APPENDIX 2

Table 1 – Abbreviated data charting form

Author, month and year, title	Study design	Population described or studied	Key findings and recommendations related to mental health in prisoners during COVID-19
Aslim and Mungan, Sept 2020, "Access to substance use disorder treatment during COVID-19: Implications from reduced local jail populations"	Opinion Piece	Jails	Decarceration or diversion from prison, during the pandemic, may lead to people not receiving treatment for substance use disorders, which they may have received in prison This could leading to individual health costs and increased recidivism. Prisons should facilitate access to substance use services on release.
Bandara *et al.,* Sept 2020, "Early Effects of COVID-19 on Programs Providing Medications for Opioid Use Disorder in Jails and Prisons"	Cross-sectional study	Prisons and Jails	An online survey of 16 prisons showed that 10/16 had downsized their opioid agonist treatment programmes due to COVID. 13/16 had released OAT programme participants early. The authors suggest that telemedicine may alleviate delivery challenges allowing community programmes to facilitate OAT in prisons without the need for face-to-face contact.
Bao *et al.,* Dec 2020, "COVID-19 Could Change the Way We Respond to the Opioid Crisis—for the Better"	Opinion Piece	Prisons and jails	Decarceration programmes, due to the pandemic, should consider initiating pharmacotherapy for people with substance misuse problems before release.
Barnert, August 2020, "COVID-19 and Youth Impacted by Juvenile and Adult Criminal Justice Systems"	Opinion Piece	Juvenile correctional facilities	Youths in custody have high mental health morbidity and existing trauma. This may be exacerbated by fear, social distancing, and disruption in care due to COVID. Isolation may feel like solitary confinement.
Brelje and Pinals, July 2020, "Provision of health care for prisoners during the COVID-19 pandemic: an ethical analysis of challenges and summary of select best practices"	Opinion piece	Prisons	Infection control measures introduced to reduce transmission of COVID-19 can have unintended psychological consequences. Increased access to phone and video visitation, continuing mental health treatment programmes, making medical isolation distinct from restrictive housing (e.g., through free access to educational

			material and entertainment so isolation is not punitive), engagement of prisoners in solution-driven protocols, and depopulation should be used to reduce the psychological impact.
Brennan, October 2020, "Responses Taken to Mitigate COVID-19 in Prisons in England and Wales"	Opinion piece	Prisons	The Howard's League and Prison Reform Trust warned that infection control measures amount to 'solitary confinement' and may lead to an increased risk of self-harm and suicide. At the end of May there were 16 self-inflicted deaths, after lockdown restrictions were imposed, and 5 deaths within a six-day period. Prisons have started to report an increase in self-inflicted deaths and self-harm (Independent Advisory Board). There are concerns about the long-term impact of infection control restrictions on health and wellbeing. The PRT have reported that separation from families is causing distress and compensatory measures (in cell telephones, video calls) are inadequate.
Burton *et al.,* Jan 2021, "Mental Health Services in a U.S. Prison During the COVID-19 Pandemic"	Case study	Prisons	In response to an increased need for inpatient psychiatric care and social distancing the prison implemented a telepsychiatry system. 60% of all psychiatric encounters moved to telehealth.
Canady, March 2020, "Bazelon Center urges reduction of jail population with MI"	Opinion piece	Jails	Prisoners with mental illness should be considered for early release or diversion from prison during the pandemic.
Caputo *et al*., May 2020, "Covid-19 emergency in prison - Current management and forensic perspectives"	Opinion piece	Prisons	The current riots in prisons are not just a response to the risk of COVID-19 infection, but to visitor restrictions. The increased mental health burden needs to be addressed through greater psychological support for prisoners.
Carvalho, Sept 2020, "The pandemic in prison: interventions and overisolation"	Literature review	Prisons	Prisoners are suffering from over-isolation as there are deprived of liberty and isolated from visitors, leading to unrest in some prisons. Prisoners need emotional and psychological support during the

