

Therapy for persons deprived of liberty in Poland: Insights from statistical data

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Abstract

In this article, data concerning the therapeutic system of imprisonment in Poland for the years 1999–2023 is analysed. Changes in the prison population and the number of convicts within the therapeutic system are presented, taking into account different categories of convicts, types of penitentiaries, and whether the therapy was conducted within or outside specialized therapeutic wards. The analysis begins with data from 1999, the first full year of the new Polish Executive Penal Code, which established the therapeutic system as a separate method of serving the penalty of deprivation of liberty (alongside the regular system and programme system). The aim of this publication is to present the evolution of the therapy of persons deprived of liberty in Poland over the past 25 years, focusing on quantitative, structural, and organizational aspects. This paper highlights the most important aspects of the therapeutic system in Poland, which have been documented in official statistical publications.

Keywords: therapeutic system, therapeutic wards, prisoners, mental disorders, addictions, disability, Executive Penal Code, prison therapy, penitentiary statistics, evolution of penal therapy.

1. Introduction: Scope and methodology

The statistical material presented in this study includes data on the treatment of persons deprived of liberty from 1999 to 2023.¹ The reason for choosing 1999 is that it marked the first full year following the implementation of the Executive Penal Code (EPC).² This code introduced new organizational and legal guidelines specifically aimed at the treatment of convicted individuals with health issues, particularly mental health. It introduced a separate therapeutic system for the imprisonment of persons deprived of liberty, in addition to the regular and programme systems.

The legislator decided that under this system, prisoners requiring specialized treatment—particularly psychological, medical, or rehabilitative care—will serve their sentences. This applies to those with physical disabilities, non-psychotic mental disorders, including those convicted under Articles 197–203 of the Polish Criminal Code (CC),³ intellectual disabilities, or addictions to psychoactive substances (Article 96 § 1 EPC). The purpose of this publication is to provide a detailed overview of the evolution of the therapeutic prison model in Poland over the past 25 years. The analysis will focus on the most significant aspects of this system, as documented in official statistical publications.

2. An analysis of statistical data

The data in Table 1 illustrates the development of the therapeutic system in the context of changes within the overall prison population (which includes both convicts and other individuals who have been punished either by arrest or through penalty orders) from 1999 to 2023.

¹ Służba Więzienna, *Roczna informacja statystyczna za lata 1999–2023*, <https://www.sw.gov.pl/strona/statystyka-roczna> (accessed: 10.07.2024).

² Act of 6 June 1997, The Executive Penal Code, Journal of Laws of 2024, item 706.

³ Act of 6 June 1997, The Criminal Code, Journal of Laws of 2024, item 17.

Table 1. Prisoners serving penalty of deprivation of liberty in the therapeutic system from 1999 to 2023 in relation to the total number of convicts (as of 31 December of each year)

Year	Number of convicts in the therapeutic system	Percentage increase rate	Total number of convicts	Percentage increase rate
1999	2,631	100.00%	42,200	100.00%
2000	3,746	142.37%	48,512	114.95%
2001	5,033	191.29%	56,904	134.84%
2002	2,733	103.87%	59,571	141.16%
2003	3,102	117.90%	61,041	144.64%
2004	3,407	129.49%	65,313	154.77%
2005	3,631	138.00%	69,539	164.78%
2006	3,824	145.34%	74,232	175.90%
2007	4,054	154.08%	76,335	180.80%
2008	4,140	157.35%	74,226	175.89%
2009	4,205	159.82%	74,543	176.64%
2010	4,146	157.58%	72,339	171.41%
2011	4,159	158.07%	73,223	173.51%
2012	3,738	142.07%	77,147	182.81%
2013	4,440	168.75%	72,405	171.57%
2014	4,457	169.40%	71,133	168.56%
2015	4,496	170.88%	66,674	157.99%
2016	4,460	169.51%	66,132	156.71%
2017	4,527	172.06%	70,364	166.73%
2018	4,755	180.72%	68,679	162.74%
2019	4,914	186.77%	70,605	167.31%
2020	4,203	159.74%	64,379	152.55%
2021	4,951	188.17%	67,939	160.99%
2022	4,808	182.74%	67,310	159.50%
2023	4,960	188.52%	68,913	163.30%

Source: Służba Więzienna, *Roczna informacja statystyczna za lata 1999–2023*, <https://www.sw.gov.pl/strona/statystyka-roczna> (accessed: 10.07.2024).

