



# Wiadomości Lekarskie

Czasopismo Polskiego Towarzystwa Lekarskiego



Pamięci  
dra Władysława  
Biegańskiego

TOM LXXII, 2019, Nr 12 cz. II, grudzień

Rok założenia 1928

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Ministry of Science  
and Higher Education

Republic of Poland

The journal Wiadomości Lekarskie is financed under Contract No. 888/P-DUN/2019 by the funds of the Minister of Science and Higher Education.

The Journal has been included in the register of journals published by The Polish Ministry of Science and Higher Education on July 31st, 2019 with 20 points awarded.

Wiadomości Lekarskie is abstracted and indexed in: PubMed/Medline, EBSCO, SCOPUS, Index Copernicus, Polish Medical Library (GBL), Polish Ministry of Science and Higher Education.

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**Credit Agricole Bank Polska S. A.: 82 1940 1076 3010 7407 0000 0000**

Cena prenumeraty dwunastu kolejnych numerów: 240 zł/rok (w tym VAT)

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ORIGINAL ARTICLE  
PRACA ORYGINALNA**CHRONIC ALCOHOLISM TREATMENT IN CUSTODIAL FACILITIES:  
UKRAINE'S EXPERIENCE DURING INDEPENDENCE**

DOI: 10.36740/WLek201912210

**Andriy Babenko<sup>1</sup>, Oleksandr Mazurenko<sup>2</sup>, Anastasiia Mernyk<sup>3</sup>**<sup>1</sup>ODESA STATE UNIVERSITY OF INTERNAL AFFAIRS, ODESA, UKRAINE<sup>2</sup>MINISTRY OF INTERNAL AFFAIRS OF UKRAINE, KYIV, UKRAINE<sup>3</sup>YAROSLAV MUDRIY NATIONAL LAW UNIVERSITY, KHARKIV, UKRAINE**ABSTRACT**

**Introduction:** Chronic alcoholism is a powerful catalyst for commission of many serious and particularly grave crimes - intentional homicide, bodily damage, robbery, plundering, traffic safety violations that led to fatalities. The vast majority of these offenders are sentenced to imprisonment. Although independent Ukraine refused their compulsory treatment, such experience, unfortunately, did not improve the situation. This will require finding new ways of solving the alcoholism problem that may be of interest to both post-Soviet countries and developed democracy countries.

**The aim** of this research is to trace the evolution of chronic alcoholism treatment in Ukrainian penitentiary institutions, identify the causes of its poor effectiveness under the current approach, and suggest some ways to minimize the negative impact of this disease on a patient and society.

**Material and methods:** The study is grounded in dialectical, historical, comparative, analytical, synthetic, statistical, monographic, sociological (interview) and criminological mapping research methods. The calculations and mapping were done using Microsoft Word 2016, Adobe Photoshop CS6 and Quick Map 2.2. According to the General Prosecutor's Office of Ukraine, criminal intensity of perpetrators of alcohol intoxication was calculated, and due to the analysis of medical and technological documentation on standardization of medical assistance to alcoholics, the peculiarities of voluntary treatment principle of convicted persons were established. The study group consists of 50 medical professionals working in the medical units of penitentiary and civilian healthcare facilities.

**Results:** According to 3/4 of the surveyed experts, about 50% of convicts need treatment for alcoholism. The factors that influence the increase in concentration of such persons in penitentiary institutions are: prevalence of alcoholism in the whole country; alcohol illegal use in penitentiary institutions; detaining of large mass of household alcoholics in penitentiary; exclusively voluntary treatment and medico-social rehabilitation; lack of alternative treatment methods for alcoholism and consolidation of the lasting effect of this treatment; etc. The consequences of the above are often further decay of alcohol; involvement in this pernicious habit of new unstable persons, especially young convicts; lack of qualified medical care, even in urgent cases that threaten person's life; genetic addiction of subsequent generations; relapse and recurrence of criminal behavior; etc.

**Conclusions:** There is a need for immediate monitoring of people with chronic alcoholism and alternative treatment modalities, such as substance abuse replacement therapy; allocation of material resources for implementation of specific measures aimed at reducing the alcoholism level of convicts; immediate receipt of licenses by medical units of penitentiary institutions that do not have them, etc.