			pandemic, information sharing and family contact.
Centers for Disease Control and Prevention, July 2020, "Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities"	Guidelines	Correctional and detention facilities	Alternative activities and forms of communication should be explored if normal procedures are discontinued. Any isolation measures implemented should be distinct from solitary confinement. Ensure released prisoners are aware how to access services in light of changes with COVID-19.
Chaimowitz, Sept 2020, "Stigmatization of psychiatric and justice-involved populations during the COVID-19 pandemic"	Literature review	Psychiatric and prisons populations	Prisoners are at increased risk of psychological distress from infectious diseases. COVID restrictions have increased the isolation of prisons. The pandemic may lead to increased stigmatisation of prison populations, due to negative media representation, which could lead to issues with allocation of resources and affect policy and decision making for an already vulnerable population.
Chevance *et al.*, April 2020, "Ensuring mental health care during the SARS-CoV-2 epidemic in France - A narrative review"	Literature review	Prisons	Prisoners with psychiatric needs are especially vulnerable. In France, there are links between hospital facilities and psychiatric services for prisoners admitted with COVID-19 in order to facilitate high quality care.
Clarke, May 2020, "Report on short scrutiny visits to Prisons holding women"	Briefing	Women's prisons	A report into the COVID-19 response at three UK women's prisons. COVID-19 adaptations include isolation, social distancing and education of prisoners and staff. Levels of self-harm have increased and, although effort has been made to continue mental health services as much as possible, services are reduced and conducted largely via telephone.
Cloud *et al.*, July 2020, "Medical Isolation and Solitary Confinement: Balancing Health and Humanity in US Jails and Prisons During COVID-19"	Opinion piece	Jails and prisons	It is essential to clarify the differences between punitive solitary confinement and the ethical use of isolation during a pandemic – including provision of activities, well-being checks and telemedicine access.
Crowley *et al.*, May 2020, "Prison and	Opinion piece	Prisons	Decarceration is important in managing COVID-19 in prisons.

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opportunities for the management of COVID-19"			However, it must be ensured all prisoners' needs are met on released including OAT services and accommodation.
Di Giacomo, July 2020, "Italian Prisons During the COVID-19 Outbreak"	Case study	Prisons	There is a need for increased psychological support for prisoners during the pandemic and information sharing. The prison offered increased psychological support to prisoners and staff.
Donelan, Dec 2020, "COVID-19 and treating incarcerated populations for opioid use disorder"	Case study	Prisons	In response to the rapid release of prisoners due to COVID-19 telemedicine and take-home drug treatments for substance misuse were used to provide continuity of care.
Duncan *et al.,* Oct 2020, "Adaptations to jail-based buprenorphine treatment during the COVID-19 Pandemic"	Case study	Prisons	One prison implemented telemedicine and a drug taper to ensure that substance misuse treatment could continue during the pandemic.
Dutheil *et al*., June 2020, "COVID-19: a prison-breaker?"	Opinion piece	Prisons	We must be vigilant to the physical and psychological consequences of infection control strategies for COVID-19 including suspension of visits and activities.
European Centre for Disease Prevention and Control, July 2020, "Infection prevention and control and surveillance for coronavirus disease (COVID-19) in prisons in EU/EEA countries and the UK"	Guidelines	Prisons and other places of detention	It is importance to balance any restrictions to visitors in prisons with the mental health needs of prisoners, particularly when children and infants are involved. If suspended, ensure there are technological alternatives for regular communication.
European Monitoring Centre for Drugs and Drug Addiction, June 2020, "Impact of COVID-19 on patterns of drug use and drug-related harms in Europe"	Briefing	Section within report on prisoners	The halting of prison visits is reported to have affected drug availability in prisons, contributing to a more general reduction in the use of illicit drugs in prisons. This appears to have led to increased demand for OAT, benzodiazepines and nicotine replacement therapy to help with withdrawal symptoms.
Evans *et al.,* Jan 2021, "Massachusetts Justice Community Opioid Innovation	Study protocol	Jails	Telemedicine has been used to help jails to continue to deliver Opioid therapy. The pandemic has led to difficulties ensuring

