REVISTA BRASILEIRA DE MEDICINA DE FAMÍLIA E COMUNIDADE
RBMFC

www.rbmfc.org.br
ISSN 2179-7994

Research Article

Clinical practices involving the use of psychotropic drugs in the prison context: an integrative review

Práticas clínicas envolvendo o uso de medicamentos psicotrópicos no contexto prisional: uma revisão integrativa

Prácticas clínicas que implican el uso de medicamentos psicotrópicos en el contexto penitenciario: una revisión integradora

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Abstract

Introduction: The prison population is considered a target audience for the medicalization process. **Objective:** To conduct a systematic bibliographic survey of the literature on clinical practices involving psychotropic drugs applied to this target audience. **Methods:** Integrative literature review based on the application of the descriptors "prisons," "psychotropic drugs," and "mental health care," both in Brazilian Portuguese and English languages, to the Scopus, Science Direct, NCBI (via PubMed), and Google Scholar databases, considering as the starting point the research question "What are the strategies used in the context of the prison system regarding clinical practices involving the use of psychotropic drugs?". **Results:** A total of 18 articles were selected, from which it can be inferred that the reformulation of prison health policies should include harm reduction programs, increased access to mental health services, strengthening of support networks inside and outside prisons, and compliance with the social determinants of psychotropic drug use. **Conclusions:** The results of this study can support educators, health professionals, managers, and policymakers to develop more assertive, directive, effective, and safe strategies for the health care of this population.

Keywords: Prisons; Psychotropic drugs; Mental health assistance.

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Funding:
no external funding.
Ethical approval:
not applicable.
Informed Consent Form:
not applicable.
Provenance:
not commissioned.
Peer review:
external.
Received: 07/31/2025
Approved: 04/01/2026
Associate Editor:
Thiago Figueiredo de Castro

How to cite: de Medeiros DHB, Batista AM. Clinical practices involving the use of psychotropic drugs in the prison context: an integrative review. Rev Bras Med Fam Comunidade. 2026;21(48):4933. https://doi.org/10.5712/rbmfc21(48)4933

Resumo

Introdução: A população privada de liberdade é considerada público-alvo do processo de medicalização. **Objetivo:** Realizar levantamento bibliográfico sistematizado da literatura acerca das práticas clínicas envolvendo medicamentos psicotrópicos aplicadas a este público-alvo. **Métodos:** Revisão integrativa da literatura baseada na aplicação dos descritores "prisões", "psicotrópicos" e "assistência à saúde mental" – e seus respectivos descritores em inglês – às bases de dados *Scopus*, *Science Direct*, *National Center for Biotechnology Information* (*NCBI*, via *PubMed*) e *Google Scholar*, tendo como ponto de partida a pergunta de pesquisa "Quais as estratégias utilizadas no contexto do sistema prisional acerca das práticas clínicas envolvendo o uso de psicotrópicos?". **Resultados:** Foram selecionados 18 artigos, por meio dos quais depreende-se que a reformulação das políticas de saúde prisional deve incluir programas de redução de danos, ampliação do acesso a serviços de saúde mental, fortalecimento das redes de apoio dentro e fora das prisões e observância aos determinantes sociais do consumo de psicofármacos. **Conclusão:** Os resultados deste estudo contribuem como subsídio para que educadores, profissionais de saúde, gestores e formuladores de políticas públicas desenvolvam estratégias mais assertivas, diretivas, efetivas e seguras para assistência à saúde desta população.

Palavras-chave: Prisões; Psicotrópicos; Assistência à saúde mental.

Resumen

Introducción: La población penitenciaria se considera un público objetivo para el proceso de medicalización. **Objetivo:** Realizar una revisión bibliográfica sistemática de la literatura sobre prácticas clínicas con psicofármacos aplicadas a esta población objetivo. **Metodos:** Se realizó una revisión bibliográfica integradora utilizando los descriptores "prisiones", "psicotrópicos" y "atención de salud mental" y sus respectivos descriptores en inglés en las bases de datos Scopus, Science Direct, NCBI (vía PubMed) y Google Académico. A partir de la pregunta de investigación "¿Qué estrategias se utilizan en el sistema penitenciario respecto a las prácticas clínicas con el uso de psicofármacos?". **Resultados:** Se seleccionaron dieciocho artículos, de los cuales se infiere que la reformulación de las políticas de salud penitenciaria debe incluir programas de reducción de daños, la ampliación del acceso a servicios de salud mental, el fortalecimiento de las redes de apoyo dentro y fuera de las prisiones, y el cumplimiento de los determinantes sociales del consumo de psicofármacos. **Conclusión:** Los resultados de este estudio contribuyen a que educadores, profesionales de la salud, gestores y formuladores de políticas públicas desarrollen estrategias más asertivas, directivas, eficaces y seguras para la atención de la salud de esta población.