**KEY WORDS:** alcoholism, alcohol addiction, prison, rehabilitation, treatment

Wiad Lek 2019, 72, 12 cz. II, 2451-2456

**INTRODUCTION**

The dangerous medical, social, moral and legal problem of our society was, and unfortunately is, the problem of alcohol addiction of large masses of the Ukrainian population. In terms of cultivation of negative traditions of almost daily alcohol consumption in the Ukrainian society there are a noticeable layer of population, for which alcohol became a habit, a norm of behavior, a constant of their existence. The danger of the abovementioned is compounded by the fact that such a model of leisure is becoming a powerful factor in attracting new individuals to alcohol addiction, hence the rapid spread of alcoholism [1, 35]. Therefore, it is no coincidence that Ukrainian narcologists state that if, in Ukraine, drug abused patients are potentially able to double their quantity almost every three years, then alcoholics - every two years [2]. Ukraine belongs to the

countries of medium-high alcohol consumption (12 liters per year), ranking the fifth in the world in terms of alcohol consumption per capita [3, 8].

This could be a basis for assumption that today we have no progress in chronic alcoholism treatment in Ukraine, since alcoholism remains not only a background phenomenon of Ukrainians, but also a significant background of their unlawful acts, as well as an unresolved problem during confinement in penal institutions. By the way, the interconnection between a crime (especially violent) and an alcohol addiction is well known. Alcohol plays a role in 31 percent of homicides, but it is mentioned in only 2.6 percent of television reports, 7.3 percent of newspaper accounts, and 5.6 percent of magazine reports of violent crime, with even lower percentages in homicides reporting [4]. For example, in the United States drunk driving is the most common alcohol-related crime.

Each year, more than 1.1 million Americans are arrested for driving while intoxicated, and more than half of these arrests end with convictions [5]. Therefore, it is no coincidence that today there is a lot of scientific researches on analysis of interconnection between the alcohol addiction of a person and offenses' commission.

Certain achievements in this sphere have been accumulated in the articles of Fazel S. (2006), Rhem J. et al. (2009), Babor T. et al. (2010), MacAskill S. et al. (2011), Rhem J. et al. (2012), Graham L. et al. (2012), Skarupski K.A. (2018), Galbicsek C. (2019), Trangenstein, P.J. et al. (2019) and others. However, there has been no scientific research on alcoholism problem in penitentiary institutions of Ukraine. The problematics of detaining of convicted patients with chronic alcoholism is disclosed mainly by some foreign authors in their researches (Parkes T. et al., 2010, MacAskill S. et al., 2011, Carnie J. et al., 2011, Bernstein MH et al., (2015), Hussong, AM et al (2019)).

## THE AIM

The purpose of the research is, at first – to analyze the evolution of approaches to combating alcohol addiction in penitentiary institutions, and secondly – to identify the causes of low effectiveness in overcoming or at least limiting of the alcoholism phenomenon in existing approaches to chronic alcoholism treatment; third – to develop propositions for minimizing of this disease's negative impact on the patient and the society as a whole.

## MATERIALS AND METHODS

This study was conducted during 2018-2019 and is based on the results of the study of: 1) the Unified Register of Pre-trial Investigations and Information and Analytical Work of the Prosecutor General's Office of Ukraine and the State Judicial Administration of Ukraine; 2) UNODC analytical materials; 3) quantitative indicators characterizing the contingent of convicts; 4) interviewing of 50 healthcare professionals working in the medical units of penitentiary and civilian health care institutions; 5) intensities of crimes committed under the influence of intoxication, with visualization of this crime's criminological characteristic by means of geographical map, which performs an additional explanatory function in assessing the extent of alcoholism spread in the country; 6) medical-technological documentation on standardization of medical care in the system of the Ministry of Health of Ukraine, including for persons with chronic alcoholism, in particular, so-called standards of medical care (clinical protocols of providing medical care to patients with mental and behavioral disorders due to alcohol addiction, international treatment and diagnosis recommendations). The empirical and statistical data presented are summarized and analyzed using descriptive statistics tools. The research is based on the use of dialectical, historical, comparative, analytical, synthetic, statistical, monographic, sociological and criminological mapping research methods. The calculations and mapping were done using the Adobe Photoshop CS6, Microsoft Word 2016 and Quick Map 2.2 software applications.