Network (MassJCOIN)"			continuity of Opioid treatment for released prisoners.
Fovet *et al*., May 2020, "Prisons confinées: quelles conséquences pour les soins psychiatriques et la santé mentale des personnes détenues en France? [Mental health care in French correctional facilities during the Covid-19 pandemic]"	Case study	Prisons and forensic psychiatry inpatient units	The results of a survey conducted of health providers in prisons and forensic psychiatric inpatient units suggests the mental health of prisoners has deteriorated (although levels of suicide have remained stable). Isolation, reduced activities and delays in court hearings could help explain this deterioration.
Fovet *et al*. September 2020, "French forensic mental health system during the COVID-19 pandemic"	Opinion piece	Forensic populations	An overview of the adaptations of the prison system in France to the COVID-19 pandemic, with a focus on forensic psychiatric units.
Gagnon, June 2020, "The solitary confinement of incarcerated American youth during COVID-19"	Opinion piece	Juvenile correctional facilities	Isolation and suspension of visits is likely to have significant mental health harms for youth in prison. It is important that youth have visitors and can be educated outside their cells, and that they have access to mental health professionals.
Garcini *et al*., May 2020, "A Tale of Two Crises: The Compounded Effect of COVID-19 and Anti-Immigration Policy in the United States"	Opinion piece	ICE detention facilities	Many immigrants are at high risk of mental health issues. Stress from living within a pandemic, limited access to healthcare and uncertainty over their immigration status is likely to be significant. Immigrants should be released to minimise these harms.
Ghosh, July 2020, "Prisoners with drug use disorders during covid-19 pandemic: Caught between a rock and a hard place"	Opinion piece	Prisons	Prisoners with opioid use disorder are at significant risk of harm after release – it is essential to ensure any released prisoners are linked with community health and OAT services.
Gonçalves *et al.*, Dec 2020, "Analysis of the prison population's mental health in Sars-Cov-2 pandemic: Qualitative analysis"	Qualitative study	Prisons	The COVID-19 pandemic is likely to lead to a deterioration of mental health in prison due to the populations pre-existing vulnerabilities and the limitations of the environment. Mental health support should be provided together with clear communication to prisoners.

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Green *et al.*, June 2020, "Piloting forensic tele-mental health evaluations of asylum seekers"	Case study	ICE detention facilities	Details the use of video calls to carry out forensic mental health evaluations for immigrants in ICE detention facilities. Originally started prior to the pandemic, COVID-19 infection control protocols gave additional reason for remote evaluations.
Gulati *et al.*, May 2020, "Prisons and the COVID-19 pandemic"	Opinion piece	Prisons	The pandemic, isolation and restrictions in prison visits will all likely contribute to significant psychological distress. It is important to ensure mental healthcare is maintained and is tailored to coping with COVID-19.
Gunn *et al.*, May 2020, "Telemedicine in prisons: A Crime in Mind perspective"	Opinion piece	Prisons	Conducting psychiatric appointments through telemedicine has significant challenges (inability to develop empathy and rapport, inability to pick up nuances, lack of feeling of privacy, medicolegal implications). It should not be implemented beyond COVID-19 without a full review.
Hawks *et al.*, April 2020, "COVID-19 in Prisons and Jails in the United States"	Opinion piece	Prisons and jails	Decarceration is important for managing COVID-19 in prisons. However, it musts be ensured that all who might benefit from OAT, which is now available via telemedicine, are referred to such services on release.
Heard, Oct 2020, "Commentary: Assessing the Global Impact of the Covid-19 Pandemic on Prison Populations"	Opinion piece	Prisons	The restricted prison regime, due to COVID-19, isolated prisoners from social contact which may be damaging to mental health and increased self-harm. Suspension of specialist psychological services provided by external agencies may also damage mental health. Compensatory measures such as family video visits may have been poorly implemented.
Hendirck and Borschmann, Dec 2020, "Addressing self-harm among detained asylum seekers in Australia during	Opinion piece	Immigration detentions centres	Closed detention should be replaced with community-based models to protect asylum seekers from preventable harm – such as self-harm.