At the outset, it should be noted that the information presented covers not only convicts who are currently in therapeutic units but also those assigned to therapeutic units but residing outside them, as well as convicts serving sentences in the therapeutic system outside of specialized units. These two categories of convicts, along with those residing in therapeutic units, are collectively referred to as “convicts serving sentences in the therapeutic system.” The analysis of this data leads to several conclusions.

Firstly, despite the noticeable increase in the number of people serving sentences in the therapeutic system (from 2,631 in 1999 to 4,960 in 2023), the proportion of convicts in this system within the total convict population has remained relatively stable (6.23% in 1999 vs 7.19% in 2023). Secondly, the significant increase in the number of people in the therapeutic system observed until 2001 and from 2013 onwards largely results from the prison authorities’ policy during this period, which clearly accepted serving sentences outside specialized units. Thirdly, for a thorough analysis and assessment of the dynamics, structure, and functioning of the therapeutic system, it is necessary to understand that it comprises three qualitatively different elements: interventions in therapeutic units, outside the units, and situations where a convict assigned to a unit remains outside these facilities.

Although both the therapeutic system and the prison population have increased over the last 24 years, the rise in the number of people serving sentences in the therapeutic system is significantly higher (an increase of 188.52%). It is worth noting that even when the overall prison population began to decline after 2012, the number of inmates in the therapeutic system continued to grow.

The above summary also outlines a significant decline in the prison population that occurred in 2020. Along with the decrease in the overall number of inmates, the number of people in the therapeutic system also dropped, which can be linked to the COVID-19 pandemic. In March 2020, the legislator introduced new regulations, including a temporary release of inmates due to the threat of the epidemic, and expanded the use of electronic monitoring as an alternative method of serving prison sentences. Although these changes did not lead to a significant increase in the number of convicts released from penitentiary units, there was

still a real decrease in the prison population in Poland, resulting from a reduction in the number of new admissions to correctional facilities.⁴

The comparison of the number of convicts assigned to therapeutic units with those residing in units with specific specializations illustrates the actual scale of development of this system in its basic form (i.e., institutionalized units). Since the first full year of the system's operation,⁵ a systematic, although not spectacular, increase in the number of convicts serving sentences in it can be observed (from 1,704 convicts in 1999 to 3,345 at the end of 2023). The dynamics of this growth slowed down after 2007. The situation of individual categories of convicts varied during the analysed period. For example, there was a significant increase in the number of alcoholics receiving specialized interventions (an increase of 374.67% compared to 1999), while a much smaller increase was observed in the units for convicts with non-psychotic mental disorders and intellectual disabilities (only 135.52%).

In these latter units, there are convicts with sexual preference disorders (convicted of offences under Articles 197–203 of the CC related to sexual disorders, such as paedophilic disorders), who were not separated in the penitentiary statistics until after 2008 (an increase of nearly 200%).⁶ In 2023, the number of drug addicts treated in therapeutic units increased by 314 persons compared to 1999 (a rise of 209.02%). However, separate therapeutic units for convicts with physical disabilities have not yet been established. It is worth noting that the population of convicts in therapeutic units constitutes 4.85% of the total number of convicted and sentenced (either by arrest or penalty orders) individuals in Polish correctional facilities.

⁴ B. Stańdo-Kawecka, "Populacja więzienna w Polsce w pierwszym roku pandemii COVID-19," *Archiwum Kryminologii* 43, 2021, no. 2, pp. 127–136.

⁵ The Executive Penal Code (adopted on 6 June 1997), along with the institution of systems for the execution of the penalty of deprivation of liberty, came into effect on 1 September 1998.

⁶ The Polish prison system began to undertake interventions with this group of prisoners in 2005, following the amendment of Articles 96 and 117 of the Executive Penal Code.

Table 2. Prisoners assigned to therapeutic units and residing there, from 1999 to 2023 (as of 31 December of each year), including the specialization of units and a separate categorization of convicts with sexual preference disorders (from 2008)