## RESULTS

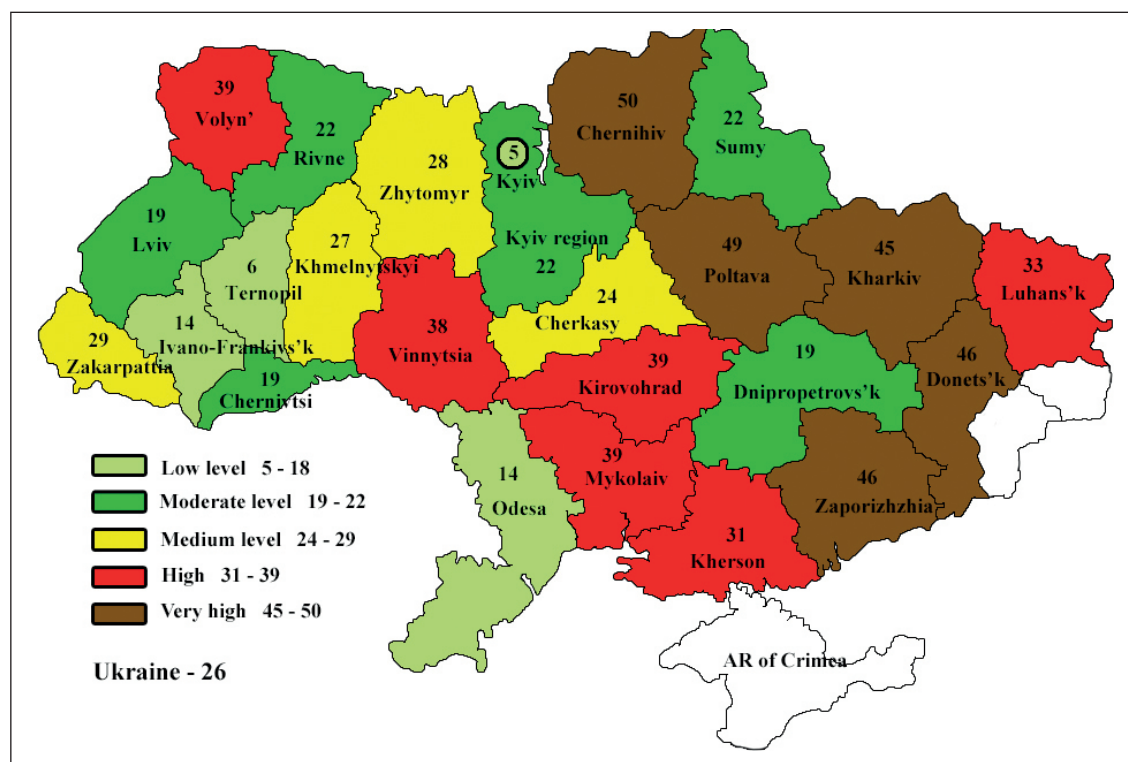
According to the State Criminal Enforcement Service of Ukraine, as of July 1, 2019, there are 9 584 detainees in 17 pretrial detention facilities and 12 penitentiary facilities; there are 34 488 convicts in 113 penitentiary facilities; 114 convicts are in 6 juvenile correctional facility [6]. It is reported that of the total number of females serving sentences, patients with alcoholism or drug addiction are more than 30% of them, similar parameters are recorded among male [7, 259].

In recent years Ukraine has been experiencing a persistently negative drunk-crimes situation. Annually in our country 14-16% of persons are drunk when committing crimes [8; 9]. Often intoxication is accompanied by the commission of crimes of high public danger: 34% of crimes of medium gravity; 30% of grave and 5.5% of especially grave crimes. Among identified intoxicated offenders lucrative and lucrative-violent criminals were dominated - thieves, robbers, muggers, bandits etc. (40%); violent criminals (36%); criminals whose offenses related to traffic safety and traffic violations (7.6%). At the same time, 20% of the regions of Ukraine are characterized by an abnormally high crime rate per 100,000 population: Chernihiv (50), Poltava (49), Zaporizhia (46), Donetsk (46) and Kharkiv (45). Consistently high intensity of perpetration of intoxication crimes per 100 thousand population (24% of regions) is observed in such areas as: Mykolaiv (39), Kirovohrad (39), Volyn (39), Vinnytsia (38), Lugansk (33), Kherson (31) (Fig. 1). These are the regions of the highest penitentiary institutions concentration and the highest crime rate.