the COVID-19 pandemic"			
Henry *et al.*, May 2020, "Social Distancing and Incarceration: Policy and Management Strategies to Reduce COVID-19 Transmission and Promote Health Equity Through Decarceration"	Opinion piece	Prisons	Social isolation within prisons is associated with negative mental health outcomes. Strategies to tackle this impact should include decarceration, access to the outdoors within prisons, mental healthcare provision and access to telephones.
Hewson *et al.*, June 2020, "Effects of the COVID-19 pandemic on the mental health of prisoners"	Opinion piece	Prisons	COVID-19 has affected the mental health of prisoners through the suspension of visits and activities, but strategies should be explored to minimise disruptions and mitigate harms. For those released early, it is important there is close follow-up because of such substantial community and service changes.
Hewson *et al.*, July 2020, "The effects of COVID-19 on self-harm in UK prisons"	Opinion piece	Prisons	Data seems to suggest a reduction in self-harm and drug use across 31 prisons within the UK.
Hewson *et al.,* March 2021, "Remote consultations in prison mental healthcare in England: impacts of COVID-19"	Opinion piece	Prisons	There is a need to ensure forensic psychiatric assessment and treatment continue in prisons during the pandemic when face-to-face assessments are not feasible. Remote consultations via telemedicine can enable this and might also be cheaper and more efficient. However, there are potential problems and further evaluation is needed before they are incorporated into routine practice.
Keppler et al., September 2020, "Forderungen zum Schutz vor SARS-CoV-2 im Justizvollzug"	Guidelines	Prison	Expands the WHO guidelines with specific recommendations for service provision to imprisoned people with substance use needs and suggestions for how guidelines can be successfully adapted.
Kois et al., Dec 2021, "Forensic E-Mental Health: Review,	Literature review	Forensic populations	The COVID-19 pandemic has led to increased use of e-mental health technologies with forensic population. Research is needed to

Research Priorities, and Policy Directions"			examine the consequences of implementing these technologies in practice.
Kothari *et al.*, May 2020, "COVID-19 and prisons: Providing mental health care for people in prison, minimising moral injury and psychological distress in mental health staff"	Opinion piece	Prisons	Early reports suggest a deterioration in prisoner mental health. There are challenges to delivering mental healthcare in prisons during the pandemic, and non-essential services have been suspended. Prison staffing levels are low and need to be increased, and activities and psychological self-help materials need to be provided for prisoners to help them cope.
Lachsz and Hurley, Jan 2021, "Why practices that could be torture or cruel, inhuman and degrading treatment should never have formed part of the public health response to the COVID-19 pandemic in prisons"	Opinion piece	Prisons	The restrictive measures that have been implemented in prisons in response to COVID-19 in Australia have resulted in many prisoners being in isolation, which is tantamount to solitary confinement. Even short periods of time in isolation can cause significant mental harm.
Léon *et al.*, June 2020, "Leisure Behind Bars: The Realities of COVID-19 for Youth Connected to the Justice System"	Opinion piece	Juvenile correctional facilities	Prolonged isolation is detrimental to the mental health of youth in custody, who already are highly vulnerable. Reductions in staff levels and infection control protocols make caring for youth even more challenging. Increased phone time is not enough; there must be an increase in positive activities and provision of mental health resources to youth.
Li and Liu, Oct 2020, "Correctional System's Response to the Coronavirus Pandemic and Its Implications for Prison Reform in China"	Opinion piece	Prisons	Video and online materials were used for prisoner mental health care during the pandemic (replacing in-class instructions). Clinical psychologists/psychiatrists were made available in person or online. Some virtual family meetings tool place. For staff, long house and extended duty has negatively impacted mental health.