Year	Total: Absolute number / Percentage increase rate	Prisoners with mental disorders or intellectual disabilities		Addicted to narcotic or psychotropic substances	Alcohol addicts
		Including those with sexual preference disorders (convicted under Articles 197–203 of the CC)			
1999	1,704 / 100.00%	1,112 / 100.00%	N/D	288 / 100.00%	304 / 100.00%
2000	1,971 / 115.66%	1,226 / 110.25%	N/D	370 / 128.47%	375 / 123.35%
2001	2,169 / 127.28%	1,445 / 129.94%	N/D	340 / 118.06%	384 / 126.31%
2002	2,223 / 130.45%	1,487 / 133.72%	N/D	340 / 118.06%	396 / 130.26%
2003	2,392 / 140.37%	1,584 / 142.44%	N/D	348 / 120.83%	460 / 151.13%
2004	2,552 / 149.76%	1,621 / 145.77%	N/D	385 / 133.68%	546 / 179.60%
2005	2,779 / 163.08%	1,709 / 153.68%	N/D	435 / 151.04%	635 / 208.88%
2006	2,877 / 168.83%	1,716 / 154.31%	N/D	455 / 157.99%	706 / 232.23%
2007	3,015 / 176.93%	1,722 / 154.85%	N/D	531 / 184.34%	762 / 250.65%
2008	2,971 / 174.35%	1,699 / 152.78%	150 / 100.00%	480 / 166.67%	792 / 260.52%

2009	3,069 / 180.10%	1,642 / 147.66%	155 / 103.33%	546 / 189.96%	881 / 289.80%
2010	3,037 / 178.22%	1,593 / 143.25%	178 / 118.66%	501 / 173.96%	943 / 310.19%
2011	2,953 / 173.29%	1,510 / 135.79%	162 / 108.00%	435 / 151.04%	1,008 / 331.57%
2012	3,044 / 178.63%	1,497 / 134.62%	220 / 146.66%	472 / 163.88%	1,075 / 353.61%
2013	2,943 / 172.71%	1,492 / 134.17%	211 / 140.66%	436 / 151.38%	1,015 / 333.88%
2014	2,936 / 172.30%	1,466 / 131.83%	233 / 155.33%	462 / 160.41%	1,008 / 331.57%
2015	3,061 / 179.63%	1,493 / 134.26%	252 / 168.00%	480 / 166.66%	1,088 / 357.89%
2016	3,133 / 183.86%	1,507 / 135.52%	297 / 198.00%	487 / 169.09%	1,139 / 374.67%
2017	3,229 / 189.49%	1,553 / 139.65%	326 / 117.33%	509 / 176.73%	1,167 / 383.88%
2018	3,172 / 186.15%	1,552 / 139.56%	355 / 136.66%	512 / 177.77%	1,108 / 364.47%
2019	3,315 / 194.54%	1,571 / 141.27%	392 / 161.33%	575 / 199.65%	1 169 / 384.53%
2020	2,865 / 168.13%	1,526 / 137.23%	390 / 160%	441 / 153.12%	898 / 295.39%
2021	3,289 / 193.01%	1,570 / 141.18%	393 / 162%	556 / 193.05%	1,169 / 384.53%
2022	3,287 / 192.87%	1,564 / 140.64%	393 / 262%	594 / 206.25%	1,129 / 371.38%
2023	3,345 / 196.30%	1,593 / 143.25%	426 / 284%	602 / 209.02%	1,150 / 378.28%

Note: N/D—no data.

Source: Służba Więzienna, *Roczna informacja statystyczna za lata 1999–2023*, <https://www.sw.gov.pl/strona/statystyka-roczna> (accessed: 10.07.2024).

Table 3. Convicts assigned to therapeutic units, residing outside these units, by reasons (as of 31 December 2023)

Year	Total	Treatment	Other cases	Waiting for transport	Other reasons
1999	424	62	161	159	42
2000	461	54	204	143	60
2001	366	63	251	0	52
2002	475	59	198	162	56
2003	695	60	229	227	179
2004	852	73	222	303	254
2005	850	57	201	297	295
2006	942	82	207	323	330
2007	1,037	67	186	405	379
2008	1,168	80	223	385	480
2009	1,131	53	181	384	513
2010	1,097	59	177	359	502
2011	1,205	63	165	396	581
2012	689	48	159	270	212
2013	682	30	14	205	433
2014	767	28	17	257	465
2015	701	27	15	264	395
2016	706	37	12	215	442
2017	825	19	16	275	515
2018	855	26	10	297	522
2019	844	17	16	309	502
2020	564	1	8	340	215
2021	779	2	22	615	140
2022	749	0	15	610	124
2023	869	8	13	640	208

Source: Służba Więzienna, *Roczna informacja statystyczna za lata 1999–2023*, <https://www.sw.gov.pl/strona/statystyka-roczna> (accessed: 10.07.2024).