Palabras clave: Prisiones; Psicotrópicos; Atención a la Salud Mental.

INTRODUCTION

Currently, approximately 11 million people are detained in criminal institutions around the world, either as preventive prisoners/provisional prisoners or convicted/sentenced prisoners. In this scenario, Brazil has the 3rd largest prison population. This represents 390 prisoners/100 thousand inhabitants, with Brazil ranking 15th in the World Prison Population List.[1]

Although penitentiaries have been conceived as instruments of crime control and prevention, in practice, they intensify health problems among inmates.[2] From this perspective, biopower is manifested through practices that regulate bodies and populations, through mechanisms such as psychiatry and normalization of conducts to exercise authority over individuals.[3]

In the prison context, this logic is evidenced in the medicalization of the incarcerated offenders. Exposure to violence, waiting for trial in overcrowded and unhealthy spaces, and uncertainty about the future generate profound impacts on mental health. Thus, the use of psychotropic drugs exceeds its therapeutic function and becomes an instrument of behavioral management, in which biomedical practices act in line with the control of the prison system, which raises important ethical and clinical reflections and requires careful analysis of individual needs and institutional specificities.[4-6]

The prison population is one of the main target audiences for the medicalization process, particularly with psychotropic drugs. In addition to medicalizing political, economic, social, and cultural issues, psychotropic drugs become a currency of exchange or mechanism of survival, reinforcing the vulnerability

of inmates and perpetuating disruptive behaviors. Thus, instead of promoting rehabilitation, these drugs, most often, suppress symptoms without treating their primary causes.[7,8]

Therefore, it is paramount to know how the medication/medicalization process unfolds in the prison context, particularly regarding the use of psychotropic drugs. This will support the establishment of more effective and safe medication processes, better implementation and remodeling of what is provided for in public policies to qualify health care for incarcerated people.

Taking this into consideration, the objective of this study was to carry out an integrative literature review on clinical practices involving psychotropic drugs applied to the prison population.

METHODS

This is an integrative literature review, a method that provides the synthesis of knowledge and the incorporation of the applicability of results of significant studies in practice,[9] whose steps are presented next.

Step 1: Elaboration of the guiding question

In order to achieve the objective of this study, the starting point was the guiding question: "What are the strategies used in the context of the prison system regarding clinical practices involving the use of psychotropic drugs?".

Step 2: Literature search

To this end, the descriptors "*prisões*," "*psicotrópicos*," and "*assistência à saúde mental*," in Brazilian Portuguese — together with the respective descriptors in English, "prisons," "psychotropic drugs," and "mental health care," which were intersected by the Boolean operator *"AND"* — were applied to the Scopus, Science Direct, National Center for Biotechnology Information (NCBI, via PubMed), and Google Scholar databases, more specifically through the combinations "prisons and psychotropic drugs" and "prisons and mental health care," in both languages. This search strategy was applied throughout the year 2024.

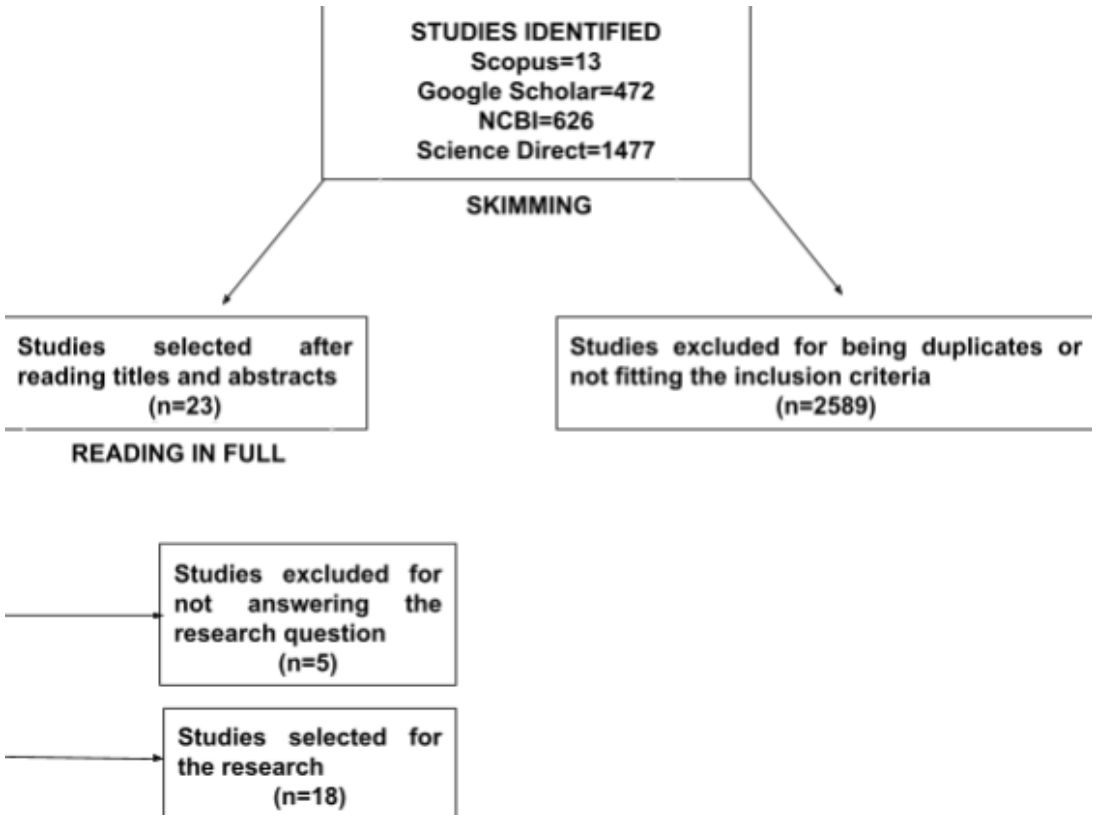
In addition, articles written in Brazilian Portuguese, English, and Spanish and that answered the research question were included. There was no time-frame restriction. Consequently, articles that did not meet these criteria were excluded.