Liebrenz *et al.*, February 2020, "Caring for persons in detention suffering with mental illness during the Covid-19 outbreak"	Opinion piece	Prisons	There is likely to be a mental health burden in prisons from challenges such as isolation, grief from losing loved ones and survivor guilt. It is essential to ensure mental health services continue as normally as possible, assisted by risk-assessing mental health staff and providing them with PPE.
Marmolejo *et al.*, Oct 2020, "Responding to COVID-19 in Latin American Prisons: The Cases of Argentina, Chile, Colombia, and Mexico"	Cross-sectional study	Prisons	People with mental illness formed part of the early release policy in response to the pandemic.
Maycock and Dickson, Dec 2020, "Analysing the views of people in custody about the management of the COVID-19 pandemic in the Scottish Prison Estate"	Qualitative study	Prisons	Prisoners expressed that they were mentally struggling because of the pandemic and prison restrictions. This was affecting relationships between prisoners and staff.
Ministry of Justice and Public Health England, August 2020, "Preventing and controlling outbreaks of COVID-19 in prisons and places of detention"	Guidelines	Prisons and other places of detention	Ensure those in isolation have opportunities to discuss any anxieties with a member of staff.
Mitchell *et al.,* Nov 2020, "Considering the impact of COVID-19 on suicide risk among individuals in prison and during reentry"	Opinion piece	Prisons	The pandemic may put prisoners at higher risk of suicide due to COVID related stressors: difficulty accessing mental health care, increased isolation, solitary confinement, financial hardships, negative news from the community. Without proper infrastructure prisoners released back into the community may also be at risk.
Montoya-Barthelemy *et al.*, April 2020, "COVID-19 and the Correctional Environment - the american prison as a	Opinion piece	Prisons	Isolation will likely worsen prisoner mental health, particularly if information is not clearly shared with prisoners. Ensure activities and visits are as minimally impacted as possible. Prison staff

focal point for public health"			mental health is also highly vulnerable; they need training to support each other's mental health as well as that of prisoners.
Mukherjee and El-Bassel, Sept 2020, "The perfect storm: COVID-19, mass incarceration and the opioid epidemic"	Opinion piece	Prisons	There is a need for careful planning for early release of prisons to ensure they are linked to community services for substance disorders.
Murdoch, Oct 2020, "British Columbia Provincial Corrections' Response to the COVID-19 Pandemic: A Case Study of Correctional Policy and Practice"	Case study	Prisons	Prisons should consider alternative to solitary confinement to manage COVID-19 due to its negative effects on mental health.
Novisky *et al.,* Oct 2020, "Institutional Responses to the COVID-19 Pandemic in American Prisons"	Cross-sectional study	Prisons	There is concern that isolation strategies designed to halt transmission may lead to mental health issues such as self-harm and depression.
Nweze *et al.,* Jan 2021, "Prison health during the COVID-19 era in Africa"	Opinion piece	Prisons	Routine psychological and psychiatric care has been cancelled due to the pandemic. This care should be provided and people with mental illness should be considered for release.
Ogunwale *et al.,* July 2020, "Forensic mental health service implications of COVID-19 infection in Nigeria"	Case Study	Prisons	Due to COVID the provision of psychiatric support has been nurse driven. This means that mental health assessments have not been as comprehensive because a psychiatrist was not available to make a diagnosis, there wasn't multidisciplinary work, some medication could not be prescribed and psycho-legal assessments were not possible.
Oladeru *et al.*, July 2020, "A call to protect patients, correctional staff and healthcare professionals in jails and prisons during the COVID-19 pandemic"	Opinion piece	Prisons	Given prisoners' limited access to family and friends, staff should be encouraged to provide them with emotional and mental health support.
Otugo and Wages, Sept 2020, "COVID-19:	Opinion piece	Prisons and jails	Care needs to be taken if people are released from prison, due to COVID-19 and they have a mental