The implementation of therapeutic interventions in specialized units can be hindered by certain objective obstacles. There are four main reasons identified in the statistics of the Central Board of the Prison Service that led to 706 convicts being outside the therapeutic unit (as of 31 December 2023), even though they had been previously assigned to it. These reasons include undergoing treatment (eight convicts), involvement in further legal cases (13 convicts), and waiting for transport to another unit (640 convicts). The broad category of “other reasons” is notable, accounting for 208 cases. Additionally, there has been a significant reduction since 2012 in the number of cases where convicts were outside the unit due to involvement in other legal matters.

One of the most frequently discussed issues within this system is serving a sentence in the therapeutic system outside of the specialized unit. This option was widely used for convicts with addictions (alcoholics and drug addicts) in the early years following the implementation of the new Executive Penal Code, up until 2001. After this practice was abandoned (2001), it has recently experienced a renewed interest. This is a consequence of the introduction of new therapeutic strategies in 2012 (so-called short interventions and short-term therapy for addicts). It is worth noting that there was a noticeable decline in the number of convicts involved in this form of the therapeutic system from 2013 to 2016, with 815 convicts in 2013; 754 in 2014; 734 in 2015; and 621 in 2016. However, since 2017 there has been an increase in the popularity of this alternative approach to implementing the therapeutic system, with 688 convicts in 2017; 728 in 2018; 755 in 2019; 774 in 2020; 883 in 2021; 772 in 2022; and 745 in 2023.

Serving a prison sentence in the therapeutic system outside a specialized therapeutic unit has long faced with criticism from penitentiary law specialists. It is also noted that actions carried out within the therapeutic system outside the unit can be conducted within the framework of a programme system. Therefore, the possibility of conducting therapy outside the specialized unit should be subject to thorough analysis.⁷

⁷ A. Kwieciński, “Skazani z niepsychotycznymi zaburzeniami psychicznymi,” [in:] *Postępowanie z wybranymi grupami skazanych w polskim systemie penitencjarnym. Aspekty prawne*, ed. A. Kwieciński, Warszawa 2013, p. 169.

Table 4. Prisoners assigned to the therapeutic system, outside the therapeutic unit from 1999 to 2023 (as of 31 December of each year)

Year	Total	Prisoners with mental disorders or intellectual disabilities		Addicted to narcotic or psychotropic substances	Alcohol addicts	Physically disabled
			Prisoners with sexual preference disorders			
1999	503	1	N/D	16	453	33
2000	1,314	5	N/D	149	1139	21
2001	2,349	5	N/D	401	1931	12
2002	35	0	N/D	7	24	4
2003	15	0	N/D	0	15	N/D
2004	3	0	N/D	3	0	N/D
2005	2	0	N/D	0	1	1
2006	5	0	N/D	0	2	3
2007	2	0	N/D	1	0	1
2008	1	0	N/D	0	1	0
2009	5	0	N/D	5	0	0
2010	12	0	N/D	10	2	0
2011	1	0	N/D	0	1	0
2012	4	0	N/D	1	2	1
2013	815	0	N/D	144	671	0
2014	754	2	N/D	186	564	2
2015	734	0	N/D	215	519	0
2016	621	0	N/D	188	433	0
2017	688	0	N/D	220	467	1
2018	728	0	N/D	254	473	1
2019	755	0	N/D	277	477	1
2020	774	4	N/D	305	464	1
2021	883	9	N/D	333	532	9
2022	772	5	N/D	332	433	2
2023	745	3	N/D	351	389	2

Note: N/D—no data.

Source: Służba Więzienna, *Roczna informacja statystyczna za lata 1999–2023*, <https://www.sw.gov.pl/strona/statystyka-roczna> (accessed: 10.07.2024).

Table 5. Prisoners serving a penalty of deprivation of liberty in the therapeutic system as of 31 December 2023, by classification groups from different types of units (“M” for young offenders, “P” for those sentenced for the first time, “R” for penitentiary recidivists, “W” for those who are serving military arrest)

Classification groups		M	P	R	W
Types of the units	Closed	34	1,461	2,246	N/D
	Semi-open	7	532	713	N/D
	Open	0	3	4	N/D
Total		41 (0.82%)	1,996 (39.99%)	2,963 (59.36%)	N/D

Note: N/D—no data.

Source: Służba Więzienna, *Roczna informacja statystyczna za lata 1999–2023*, <https://www.sw.gov.pl/strona/statystyka-roczna> (accessed: 10.07.2024).