Initially, titles and abstracts of the 2,588 articles initially found were skimmed, in order to exclude duplicate articles and/or those that did not fit the research question. Subsequently, 24 articles were selected for reading in full. Afterward, 18 articles were selected to integrate the study for answering the research question indeed. In Figure 1, the search strategy is presented in a flowchart.

Step 3: Data collection

After the previous step, data were extracted from the selected articles, which included title, authors, publication year, and findings (clinical interventions related to the use of psychotropic drugs, effectiveness of these interventions, and challenges faced in the implementation of clinical practices in prisons), which are presented in Chart 1.

Imagem em baixa resolução. Solicitamos uma nova aos autores e estamos aguardando.



Source: prepared by the authors.
Figure 1. Flowchart of the search strategy for the selection of articles.

Step 4: Critical analysis of the included studies

The data extracted from the selected articles were organized in an increasing chronological order of publication, seeking to highlight the historical itinerary of scientific production on the subject, and in such a way to enable comparison between different studies, aiming to identify convergent and divergent aspects in clinical practices related to the use of psychotropic drugs in the prison context.

This allowed us to identify areas that demand greater attention and to produce recommendations for clinical practice, in this case: 1) Use of psychotropic drugs and aggressive behaviors in the prison setting; 2) Ethical and legal standards in the use of psychotropic drugs; 3) Mental health in the prison system and access to health services; 4) Mental health of incarcerated women; 5) Use of psychotropic drugs and biopolitical control; and 6) Use of psychoactive substances in the prison setting: a public health issue.

Step 5: Discussion of the results

Based on the interpretation and synthesis of the results, possible knowledge gaps are identified and priorities are defined for future studies, including conclusions and researcher's inferences.

Step 6: Presentation of the integrative review

The very integrative review is presented, according to the five steps previously mentioned.

RESULTS

According to the analysis of the 18 selected articles, we identified different perspectives on the use of psychotropic drugs in the prison setting, as per Chart 1. For a better understanding of the findings, the studies were organized into six thematic blocks, in which articles on similar aspects were gathered. This strategy allowed us to deepen the interpretation of the data, highlighting the various dimensions involved in the prescription and use of psychotropic drugs among the incarcerated population.

Chart 1. Synthesis of the selected articles.

Authors	Title	Publication year	Findings
A[10]	Effect of psychotropic drugs on aggression in a prison setting	1975	Study conducted in a maximum-security prison in the United States, with the objective of evaluating the relationship between the use of psychotropic drugs and the frequency of aggressive behaviors among inmates. The authors found a significantly higher frequency of violent incidents among prisoners under treatment with psychotropic drugs, compared to the periods when these same inmates did not use these drugs. Anxiolytics, especially Diazepam (present in 81% of cases), were associated with a higher number of aggressive behaviors (3.6 times higher during its use). Other psychotropic drug classes resulted in a rate of aggressive incidents 2 times higher than prisoners who did not use them.
B[11]	The violation of psychiatric standards of care in prisons	1980	Study conducted in three prison systems in the United States, aiming to evaluate violations of psychiatric care standards in these settings. Problems, such as inadequate architecture, lack of qualified personnel, prescription and distribution of drugs by professionals without training, and punitive instead of therapy approach, were verified. The authors warn psychiatrists to avoid unnecessary prescription of drugs, especially tranquilizers, and highlight the need to address conditions that aggravate mental health issues, such as overcrowding, solitary confinement, and lack of adequate programs for inmates with mental disorders. Minimum standards of personnel and transfer of prisoners with mental illness to psychiatric hospitals are recommended.
C[12]	The administration of psychotropic drugs to prisoners: state of the law and beyond	1990	Study conducted in the United States to assess the legal framework and ethical challenges involved in the administration of psychotropic drugs for prisoners, especially in contexts of involuntary prescription. The authors demonstrated that the administration of psychotropic drugs involves conflicts between the need for medical treatment, individual rights of inmates, and demands for institutional security. They pointed out that involuntary prescription, in particular, raises questions about informed consent, abuse of power, and the role of drugs as behavioral control tools. They emphasize the importance of ensuring that the use of psychotropic drugs is guided by clear clinical diagnoses and respects ethical and legal principles, to avoid coercive practices that compromise the human rights of incarcerated offenders.

