

COMMUNITY-LED MONITORING IN PRISONS OF CEECAC REGION

BACKGROUND:

The purpose of the study was to assess the existing policies and practices of community-led monitoring (CLM) in prisons of CEECAC region. The results of the study became **the basis for the CEECAC Road map on CLM of access to HIV, TB, HCV services without discrimination**. The study included desk research and 16 in-depth interviews with community representatives and civil society activists from 8 countries of the region.

DESCRIPTION:

CLM policies and practices in prisons differ much from country to country based on country context and the level of cooperation with penitentiary authorities and prison administrations. **There are important differences between CLM approaches in the penitentiary and civil sector** attributed to limited opportunities for direct engagement with the incarcerated population, restricted access to the Internet and digital communication devices, security threats, confidentiality of data, limited access to prisons, possibilities to use received data for advocacy.

LESSON LEARNED:

While CLM is supposed to be fully community-driven, **in the situation with prison settings it is necessary to use existing government monitoring mechanisms with the involvement of community representatives to conduct CLM in prisons**. Such mechanisms include public oversight commissions/groups (POC), national preventive mechanisms (NPM), Ombudsperson's office and other independent national mechanisms. CLM may serve as a tool to inform POCs and NPMs about specific instances of right to health violations and can bolster their ability to identify indicators of inadequate healthcare within prisons, particularly for specific vulnerable groups. Best CLM practices include Ukraine with a special digital tool developed by a CBO and accepted for official use by prisoners by the penitentiary authorities, Moldova with regular CLM conducted through service provision projects by NGO and active participation of community representatives in the work of NPM.

CONCLUSIONS / NEXT STEPS:

Based on the result of the study we have proposed a logical matrix for CLM implementation that can be adapted on the ground based on the CLM objectives, particular country contexts, capacity of organizations, conducting CLM and other relevant factors, as well as suggested data institutionalization mechanisms based on specific country examples of CLM practices in the domain of ensuring the right to health in prisons.

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ROADMAP



E U R A S I A N
MOVEMENT FOR THE

R I G H T T O H E A L T H
I N P R I S O N S