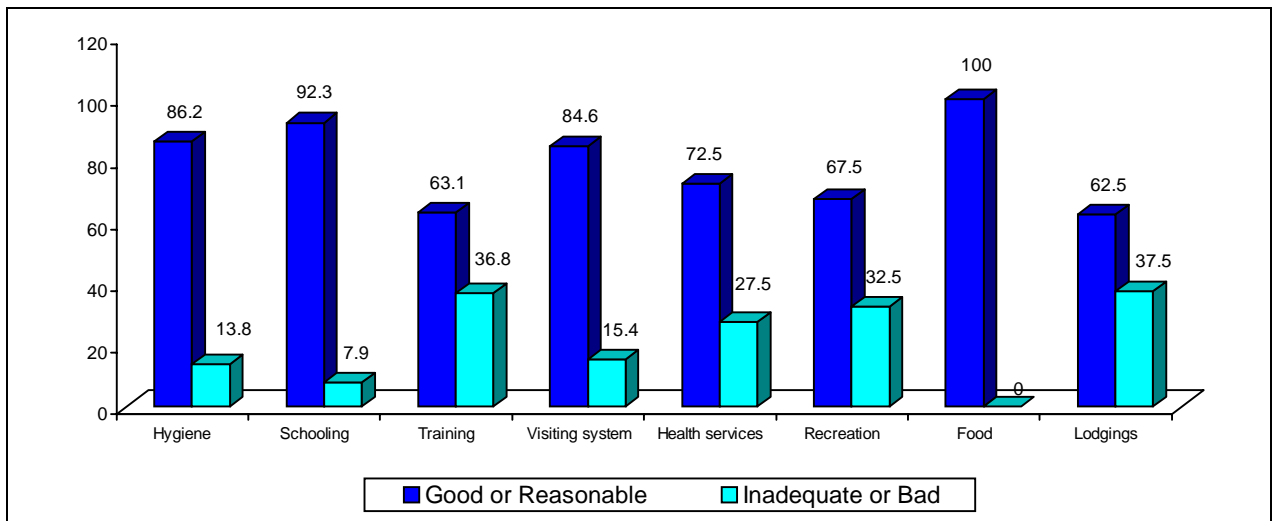


**Chart no. 22**  
Degree of importance awarded by inmates to measures related to drug addiction (%)





**Chart no. 23**  
**Views of the wardens on living conditions in the PEs (%)**



**Table no. 12**  
**Number of staff in the Prison Establishment (%)**

	Sufficient %	Insufficient %
Administration staff	39,0	61,0
Surveillance staff	36,6	63,4
Technical Staff (education/training/reintegration)	34,1	65,9
Medical staff	26,8	73,2
Other staff (workers)	14,8	85,2

**Table no. 13**  
**Degree of worry about various aspects of the PEs (%)**

	Very worried	Worried	Little worried	Not worried
Inadequate facilities	38,5	48,7	7,7	5,1
Lack of health technicians	34,2	39,0	24,4	2,4
Drugs	48,8	43,9	7,3	0
Infectious diseases	48,7	41,5	9,8	0
Lack of surveillance staff	35,9	30,8	28,2	5,1
Violence amongst inmates	10,3	20,5	64,1	5,1
Lack of rehabilitation technicians	34,1	36,6	19,5	9,8
Dangerous inmates	12,5	30,0	52,5	5,0
Overcrowded PEs	39,5	34,2	23,7	2,6
Lack of money	77,5	22,5	0	0
Violence between staff and inmates	11,1	38,9	50,0	0

Chart no. 24  
Views of the wardens on drug addiction (%)