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Chart 1. Continuation.

Authors	Title	Publication year	Findings
D[13]	Prisonomics and the use of psychotropic drugs on incarcerated offenders: ethical considerations	2000	Study conducted in prison systems in the United States aiming to investigate ethical implications of the use of psychotropic drugs in prison populations. The authors sought to identify inappropriate practices in the administration of these substances and propose ethical guidelines to ensure that their use respects the human rights and autonomy of inmates. They verified the following inadequate practices: administration of psychotropic drugs by professionals without proper training; use of these substances as behavioral control tools or silencing of inmates, or to justify overcrowding; and absence of informed consent in prescription processes. It should be noted that these drugs should not be used as a tool of oppression, to justify overcrowding or silencing prisoners, and that they should be administered exclusively by licensed health professionals, ensuring the informed consent of inmates.
E[14]	Mental health performance measurement in corrections	2008	Study conducted in correctional facilities in the United States aiming to evaluate the performance of prisons in providing mental health care to incarcerated offenders with severe mental illness. The authors verified that correctional facilities became, by necessity, great providers of mental health care for these patients, although most of these facilities do not offer quality care nor follow national guidelines for mental health screening and treatment. To improve care, strategies were developed for adherence to drug therapy, suicide prevention, planning of mental health treatments, and controlled use of sleeping drugs.
F[15]	Prescription in prison: minimizing psychotropic drug diversion in correctional practice	2014	Study conducted in correctional facilities in the United States aimed at investigating the diversion, use, and abuse of psychotropic drugs prescribed in the prison setting. In addition, the authors sought to identify clinical practices that can minimize risks associated with drug prescription and promote more effective and ethical mental health care. Among the clinical practices, the following were highlighted: implementation of strict drug tracking systems, laboratory monitoring to detect diversions, continued education of health professionals on ethical standards of prescriptions, and prioritization of non-pharmacological therapeutic alternatives when possible. Use, abuse, and diversion of prescribed drugs are frequent issues in correctional facilities, involving aspects such as prescription practice, most commonly prescribed drugs, motivation for abuse, and detection methods, including laboratory monitoring.
G[16]	Accounting for psychotropic medication changes in prisons: patient and doctor perspectives	2015	Study conducted in prison institutions in the United Kingdom to investigate perspectives of patients and physicians on changes in psychotropic drug prescriptions. The authors found that psychotropic drugs are widely used in the treatment of mental illness, but prisoners report that their prescriptions are often altered or withdrawn upon entering prison, increasing their suffering. Patients claimed the right to psychotropic drugs, questioned the clinical reasoning of prison physicians, pointed out communication failures, and attributed health worsening to changes in pharmacological therapy. Clinical needs in the prison setting were prioritized in relation to previous treatments.

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Chart 1. Continuation.

Authors	Title	Publication year	Findings
H[17]	*Prevalencia y predictores del consumo de sustancias psicoactivas entre varones en prisión* [Prevalence and predictors of psychoactive substance use among incarcerated men]	2015	Study conducted in prison units in Spain aimed at investigating the prevalence of psychoactive substance use among incarcerated men. The authors observed that drug use represents a serious public health issue due to its high prevalence and negative impacts on the health of inmates.
I[18]	*Implicaciones del consumo de sustancias psicoactivas sobre la salud de hombres privados de libertad* [Implications of psychoactive substance use on the health of incarcerated men]	2015	Study conducted in prisons in Latin America aiming at investigating the relationship between psychoactive substance use and victimization in the prison setting. The authors found that victimization and consumption of these substances are strongly associated, which emphasizes the need for in-depth studies to develop effective preventive measures and improve living conditions in this setting.
J[19]	*Consumo de medicação psicotrópica em uma prisão feminina* [Psychotropic drug use in a women's prison]	2015	Study conducted in a women's prison unit in Northeastern Brazil, aiming to understand the factors that influence the use of psychotropic drugs among these women. The authors verified that everyday life in prison, difficulty accessing medical care, and lack of family contact are key factors to understand the use of psychotropic drugs among inmates. The importance of interdisciplinary political psychology is highlighted, oriented toward promoting a fairer society.
K[20]	*Incarcerated women's experiences and beliefs about psychotropic medication: an empirical study*	2017	Study conducted in women's prisons in the United States to investigate experiences and beliefs of incarcerated women regarding the use of psychotropic drugs. The authors found that the use of psychotropic drugs in incarceration involves complex interaction between therapeutic effects of these drugs and factors such as psychological impact, personal agency, locus of control, stigma, and perceived biological vulnerability.
L[21]	*A saúde e o psicotrópico no sistema prisional* [Health and psychotropic drugs in the prison system]	2017	Study conducted in Brazilian prisons aiming to analyze the relationship between health practices and the use of psychotropic drugs in the prison system. The authors verified that health practices and psychotropic drug use consist in a paradox: they can strengthen control and cause mortification, but also generate resistance to biopolitical power. Precarious confinement conditions increase the prevalence of infectious diseases among inmates.