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The Additional Sentence for the Incarcerated"			health problem. There is a risk that they will be homeless. Telecommunication, used to try to mitigate the psychological effects of the restricted prison regime, should be free.
Pattavina and Palmieri, Oct 2020, "Fears of COVID-19 Contagion and the Italian Prison System Response"	Opinion piece	Prisons	Fear of infection and restrictions on visits led to anxiety and violent protests.
Payne and Hanley, Oct 2020, "COVID-19 and Corrections in Australia: A Summary Review of the Available Data and Literature"	Opinion piece	Prisons	Suspension of visits can have a negative effect on mental health. Video visits have been implemented but the level of effectiveness, access and satisfaction is unknown.
Pedrosa *et al.,* Oct 2020, "Emotional, Behavioral, and Psychological Impact of the COVID-19 Pandemic"	Literature review	Prisons and other vulnerable populations	Due to pre-existing vulnerability' and the restrictions on social contact' prisoners are more likely to suffer from various psychological effects of the pandemic including exacerbation of existing mental illness and suicidal behaviour.
Penal reform international, March 2020, "Coronavirus: Healthcare and human rights of people in prison"	Briefing	Prisons	It is important to recognise the detrimental effects of isolation on prisoners. Therefore, any measures needed should be as minimal as possible and ideally not for the entire prison.
Piel, May 2020, "Letter to the Editor—Behavioural Health Implications of Inmate Release During COVID-19"	Opinion piece	Prisons	Any prisoners released at the moment are even more vulnerable due to changes to mental health and substance misuse services. Further, mental health assessments for prisoners on release might be abbreviated and those at risk of domestic violence might struggle to change accommodation if needed.
Prison Reform Trust, 2020, "CAPPTIVE: Covid-19 Action Prisons Project: Tracking Innovation, Valuing Experience. How prisons are responding to Covid-19 Briefing #2. Regimes, reactions to	Qualitative study	Prisons	The restrictions implemented by prisons to tackle COVID-19 have resulted in prisons becoming 'human warehouses, largely devoid of constructive activity.' Access to activities key to rehabilitation have been patchy at best and non-existent in many prisons. many people are bored and frustrated; this has had a negative impact on

			the mental well-being of imprisoned people.
Prison Reform Trust, 2021, "CAPPTIVE Covid-19 Action Prisons Project: Tracking Innovation, Valuing Experience. How prisons are responding to Covid-19. Briefing #3 The prison service's response, precautions, routine health care, disabilities, well-being, mental health, self-harm, and what helped"	Qualitative study	Prisons	The restricted prison regime implemented to tackle COVID-19 has 'amplified' the mental health problems of imprisoned people. There were increasing levels of irritability, anger, anxiety and frustration. Some whose mental health was had been adversely affected were sent to segregation. The regime prevented people from being able to take action to address their own need/make things better/improve things: 'The lack of activities and the loss of family contact undermined people's well-being and contributed to depression.'
Roberts *et al.*, Feb 2021, "Rapid upscale of depot buprenorphine (cam2038) in custodial settings during The early covid-19 pandemic in new Southwales, Australia"	Case Study	Prisons	The stopping of social visits in Australian prisons led to reduced availability of illicit drugs inside the prison and increasing demand for opiate substitution therapy. Healthcare staff within the prison responded effectively and long-acting depot buprenorphine became the first line treatment because it had additional advantages in this context.
Robinson *et al.*, July 2020, "Strategies Mitigating the Impact of the COVID-19 Pandemic on Incarcerated Populations"	Opinion piece	Prisons	Prisoners are likely to face a severe psychological burden from living in a high-risk environment for COVID-19, isolation procedures and visitor restrictions. Increasing telemedicine services and video calls to family are essential to tackling these issues.
Royal College of General Practitioners, March 2020, "COVID-19 guidance for healthcare in secure environments"	Guidelines	Secure environments	Ensure prisoners have access to alternative activities during isolation. Maintain clear communication with prisoners as to why changes are taking place and ensure opportunities for prisoners to discuss their anxieties.
Royal College of Psychiatrists, September 2020, "COVID-19: Secure	Guidelines	Forensic psychiatric hospitals, prisons and courts	In-reach mental health staff to prisons need to follow infection-control and social-distancing measures.