Many of these persons are sentenced to imprisonment. Therefore, when they will be detained in penitentiary institutions there will also be a problem of this bad habit, addiction combating. And this will be difficult to resolve under circumstances existing.

According to physicians of penal and civil health care institutions, if you look at the situation in Ukrainian penal institutions, the following factors should be mentioned among the factors that influence the concentration of alcoholics: 1) prevalence and increase of alcoholism in the whole country; 2) numerical facts of alcohol and its surrogates illegal use in penal institutions, including as a result of corruption component; 3) significant influx of so-called household alcoholics into these institutions in recent years, which of course affect the spread of this addiction; 4) imperfection of treatment and medico-social rehabilitation of alcoholic convicts regulation; 5) in some cases, the short-term of detention, during which effective treatment and lasting effect of this treatment is unachievable; 6) lack of proper conditions for medical and re-socialization measures; 7) impossibility of applying progressive, including alternative (for example, substitutional therapy for drug users) treatment methods for alcoholism and the absence of science-based program for medical-social rehabilitation of alcoholics; 8) insufficient funding of the measures used and the general crisis of the country's criminal justice system; 9) low efficiency of convicted alcoholics' treatment even with their voluntary help; 10) etc.

The situation in Ukraine is further complicated by the fact that 114 medical units operate at the penitentiary institutions and detention centers of Ukraine [10], only 3 (!) are licensed for medical practice. The lack of proper control over the medical activities' quality in penitentiary institutions gives rise to inef-



**Fig. 1.** Geography of intoxication crimes' intensity, per 100,000 population in Ukraine, 2018

fectiveness of any health care measures, which is resulted in: low level of medical care for patients, including chronic alcoholics; insufficiency of medical supply; personnel crisis; extent of high wear level of the so-called fixed assets of medical equipment; low level of access of patients to medical care in secondary and tertiary level hospitals; subjection of medical personnel to a prison facility administration, which often finds itself in a conflict situation between the need to provide quality medical assistance and administration's efforts to adhere to regime of detention and punishment of prisoners [11].

Experts of alcohol addiction in penitentiary institutions problematics were also asked about the number of people in need of alcoholism treatment. 76% of respondents said that about half of convicts were in need of medical treatment and that in their own will alcoholic patients in most cases are reluctant to consult a doctor. However, such persons do not mind, in their words, "to strengthen the general state of organism". However, the emphasis is not on the need to undergo treatment for alcoholism itself, but to overcome other emerging diseases that has emerged due to alcoholism. Special literature provides interesting data on the persons' health status who have repeatedly committed and convicted (so-called recidivists): vast majority of such persons dies from alcoholism, drug addiction or illnesses that has developed as a result of alcohol or drugs addiction (about 91-92%) (V. Batyrgareieve, 2009) [12, 202]. It should be noted that convicted alcoholics are a special kind of criminals. Their stubbornness in the continuation of their criminal activity in future is largely due to deceases resulted from addiction. Such persons' behavior is very difficult to correct, and because of dramatic shift of accents in their lives, it is quite often that they ignore any social demands.