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Chart 1. Continuation.

Authors	Title	Publication year	Findings
M[22]	*Caracterização dos diagnósticos e psicotrópicos das pessoas privadas de liberdade* [Characterization of the diagnoses and psychotropic drugs of incarcerated offenders]	2019	Study carried out in a prison unit in Mossoró (State of Rio Grande do Norte), Brazil, aiming at characterizing mental health diagnoses and the use of psychotropic drugs among incarcerated offenders. The authors verified that most mental health diagnoses, both among men and among women, are linked to chemical dependence on illicit drugs.
N[23]	*Pharmacological approaches to managing violence and aggression in incarcerated populations: clinical and ethical issues*	2020	Study carried out in prison systems in Europe aiming at analyzing pharmacological approaches to managing violence and aggression in incarcerated offenders. The authors showed that violence and aggression in prisons are often associated with psychiatric and personality disorders, and require clinical interventions. The use of psychotropic drugs is recommended only in cases of diagnosed disorders or situations of imminent risk of harms without urgent intervention. Initial priority should be given to environmental and behavioral de-escalation strategies. Physicians should consider issues of capacity and consent, ensuring the rights of prisoners and guiding care ethically.
O[24]	*Sociodemographic, clinical, and therapeutic aspects of penitentiary psychiatric consultation: toward integration into the general mental health services*	2020	Study conducted in prisons in Spain aiming at analyzing sociodemographic, clinical, and therapeutic aspects related to psychiatric consultations. The authors report that mental disorders and deficiencies in prison treatment should be objectively defined, as mental health care provided to inmates does not reach the same level of quantity and quality as those provided to the community. The need to improve the planning of mental health care for the prison population is suggested, focusing on more common profiles of patients and equal access to services.
P[25]	*Medicalización psiquiátrica en tres prisiones femeninas brasileras: un abordaje etnográfico sobre los itinerarios de criminalización, patologización y farmacologización* [Psychiatric medicalization in three Brazilian women's prisons: an ethnographic approach to the itineraries of criminalization, pathologization, and pharmacologization]	2020	Study conducted in three women's prisons in Brazil with the objective of analyzing the process of psychiatric medicalization as a device of State power, investigating how this process is related to criminalization, pathologization, and pharmacologization of incarcerated women. The authors demonstrated that this process operates as a device of State power, characterized by mass criminalization, pathologization of female crimes, and use of psychotropic drugs. This cycle perpetuates the very disorders that psychiatry aims to treat and sustain the use of drugs in an illicit-licit-illicit chain linked to the illegal drug market. Gender, in interaction with other forms of inequality, influences the mental health of women, suggesting that such conditions should be addressed as a public health issue that transcends prison limits.

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Chart 1. Continuation.

Authors	Title	Publication year	Findings
Q[6]	*O uso de psicofármacos no sistema prisional: um trabalho de revisão* [The use of psychotropic drugs in the prison system: A review study]	2020	Literature review with the objective of investigating factors related to the use of psychotropic drugs in the prison system and which are the most commonly prescribed in this context, based on articles published between 2015 and 2019. The authors evidenced that anxiolytics, tranquilizers, and sedative-hypnotic drugs were the most commonly prescribed and used in prisons, followed by antidepressants and antipsychotics. Most studies specifically discussed opioid replacement therapy (58.7%) for the treatment of illicit opioid abuse disorder, treatment of attention deficit hyperactivity disorder, and alcohol and tobacco use disorders. There is a lack of studies, especially national, related to the use of psychotropic drugs in prison systems, most of which are related to the treatment of human immunodeficiency virus (HIV), viral hepatitis, and tuberculosis. Use of psychotropic drugs in these settings involves issues that go beyond therapeutic use such as those related to suicide risk, individuals' autonomy, and exchange currency purposes. Pharmaceutical care is precarious and, although recommended by the Ministry of Health, it is currently a distant reality.
R[26]	*Acesso equitativo a cuidados de saúde mental com medicamentos psicotrópicos em ambientes prisionais* [Equitable access to mental health care with psychotropic drugs in prison settings]	2023	Study conducted in Brazilian prisons aiming at analyzing barriers to equitable access to mental health treatments with psychotropic drugs. The authors found that the access of inmates to these treatments is impacted by factors such as financial limitations, stigmatization, and racial discrimination, in addition to the lack of training of health professionals, which can lead to incorrect diagnoses and undertreatment. These barriers highlight the need for reforms in prison health policies, including professional training and resource allocation to improve the quality of pharmacological treatments provided.