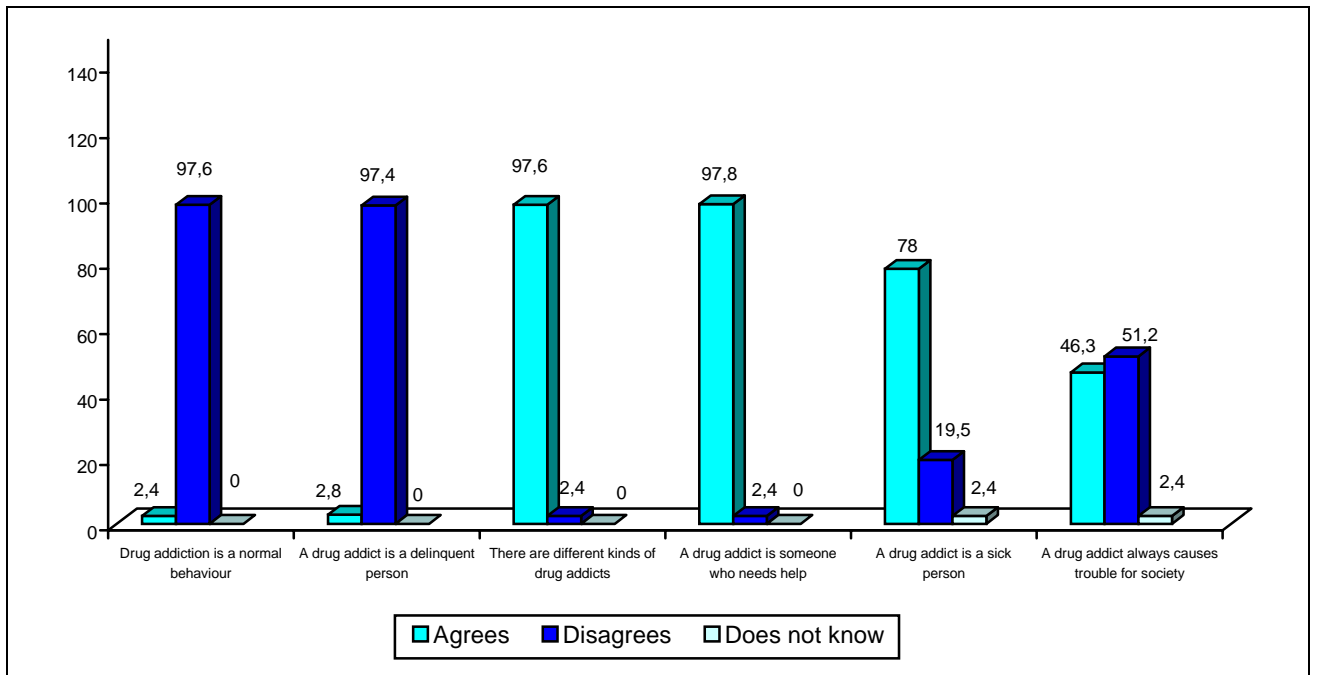


Chart no. 25  
Views of the wardens on the existence of drugs in the PE (%)

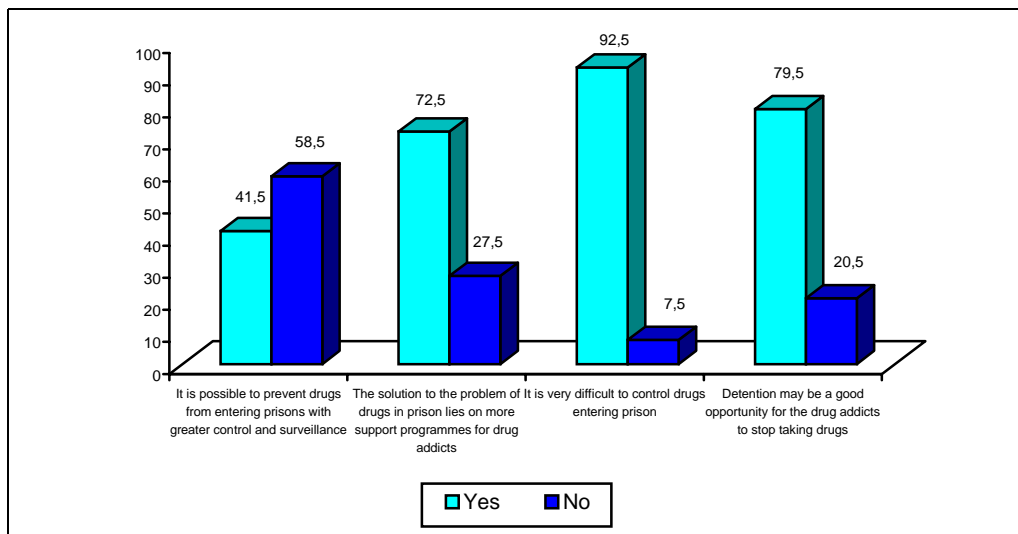


Chart no. 26  
Views of the wardens on the implementation of measures related to drug addiction