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hospital and criminal justice settings"			
Ryan *et al.*, Oct 2020, "Applying an Indigenous and gender-based lens to the exploration of public health and human rights implications of COVID-19 in Canadian correctional facilities"	Opinion piece	Prisons	The pandemic may lead to higher levels of stress and anxiety' exacerbating existing mental health conditions.
Sánchez *et al.*, May 2020, "COVID-19 in prisons - an impossible challenge"	Opinion piece	Prisons	The fear of COVID-19, restrictions on movement and activities and suspension of family visits are all likely to exacerbate feelings of isolation among prisoners. Ensure prisoners can maintain communication with their families and are aware of any changes to procedure and why they're happening.
Shepherd, May 2020, "Reconsidering the immediate release of prisoners during COVID-19 community restrictions"	Opinion piece	Prisons	Decarceration risks significant issues with prisoners accessing community and mental health services (which have been altered or discontinued) – it is important to balance this risk when considering prisoner early-release.
Shiple, Sept 2020, "Letter to the Editor—The disproportionate negative impacts of COVID-19 on the mental health of prisoners"	Opinion piece	Prisons	Prisoner mental health is likely to be more effected by the pandemic than the general population due to the health risks in prison and the lack of control over their personal response to the pandemic. Decarceration should be considered. Social isolation due to infection control measures may exacerbate mental health issues. Teleconferencing may be a useful way to reduce isolation. Quarantine needs to be different from solitary confinement with sources of entertainment, so it does not appear punitive.
Sivashanker *et al.*, May 2020, "Covid-19 and decarceration"	Opinion piece	Prisons	With decarceration, it is important to ensure released prisoners are connected to mental health and substance misuse services – virtual ambulatory care offers a good

			medium by which to offer this during the pandemic.
Stephenson *et al.*, Nov 2020, "Time out of cell and time in purposeful activity and adverse mental health outcomes amongst people in prison: a literature review"	Literature review	Prisons	Lower time out of cell and engagement in purposeful activities has a negative effect on mental health and increases suicide risk. These findings are particularly important due to the restricted regimes that have been implemented due to COVID-19.
Stewart *et al.*, June 2020, "The response to COVID-19 in prisons must consider the broader mental health impacts for people in prison"	Opinion piece	Prisons	Isolation poses a significant mental health risk for prisoners – opportunities for outdoor access and socially-distant activities are important. Adaptations to communication through phones and digital technology are key in responding to restricted visits.
Testoni *et al.*, Feb 2021, "Hardships in Italian Prisons During the COVID-19 Emergency: The Experience of Healthcare Personnel"	Qualitative study	Prisons	Healthcare staff have experienced distress during COVID-19 due to fear of the virus, strained relationships with custodial staff, operational difficulties, concerns about prisoners' distress, bereavement and fear caused by prisoners rioting
Tozzo *et al.*, May 2020, "Prisoners in a pandemic: We should think about detainees during Covid-19 outbreak"	Opinion piece	Prisons	Riots in Italian prisons were caused by visitor restrictions and the fear of contracting COVID-19 in overcrowded, unhygienic conditions.
Wang *et al.*, July 2020, "Prevention and control of COVID-19 in nursing homes, orphanages, and prisons"	Opinion piece	Prisons, nursing homes and orphanages	Social isolation can cause mental health problems so close attention must be paid to people who are isolated due to infection control measures in prison.
Weingarten *et al.*, July 2020, "The Witness to Witness Program: Helping the Helpers in the Context of the COVID-19 Pandemic"	Case study	Healthcare workers and attorneys working with people involved in the detention process	Describes the adaptations needed for an emotional support service to continue to operate during the pandemic. The service is run for healthcare workers and attorneys working with prisoners. It has been able to serve over 2,700 people to date.
World Health Organization, March 2020, "Preparedness, prevention and control	Guidelines	Prisons and other places of detention	Decisions to limit or restrict visits need to consider the mental health impact on prisoners.

of COVID-19 in prisons and other places of detention"			
Wurcel *et al*., March 2020, "Spotlight on Jails: COVID-19 mitigation policies needed now"	Opinion piece	Jails	It is important to consider the unintended consequences of COVID-19 protocols introduced – stopping mental health services will likely have a deleterious effect. Riots in Italian prisons can be linked to COVID-19 policies such as the suspension of prison visits.
Zielinski *et al*., Nov 2020, "COVID-19 highlights the pitfalls of reliance on the carceral system as a response to addiction"	Opinion piece	Prisons	Policies intended to limit the spread of COVID-19 will further compromise access to substance use services for people in prisons. Group work is prohibited and services delivered by external contractors and volunteers have been stopped as these people can no longer enter the prisons.