Source: prepared by the authors.

Use of psychotropic drugs and aggressive behaviors in the prison setting

The management of aggressive behaviors in this setting represents a significant challenge, especially due to the prevalence of psychiatric disorders among inmates. Psychotropic drugs are often used as a strategy to contain episodes of aggressiveness and to emotionally stabilize individuals. However, its use requires caution, considering that the use of anxiolytics, for example, may be associated with an increase in the frequency of aggressive behaviors, evidencing the complexity of the relationship between psychotropic drugs and behavioral dynamics in this setting.[10]

Given this scenario, the management of aggressiveness in prisons should go beyond the administration of medicines, considering strategies that take into account institutional factors and social determinants that influence such behaviors. Although psychotropic drugs play a relevant role in situations of imminent risk, their use should be accompanied by regular evaluations and inserted into an integrated therapeutic plan, which includes psychological support and psychosocial interventions.[24]

Therefore, the use of psychotropic drugs should be restricted to cases of clear psychiatric diagnosis and imminent risk of harm without such intervention. In addition, their prescription should be

associated with complementary strategies to reduce behavioral conflicts and improve the environmental conditions of prisons. This approach seeks to ensure that this use is aligned with strict clinical criteria, respecting the autonomy of the inmates and ethical and legal principles of health care in the prison system. In situations of severe mental disorders, the most appropriate recommendation would be the transfer of inmates to psychiatric hospitals, rather than maintaining the continuous administration of psychotropic drugs in prison units.[11]

The most commonly used drugs in the prison system include anxiolytics, sedative-hypnotic drugs, antidepressants, and antipsychotics. However, its use extrapolates the therapeutic objective, becoming a risk factor for suicide, affecting the individuals' autonomy and, in some cases, being used as a currency of exchange in the very prison dynamics. This scenario highlights the complexity of the use of psychotropic drugs in this setting, requiring strict control and adoption of more ethical and safe practices.[6]

Ethical and legal standards in the use of psychotropic drugs

The prescription of psychotropic drugs in prisons often occurs under inadequate conditions, violating ethical guidelines and compromising the quality of the inmates' mental health care. Lack of skilled professionals and the precarious infrastructure of these units creates an environment where the psychiatric approach often takes on a punitive rather than a therapeutic character. There are cases in which their use does not follow strict diagnostic and monitoring criteria, which compromises the safety of inmates.[11]

When entering the prison system, many incarcerated offenders face abrupt changes in their psychiatric treatments, generating mistrust and worsening of their mental health conditions. These changes are largely due to the prioritization of institutional protocols to the detriment of the continuity of individual treatments. Dissatisfaction with this practice is reported by the inmates, who claim greater transparency and participation in the definition of their treatments, pointing out failures in communication with health professionals.[16]

Moreover, the coercive prescription of psychotropic drugs, justified by institutional security reasons, raises concerns about informed consent and abuse of power. For prescription to be ethical, it is essential that all medical decisions are based on clear diagnoses and respect the rights of the incarcerated offenders. The use of these drugs as a behavioral control tool is widely criticized, as it compromises the autonomy of individuals and reinforces oppression dynamics.[12]

In addition to inadequate prescription, failures in monitoring and control of medicines favor their misuse, both by the inmates and by irregular practices in these institutions. Lack of supervision in the use of psychotropic drugs can result in diversions, self-medication, and drug exchange among inmates, increasing the risks of chemical dependence and other adverse effects. In this sense, the strengthening of laboratory monitoring and the implementation of strict supervision of prescription practices are essential to reduce abuse and ensure the integrity of psychiatric care in prisons.[15]

Mental health in the prison system and access to health services

The mental health of inmates faces significant challenges regarding the quality of care and equity of access to services, highlighting sociodemographic inequalities and failures in formulating/implementing public policies aimed at this population. Prison institutions, by necessity, have taken on the role of mental health care providers, especially for individuals with severe psychiatric disorders. However, most do not

follow national screening and treatment guidelines, resulting in fragmented and ineffective care. Strategies, such as adherence to drug therapy, suicide prevention, and planning of specific interventions, are pointed out as fundamental for improving care. Nevertheless, these practices remain underutilized, reinforcing the vulnerability of inmates and compromising their rehabilitation.[14]