The problem of chronic alcoholism treatment in penitentiary institutions is compounded by the fact that current practice does not provide any single method of treatment that is effective for all patients. It is generally accepted that treatment is based on disease period, namely: intoxication, acute abstinence and post-abstinence [13, 106]. Therefore, it is possible to state only about a certain sequence of therapeutic effect on alcoholics in penal institutions. Israeli doctors offer the most optimal chronic alcoholism treatment today. All treatment procedure is divided into 6 stages: 1) psychological and psychiatric assessment of addiction degree, motivation level for alcoholism treatment (these procedures are carried out outpatient); 2) detoxification, which is a prerequisite for continued alcoholism treatment and consists of eliminating symptoms of abstinent syndrome (this stage is usually 3-6 days long and is performed in a specialized clinic); 3) "coding" (voluntary); 4) development of an individual plan for inpatient or outpatient alcoholism treatment with a rehabilitation program of at least two months duration; 5) full course of psychotherapy interventions with a full spectrum of medical support, as well as including family psychotherapy, patient's support by a consultant who himself/herself (!) has undergone a course of alcoholism treatment, specially trained and has extensive experience in providing such assistance; 6) regular communication of patient and his/her psychotherapist online [14; 15]. It is interesting to admit that this program is also used in treatment of alcoholic offenders in Israel.

In order to find out the reasons for the ineffectiveness of chronic alcoholism treatment in Ukrainian penitentiary institutions, it is appropriate to analyze the approaches to solving this problem which existed in practice since at least the beginning of the 1990s – since Ukraine's independency.



Compulsory treatment of chronic alcoholism remained as a measure in penal institutions for a long time of Ukraine's independency as it was in the Soviet Union. The reason for this approach was the provision of criminal law, according to which the court, regardless of imposed criminal punishment, could send a convicted of a crime committed on alcoholism base to compulsory treatment carried out in penitentiary facilities. For this purpose, sentenced persons subjected to such treatment were placed in specialized correctional labor colonies. Convicts whose alcoholism had already been revealed in penitentiary institutions, but who refused the treatment, were also subject to compulsory treatment. By the way, refusal of treatment was regarded as a serious violation of detention regime. Compulsory treatment usually lasted up to 1 year and 6 months [16]. From an ideological point of view, this approach was explained by the fact that society and state were allegedly interested in re-socialization of even chronic alcoholics. However, forced re-socialization by its nature is completely nonsense from fundamental human rights' perspective. This approach, by the way, has long been used by the countries of Western and Central Europe, South America.

What is the current approach of chronic alcoholism treatment in Ukrainian penitentiary institutions? First, it should be noted that medical treatment for chronic alcoholics should be aimed at the urgent state of patients and effective treatment of mental and behavioral disorders resulting from alcohol use in combination with scientifically validated behavioral therapy. The purpose of these measures is to improve somatic and mental health and reduce the crime recurrence. For urgent conditions, that can occur in alcoholics patients and need of immediate medical attention, there are some forms of acute intoxication (acute intoxication with delirium, disorders of perception, coma, seizures, pathological intoxication), other abstinence, alcohol withdrawal syndrome) with delirium without convulsions or with convulsions, and psychotic disorders (mixed, schizophrenic, mostly delusional, hallucinatory, polymorphic, or with depressive or manic symptoms) [20]. It has been stated in the US Regulations for the Treatment of Persons with Alcohol Abuse Disorders (2016) that people with alcohol addiction who get to a correctional facility, have a high risk of developing alcohol withdrawal syndrome. If this state is not diagnosed and adequate treatment is not prescribed it can progress to delirium disorder and death. This syndrome is common for people in prisons or temporary detention centers, it often occurs within the first 24 hours of their last alcohol use. This complicates the provision of medical and psychiatric care. It is important to note that abolition can lead to suicidal acts, which are a significant cause of death in correctional facilities and that can be prevented [21]. Therefore, there may often be situations where it is necessary to provide emergency medical care without patient's consent. For example, the New Clinical Protocol "Emergency Care: Pre-hospital Stage" (2019), which is based on an attempt to adapt the best medical practice of European and North American countries, explicitly states that persons who tried to commit suicide, expressing suicidal intent or have other concomitant features that give emergency medical staff an ability to assume the patient's suicidal motives are considered to be incapable of making their own decisions [22].

Therefore, it is presumed that in the cases of the above patients' states do not raise the issue of adherence to the principle of voluntary treatment, because they require emergency medical care, which is emphasized in the Protocols of medical narcological care approved by the Ministry of Health of Ukraine. As for other conditions associated with alcohol addiction syndrome, their treatment is now possible only with the patient's consent.

It should be noted that this approach to solving an extremely serious medical and social problem is combined with some negative sides that need to be stated.