In the further part of the study, an attempt was made to determine the composition of the convict population in the therapeutic system. It was found that this system is predominantly composed of penitentiary recidivists (59.36% of all convicts in this system). Next are those sentenced for the first time (39.99%), followed by young offenders⁸ (0.82%). No individuals serving military arrest were recorded. What is more, statistical data do not confirm the overrepresentation of penitentiary recidivists within the population serving sentences in this system (they make up 55.90% of the total prison population).

⁸ According to the Polish Executive Penal Code, a “young offender” is a young convict (held in a special type of prison for adults), usually aged from 17 to 21 years old. However, in cases involving the most serious crimes, this age can be as young as 14 or 15. Under Polish law, individuals are generally considered criminally responsible after they turn 17. Nevertheless, they can be held responsible as early as 14 or 15 for committing the most serious crimes, as stipulated in Article 10 § 2 and 2a of the Polish Criminal Code.

Table 6. Prisoners serving a penalty of deprivation of liberty in the therapeutic system as of 31 December 2023, by type of penitentiary unit

	Type of the penitentiary unit*		
	Closed	Semi-open	Open
Number of prisoners	3,741	1,243	7
Participation rate	75.42%	25.06%	0.14%

* The most important differences between these three types of penitentiary units are the level of security, the number of visits allowed, the degree of inmate isolation, and the rights and duties related to their ability to move both inside and outside the unit (Article 70 § 2 of the Executive Penal Code).

Source: Służba Więzienna, *Roczna informacja statystyczna za lata 1999–2023*, <https://www.sw.gov.pl/strona/statystyka-roczna> (accessed: 10.07.2024).

The distribution of convicts serving prison sentences across different types of penitentiary units does not fully represent the principles of individualization or gradual progression (also known as *slow progression*)⁹ in the Polish penitentiary system. The fact that nearly 76% of inmates in the therapeutic system stay in closed units, while the remaining are placed in semi-open units, is largely dictated by the organization of therapeutic units. Those dedicated for convicts with non-psychotic mental disorders and intellectual disabilities operate as closed-type facilities, whereas those for addicts can be either closed or semi-open. There are no therapeutic units available in open-type facilities.

3. Final summary and conclusions

The analysis of the statistical data leads to several conclusions. Firstly, while there has been steady growth since 1999 in the number of convicts sent to serve their sentences in the therapeutic system, this increase—though greater than the overall prison population growth—can hardly be considered satisfactory. Previous studies have shown that the needs in this area are much greater than the number of people actually

⁹ The principle of “gradual progression,” also known as the principle of “slow progression,” is based on the idea that convicts who meet rehabilitation expectations can be transferred to a facility with more freedom (e.g., from a closed-type facility to a semi-open-type facility or from a semi-open-type facility to an open-type facility).

receiving therapy in Polish prisons. Conservative estimates indicate that several times more convicts should be receiving specialized assistance than the Polish penitentiary system is currently able to provide. The number of convicts needing specialized assistance far exceeds the capacity of the Polish prison system. Additionally, there is a pressing need for extensive epidemiological studies to determine the prevalence of specific disorders and addictions among convicts, along with a realistic estimate of prison needs in this regard. The last such studies, which focused only on drug addicts, were conducted in the 1990s. The findings should serve as the foundation for reform and potential expansion of the therapeutic system. Secondly, there is a serious unresolved issue in prison therapy: the treatment of mental health dysfunctions outside specialized treatment units. This problem primarily affects convicts addicted to alcohol and drugs. These convicts receive therapy outside the specialized wards using abbreviated and simplified awareness-raising and motivational models that do not constitute actual therapy but rather serve as a prelude to it. Attention has long been drawn to the merely statistical effect of such projects, which are carried out in an abbreviated manner by non-specialist staff.

Thirdly, there is a noticeable overrepresentation of convicts from the therapeutic system who are serving their sentences in closed-type prisons. Until recently, this percentage was even higher. For several years, Polish legislators have consistently enforced a policy that requires mentally disturbed individuals to be held under maximum security and control. This approach deliberately violates a fundamental principle of the executive penal law, which is the principle of gradual progression and individualization of punishment execution. For convicts with non-psychotic mental disorders, this policy created a legal obligation for their incarceration in closed-type units.

Fourth, there should be a call for wide accessibility to more data illustrating the therapeutic system. This data should include the number and professional structure of the staff in specialized wards, the types of crimes for which convicts in this system are serving sentences, the average time spent in the system (since prisoners stay in this system for only a certain period), and the number of extraordinary events involving individuals in

this system, as well as the issue of compulsory therapy. Only then will we obtain a comprehensive understanding of this crucial element, which is essential for achieving the goals of imprisonment.

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