Therefore, another obstacle to effective mental health care is the lack of integration between prison services and community health systems. Incarcerated offenders do not receive the same level of care provided to the general population, which highlights a situation of institutional negligence and reinforces the need for reforms aimed at equity in health care. The implementation of policies that favor the articulation between prison systems and public health services is essential to ensure greater access and quality in psychiatric care in these units.[24]

Furthermore, stigmatization, racial discrimination, financial limitations, and lack of training of professionals working in the prison system aggravate the difficulties in accessing psychiatric treatments. This not only reduces the quality of care, but also results in inaccurate diagnosis and inadequate treatment of mental disorders. The lack of technical preparation of the health team compromises the early identification of psychiatric disorders and restricts the adoption of more effective therapeutic approaches. Hence, structural reforms are indispensable, such as allocation of resources for the expansion of the multiprofessional team and improvement of the training of health professionals who work in prison units.[26]

Mental health of incarcerated women

The mental health of these women is directly associated with the adverse conditions of the prison setting, in which social isolation, lack of family contact, and precarious access to psychiatric care emerge as determining factors for the high demand for psychotropic drugs. In many cases, their use reflects not only clinical necessity, but also a strategy for coping with the emotional suffering exacerbated by incarceration. Thus, it is paramount to adopt more comprehensive therapeutic approaches that consider not only pharmacological treatment, but also the social and cultural determinants involved.[19]

As per the perception of incarcerated women about the use of psychotropic drugs, we verify an ambiguous scenario. On the one hand, these drugs provide relief of psychic symptoms; on the other hand, they generate feelings of stigmatization and loss of autonomy. Psychological impact, locus of control, and stigma associated with their use significantly influence the relationship of women with their psychiatric treatments. These findings reinforce the need for mental health care beyond medicalization, by incorporating psychological support and strategies that promote their autonomy and well-being.[20]

Thus, the phenomenon of criminalization/pathologization/pharmacologization of inmates contributes to perpetuating an institutional control cycle that reinforces structural and gender inequalities. The excessive use of psychotropic drugs operates as a mechanism of silencing and social repression. Within this context, the gender category becomes an essential element to understand the intersections between mental health, vulnerability, and oppression in the prison system.[25]

Use of psychotropic drugs and biopolitical control

The use of psychotropic drugs in prisons assumes a containment character, rather than a therapeutic practice based on individual needs. This approach reinforces the depersonalization of individuals, reducing them to objects of chemical intervention and subordinating their subjectivity to the institutional

order. Paradoxically, their use may represent a space of resistance to the power dynamics of the prison system, either by refusal to drug therapy or by the appropriation of these substances in informal dynamics within the prison context. This phenomenon illustrates the ambivalent character of medicalization in the prison system, that is, while operating as a control mechanism, it can generate precedents for debate and individual agency.[21]

In addition, the relationship between mental disorders and chemical dependence is an important axis in prison health in Brazil. In this population, psychiatric diagnoses are often associated with a history of illicit substance use, reflecting the social vulnerability of these individuals before being incarcerated and the way in which the prison system responds to mental health demands. In many cases, medicalization is the primary strategy to deal with chemical dependence and psychic suffering, without considering underlying structural causes — such as precarious confinement situation and social exclusion —, which aggravate these conditions.[22]

Use of psychoactive substances in the prison setting: a public health issue

The high prevalence of psychotropic drug use among inmates in Spain illustrates the complexity of this problem. In addition to generating impacts on physical and mental health, the use of these substances can aggravate preexisting conditions and favor the emergence of new psychiatric problems. In this context, substance use directly interferes with the organization of the environment, increasing tensions between inmates, producing additional vulnerabilities, and hindering the management of the units.[17]

In addition to individual harms to health, the use of such substances intensifies the exposure of inmates to exploitation and violence in prisons. Individuals who make frequent use become potential targets of coercion, reinforcing a cycle of vulnerability that compromises their chances of social recovery and reintegration. In this sense, treating the use of psychoactive substances as a public health issue requires interventions that consider the specificities of the prison setting and the social and structural factors that drive this behavior.[18]

DISCUSSION

The use of psychotropic drugs in the prison system transcends the therapeutic sphere, becoming a device of biopolitical control and reflection of structural inequalities that permeate the inmates' access to mental health. The selected studies evidence how these substances can be used both as a tool for surveillance and discipline and as a reflection of the precariousness of the health services provided.