First, the untimely treatment of chronic alcoholism of convicts in penitentiary institutions creates a situation of further disintegration of alcoholics' personality and involvement of new unstable persons (especially young convicts) to such pernicious habit. Numerous facts of manufacturing of alcohol or its surrogates in penal institutions contribute to this process.

Secondly, chronic alcoholism is the cause of bad genetics for later generations born of such persons. This issue is known and will always be the focus of attention of geneticists and doctors worldwide [23; 24; 25].

Third, mental disorders that arise as a result of alcoholism can seriously affect a person's ability to make any decision including that of treatment necessity.

Fourth, evidence-based medical researches established that disorders of psyche and behavior due to psychoactive substances' use are chronic, recurrent disease that requires effective treatment with long-term support [21]. At the same time, this disease is the most important cause of both primary crime and recidivate illegal behavior and causes premature death [26; 27; 28].

All this gives reason to believe that existent principles of drug addicts' treatment (including alcoholics), which include the principles of voluntariness, maximum individualization and comprehensive approach to treatment, refusal to use psychoactive substances, etc. [13, 106; 29; 30], in penitentiary institutions will always be confronted with the principle of proportionality the essence of which can be expressed in the following way: "harm to society, in the case of voluntary treatment of chronic alcoholics vs harm to person's human dignity undergoing forced chronic alcoholism treatment".

Trying to solve this dilemma, one should look at the idea of introducing (at least in penitentiary institutions) a kind of substitute supportive therapy for chronic alcoholism treatment. As it is known, therapy-like treatment for drug addiction is similar in principle, on the one hand, is entirely based on voluntariness of a person to use an appropriate medicines in order to relieve him/her of suffering, and on the other, is carried out under society's control. In this way, the balance between fundamental human rights is most fully respected – voluntarily resorting to treatment and reducing the potential harm to society. This technique will undoubtedly have perspective in chronic alcoholism treatment. So, in any case, there will be a conflict between the public interest in limiting alcoholism spread and thus preserving nation's health and possibility of persons with certain health disorders to voluntarily receive medical care on principles of evidence-based medicine in accordance with clinical protocols developed using existing methods of national and / or professional medical as-

sociations of Member States of the European Union, the United States of America, Canada and the Australian Union.

## CONCLUSIONS

Now in Ukraine there is an extremely dangerous situation with alcohol abuse. It is particularly acute amongst crime perpetrators and imprisoned persons. The penitentiary reforms undertaken in Ukraine since independence, including the transformation of approaches to treating chronic alcoholism in these institutions, have only exacerbated the situation. As a result, about 50% of prisoners in Ukrainian penitentiary institutions need treatment for chronic alcoholism, and the rest ones are active carriers of the "culture" of alcohol abuse. The unsatisfactory regulatory treatment of alcoholism contributes to the fact that these institutions become the focus of persons with alcoholism concentration whose resocialization after their discharge is complicated by addiction. Thus, such persons become a catalyst for alcohol-related lifestyle spread among the population. This leads to further aggravation of social, medical and criminological situation in the country.

Treatment of chronic alcoholism should be considered as a special segment of work in penitentiary institutions, which should include at least several interconnected measures: a) continuous monitoring of the alcohol addiction situation in these institutions; b) introduction of progressive alternative methods of treatment of chronic alcoholism of convicts; c) allocation of material resources for implementation of such treatment; d) identification of specific measures aimed at reducing convicts' alcoholism; e) organizational work on implementation of such measures; e) continuous scientific support of existing problem and development of appropriate regulatory framework for its solution; g) immediate obtaining of licenses by those medical units of penitentiary institutions which do not have them.

Treatment of all manifestations of alcoholism (except for urgent conditions) of convicts in penitentiary institutions should, after appropriate diagnosis, take place solely based on voluntary consent. At the same time, in order to strike a balance between observance of one of the fundamental human rights, it is necessary to develop the idea of a peculiar substitution maintenance therapy and treatment of alcoholism in voluntary treatment and reduction of possible harm to society. Such an idea may prove to be promising for any country trying to address the problem of treating chronic alcoholism.

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#### Conflict of interest:

*The Authors declare no conflict of interest.*

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**Received:** 02.09.2019

**Accepted:** 25.11.2019