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OVERCOMING BARRIERS: ACCESS TO HEALTH IN THE PRISON SYSTEM

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Abstract: This work is carried out in a group of inmates from a population deprived of liberty, with the objective of showing the importance of health services for these people, not only focusing on physical health, but as a whole, physical health, mental and social, preparing and making them more confident for an adequate and healthy return to society. Making the health service a very important tool for resocialization.

Keywords: Health, Prison System, Society.

INTRODUCTION

According to SERIS – State Secretariat for Resocialization and Social Inclusion, the state of Alagoas has a population of 8,172 people deprived of their liberty, 951 of whom are in the “Presídio do Agreste”, a unit managed by REVIVER – ADMINISTRAÇÃO PRISIONAL in partnership with the government of state, is located in the municipality of Girau do Ponciano. The most common pathologies among inmates are hypertension and psychogenic problems, based on a survey carried out in this unit, around 15 new cases are detected each month.

Among the rights guaranteed by law is the right to health for all citizens. So, according to the Brazilian legal system itself, people deprived of their liberty continue to maintain a minimum citizenship status. Therefore, access to health must be guaranteed. (BRAZIL, 1988)¹

Thus, they have guaranteed access to assistance rights, such as material, health, legal, educational, social, religious and work assistance (BRASIL, 1984)². According to the Penal Execution Law, in its Art 14 – “Health care for prisoners and inmates, of a preventive and curative nature, shall comprise medical, pharmaceutical and dental care”.

DEVELOPMENT

In view of the difficulties promoted by the

environment, the objective is to provide an improvement in the quality of life of the prison population, promote a series of intersectoral activities, always aiming at valuing the human being and improving the general state of health.

The health actions started in mid-2016, but from April 2018, for a better survey of the results of the activities developed, a group of 20 inmates of the prison unit was formed, this group was referenced through medical reports and referrals from the other sectors, aged between 19 and 65 years, affected by Hypertension, Diabetes, Psychological Disorders and Sedentary lifestyle, and inmates who use continuous medication and psychotropic drugs.

Through screening and based on the medical records of the nursing sector of the Presídio do Agreste, a group of inmates who have some type of lack of control in their general health status was selected, prioritizing those who make use of controlled and chronic medication. The sectors involved performed triage on each reeducation, seeking to identify the situation in which the health status of each one was. The group is provided with body practices under the supervision of the Physical Education sector, Therapeutic Workshops with professionals from the Psychology and Occupational Therapy sector, if necessary, the group is entitled to a differentiated diet offered by the Nutrition sector.

The technical staff of the unit's health area is composed of a general practitioner, a psychiatrist, psychologists, nurses, nursing technicians, pharmacists, physical education professionals, social workers, nutritionists and occupational therapists. Educational activities and lectures related to health are held periodically, the team of professionals is always available to the group for when there is a need for intervention and individual assistance.

The group in question was monitored and evaluated in detail by the professionals involved, for a period of ninety days, evaluations were carried out at the beginning and end of this period, with positive results in all of them. Some of the benefits generated by the project were a reduction in medication administration, a reduction in depressive and anxiogenic conditions, adherence to physical activity and a reduction in sedentary lifestyle, control of blood pressure and glycemic parameters, improvement in sleep quality and self-esteem, better socialization reeducated/health professionals.

All results are obtained through observation of medical records; anthropometric assessment; evaluation form; pharmaceutical report; medical/psychiatric and psychological referral; and follow-up services. It was easy to notice the improvement in the general state of health and the evolution of each reeducation in the proposed activities.

FINAL CONSIDERATIONS

To achieve success in health improvement actions in this type of population, it is necessary to overcome the difficulties imposed by the confinement conditions, the operating system of each unit, physical structure, resistance of the inmates themselves, a series of factors that make access to actions difficult. and health services in an integral and effective way. By fully serving this population, the health service contributes to a healthier society, encouraging changes in attitude and behavior, and readapting the individual to return to society.

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