The analyzed studies converge to indicate that the prescription of psychotropic drugs in the prison system should be judicious and contextualized, avoiding their use as an indiscriminate tool of chemical containment. It is essential that such interventions are guided by precise diagnoses, ensuring that therapeutic benefits are prioritized over behavioral control. Moreover, the insertion of non-pharmacological strategies, such as strengthening psychological support and actions aimed at the well-being of this population, should be a fundamental guideline for building a safer and more humanized prison setting.

Thus, the management of aggressive behaviors in the prison system should be understood as a multidimensional challenge, which requires integration between pharmacological and non-pharmacological approaches. The balance between the need to control aggressiveness and the guarantee of humanized care is paramount, so that the use of psychotropic drugs in prisons does not

become a tool of oppression, but a therapeutic strategy based on solid clinical criteria and aligned with guidelines on prison health care.

That being said, we infer that the use of psychotropic drugs in the prison system represents a complex intersection between ethics, legislation, and human rights. Criticism of coercive prescription and the indiscriminate use of these drugs as a containment tool reinforce the need to reformulate prison health policies. The alignment of these practices with the principles of humanization and equity of care should be a priority, ensuring that inmates have access to qualified psychiatric care and consistent with their fundamental rights.

Therefore, as per the analyzed studies, the use of psychotropic drugs in the prison system is aligned with a biopolitical control model, reinforcing surveillance and discipline dynamics. The excessive prescription of such substances, detached from a broader therapeutic approach, highlights the lack of integrated strategies for mental health care. Hence, we observed that the precariousness of mental health care in prisons is a reflection of historical marginalization of this population and lack of investments in the sector. The implementation of effective public policies should prioritize the humanization of care, continuous training of the involved professionals, and integration of prison services to the Brazilian Unified Health System (SUS).

In this integrative review, only five (27.7%) studies were conducted in Brazil, from 2015 onward, which can be partly explained by the publication of the National Policy on Comprehensive Health Care for People Deprived of Liberty in the Prison System, in 2014, which provides for health services in the prison system to become the point of attention of the SUS Healthcare Network.[27]

Furthermore, according to a scoping review for the analysis of competences related to family and community medicine, necessary for graduating in Medicine, the prison context was not found to be a formative environment,[28] although the recent Brazilian Curriculum Guidelines for Undergraduate Programs in Medicine recommend the development of competences to recognize and value the needs of vulnerable, invisible, or historically-neglected populations such as the incarcerated population.[29] In addition, an integrative review on educational strategies for teaching health care aimed at incarcerated people evidenced only six studies, and none of them covered the Brazilian context.[30] This highlights a gap in the professional qualification process as an integral part of the strategies for improving health care to this population.

Taking this into consideration, we can infer that the use of psychotropic drugs in the prison setting represents a significant challenge for public health, which affects both the health of the inmates and the institutional dynamics of prison units. The analyzed studies demonstrate that this phenomenon cannot be understood alone, as it is inserted in a broader context of social vulnerability, precariousness of access to mental health care, and absence of effective public policies on prevention and treatment.

Thus, the structural reformulation of psychiatric care in the prison system should prioritize approaches that go beyond medicalization as a unique response to mental disorders. Intersectoral strategies that involve psychological support, strengthening social assistance networks, and implementing alternative therapeutic practices are paramount for the prison system to cease to be a space of exclusion and mortification and to promote health, dignity, and social reintegration.

Therefore, we can understand the need for reformulation of public policies on prison health, which should include harm reduction programs, expansion of access to mental health services, and strengthening of support networks inside and outside prisons. This scenario also permeates the process of qualification of vocational training at technical, undergraduate, graduate, and permanent education levels, in addition

to teaching qualification — which also requires the promotion of public policies on education both at institutional and national levels.

This study has limitations. The fact that the search has been restricted to articles written in Brazilian Portuguese, English, and Spanish may have resulted in the exclusion of relevant studies on the subject, published in other languages. Moreover, the research question focuses on the identification of strategies used in the prison context about clinical practices involving the use of psychotropic drugs, which makes it difficult to analyze the impact of these interventions on the health care of the incarcerated population. Thus, the evaluation of this impact is worth of future studies.

CONCLUSION

The use of psychotropic drugs in the prison context transcends the treatment of mental health conditions, that is, it is extended to the diligence of issues of a political, economic, social, cultural, and structural nature — which configures, in this case, the process of medicalization.

Taking this into consideration, the results of this study contribute to support educators, health professionals, managers, and policymakers, so that each of these actors, considering their sphere of action, develop more assertive, directive, effective, and safe strategies for the health care of the prison population.

CONFLICT OF INTERESTS

Nothing to declare.

AUTHORS' CONTRIBUTIONS

DHBM: Data curation, Formal analysis, Investigation, Project administration, Validation, Writing – original draft. AMB: Data curation, Methodology, Project administration, Supervision, Validation, Writing – review & editing.

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