Important Benchmarks:

- In the last 6 months of 2011 over 1,500 cases were reviewed, approximately 200 inmates were released from arbitrary detention and 150 cases were adjudicated resulting in inmates being sentenced.
- A better scheme of recordkeeping, improved case tracking procedures and an improved system of documentation exists.
- The number of complaints by detainees decreased.

Challenges and Priorities in 2012 - 2013

- Increasing the number and capacity of magistrates and judges working in the criminal justice system.
- Improving accessibility to remote prisons and facilitating visits by judicial authorities.
- Increasing the number of adequately trained prison clerks.
- Supporting Congolese National Police to follow-up on cases.

United Nations Stabilization Mission in Haiti (MINUSTAH)

Addressing Mental Health in the Prison Population of Haiti

This is a personal account from Michaela Stiepel, a Psychologist/Corrections Officer from Germany who is working for the MINUSTAH Corrections Advisory Unit. Ms. Stiepel was made available as part of the "governmentprovided personnel" programme. She advises the Haitian Direction de l'Administration Pénitenciére (DAP) on mental health issues in prisons.

Survey

When I first arrived in Haiti, I was tasked with reviewing mental health issues affecting inmates in Haitian prisons across the country. I found that, although there are very few cases of mentally-ill inmates in Haitian prisons as compared to prisons in Canada, the USA or Europe, those that are behind bars are of a critical nature, needing immediate attention. The law in Haiti states that mentally-ill offenders are not to be kept in a prison.

Typical Mental Health Issues in Prisons

There are different types of mental illness that are frequently encountered in prisons. There are restless inmates who are constantly in motion, talking or singing all day and night. These inmates are often not capable of maintaining a normal conversation with other prisoners. They normally face great difficulties coping with the social environment of a prison and are often unable to adapt to prison conditions. This condition can be easily recognized by staff who may seek help for this person.

Other inmates stop talking and communicating entirely are often apathetic and lay almost motionless on the ground or cower in a corner for most of the day. They sometimes stop eating and/or drinking or consume very little. The reason is in most cases major depression. Two inmates died of this condition in Haiti in June 2010 to March 2012. A third inmate was saved when his case was brought to the attention of the Medical Director of the Prison Administration of Haiti who authorized the indicated treatment from a Haitian psychiatrist.



Current Initiatives

Haiti has only two psychiatric institutions: The *Mars and Kline Hospital* located in Port-au-Prince, and the *Defilé de Bedet Hospital* in the district of Croix-Des-Bouquets. I learned of approximately 20 psychiatrists in Haiti, with only five working in the public health system. The others are in private practice. There are no neurology specialists but there are 194 psychologists in Haiti.

The only book published on psychiatry with a specialization in Haitian ethno psychiatry dates back to 1961 and was written by the doyen of Haitian Psychiatry, Dr. Legrand Bijoux. It is considered as the main source of information for psychiatry in Haiti. In 2008, Haitian psychiatrists who had immigrated to Canada spearheaded an initiative to raise awareness of psychiatric issues in their homeland. Interest in psychological and psychiatric topics gained more prominence following the devastating earthquake of 12 January 2010, bringing attention to those suffering from psycho trauma. According to the website of the World Health Organization (WHO), the year 2011 was dedicated to bringing attention to mental health issues. The WHO published and distributed a book called *mhGAP–Intervention Guide* which advocated that developing countries work on introducing mental health issues into primary health care. Currently, there is a psychologist at the WHO/PAHO office in Port-au-Prince doing this type of work at the level of the *Ministère de la Santé et de la Population* (MSPP).

Important work on mental health issues in Haiti is done by a group coordinated by psychologist Zohra Abaakouk from the WHO/ PAHO. The group is constituted of representatives of the MSPP, the Directors of the two psychiatric institutions in Haiti, national and international non-governmental organizations and experts from abroad (mainly Haitian psychiatrists who emigrated and are working in the USA or Canada). The group coordinates assistance given to those with mental-health issues and prepared a workshop to develop a mental health plan for Haiti which took place in June 2011. As a result of input from the MINUSTAH Corrections Advisory Unit, mental health in the prison system was included in this plan.

The organization International Medical Corp (IMC) provided inmates with mental health problems at the women's prison in Pétionville psychotropic second generation drugs which have almost no negative side effects. The treated inmates improved their ability to cope with prison conditions and made some progress in the area of social skills. Three women in pretrial detention were released after being treated. As a result of the work done at Pétionville, there was a positive shift in the attitude of prison staff towards mental illness. The project was considered a great success. However, it ended in June 2011 and left a void. With the consent of the Deputy Medical Director of the DAP, the Haitian psychiatrist that worked with the IMC continues to attend the prison twice a week to follow up with the female inmates receiving medication and to speak to other inmates who claim to have problems. It would be wonderful if this successful project could continue with voluntary donor funding.

The Way Ahead

Mentally-ill persons in prisons and outside remain a vulnerable group in the Haitian society. The MINUSTAH Corrections Advisory Unit has worked with the DAP to include a chapter on mental health in a DAP policy document on health and nutrition. This is a big step in acknowledging the need for adequate mental health care services in prisons in Haiti. Another milestone this year was the delivery of the very first educational awareness session on mental health issues in the prison system, presented to prison nurses from across the country. The next project is to conduct a review of prisoners with mental health problems at the *Pénitencier National*, the main prison in Port-au-Prince. The MINUSTAH Corrections Advisory Unit will continue to work closely with the DAP on mental health issues. Only continuous education and awareness-raising can bring about change.

United Nations Mission in Liberia (UNMIL)

UNMIL Partners to Improve Detention Conditions in Liberia

When the first UNMIL Corrections Advisory Unit (CAU) staff arrived in Liberia in February 2004, there were two organizations engaged in corrections reform that immediately established contact: the Prison Fellowship Liberia (PFL, a member of the organization Prison Fellowship International) and the International Committee of the Red Cross (ICRC). The ICRC had been in Liberia throughout the conflict. During this period, its priority was the protection of persons detained by the various sides in the conflict. Following the Peace Agreement of 2003, ICRC continued many of its activities in the immediate post-conflict period - including monitoring places of detention under the Bureau of Corrections and Rehabilitation (BCR). ICRC also started immediately working on reconstructing and refurnishing the Monrovia Central Prison to relieve the conditions of inmates held in custody at the inadequate National Police Headquarters by transferring them to this prison.



Mother Logan UN Photo/Staton Winter