

Effective HIV/AIDS strategies, policies and programs for the correctional centre system

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HIV/AIDS and the correctional centre system

Since the advent of the AIDS virus in society there has been a great deal of debate throughout the world on the most effective methods to reduce its transmission. In no other area has this debate been as great as that between Corrections and Health Authorities on the strategies, policies and programs required to deal with the impact of HIV/AIDS on the correctional centre system.

There is a wealth of research both in Australia and from around the world that details the high rate of unsafe sexual activity and injecting drug use in correctional centres. This research has also been almost unanimous in its recommendations on how to minimize these risk behaviours – for example, the work of Dolan, Donohue and Stimson on drug injecting and syringe sharing in prison in England (June 1993).

Basically the recommendations from these research papers and reports revolve around two central issues:

1. The need to make condoms available to inmates.
2. The need to allow injecting-drug-using inmates to have sterile injecting equipment through either needle and syringe exchange programs or a bleach availability program to allow them to disinfect their injecting equipment.

Although these recommendations have been repeated a number of times for a number of years, there are still very few prison systems around the world which actually provide these services, as reported by Harding and Schaller

in their updating and policy review of HIV/AIDS and prisons of June 1992.

This failure and the problems associated with these recommendations being implemented have often been a result of not recognizing three important strategic bases:

Firstly, that the correctional centre environment or culture is created by the needs, fears, desires and concerns of both staff and inmates, and not just inmates. In effect, the involvement of both these groups is paramount for any successful strategy.

Secondly, that well-educated and informed groups of staff and inmates are far more likely to support the introduction of these somewhat controversial programs. These education programs should also, where possible, be based on peer education principles as this will be far more credible and acceptable to the target group.

Thirdly, that staff and inmates should be actively encouraged to be a part of the development of the HIV and related programs and services. In effect, these policies and programs need to be developed and owned by the people they will affect and not imposed, or perceived to be imposed, upon them by outside bodies or agencies.

In the previous three years the New South Wales Department of Corrective Services has recognized these principles as being vital if HIV/AIDS policies and programs are to be effective. The increasing acceptance of these principles has led to the development and introduction of a comprehensive range of programs on HIV/AIDS issues for both staff and inmates and has allowed them to have a

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significant contribution and involvement in both the design and delivery of HIV/AIDS education.

I shall provide a brief description of the programs and services for staff and inmates that have been developed and implemented by the Department. As background information, the New South Wales correctional system is characterized by an increasing population that currently stands at over 6300 inmates who are held in 29 prisons with a staff of over 3500, which includes uniformed, non-uniformed and administration people.

Services and programs for staff

Primary training

All custodial officers undergoing primary training are provided with a basic level of HIV/AIDS training and awareness. This covers issues ranging from knowledge of transmission to occupational health and safety information.

AIDS training program

This is an on-site and module training program covering a wide area of HIV/AIDS issues, including management of HIV-positive inmates and exploring personal attitudes and issues for all correctional centre staff. This program is presented by selected staff specially trained to educate staff on HIV/AIDS issues. A great deal of support is also provided by the Prison AIDS Project and the Corrective Services Academy.

Occupational health and safety program

AIDS pouches which contain gloves, bleach, resuscitation masks etc are provided for all officers and correctional centre staff and are now a mandatory part of the uniform. Occupational health and safety cabinets containing bleach, coveralls etc are also provided for all correctional centres and in addition to this there has recently been the development of a Quick Action Kit to respond to emergency situations. This program also includes regular updates and talks provided by a specially trained Prison Officers Union representative.

Program organizers' seminars

The HIV/AIDS education and prevention

programs implemented in correctional centres for both staff and inmates depend on the assistance of one or more officers at that centre. These officers are referred to as program organizers and take the role of AIDS coordinators at their centre. The Prison AIDS Project provides these staff with an annual seminar to update them on HIV/AIDS and related issues. A manual for them and their Governors describing all Department of Corrective Services HIV/AIDS policies and procedures is also provided.

Peer education trainers

A program of 'train the trainer' for noncustodial staff to present the prison peer education program for inmates is offered by the Prison AIDS Project. These staff attend training and are accredited as trainers at the completion of delivery of their first peer education program for inmates.

Hepatitis B vaccination and follow-up testing program

All staff are provided with hepatitis B vaccinations and postvaccination serology tests to protect them from infection.

Information sessions

Regular AIDS/HIV issues sessions are run by regional AIDS coordinators for staff at correctional centres. These also include the use of specialist videos for correctional centre staff.

Services and programs for inmates

AIDS committees

Each correctional centre has an AIDS committee which comprises inmates and the program organizer. These committees are responsible for determining the type and level of education on HIV/AIDS issues for their centre. Inmates are encouraged to take as much responsibility for organization etc as possible.

Prison peer education program (PPEP)

The PPEP is the cornerstone of HIV/AIDS inmate education in prisons. It involves specially trained trainers presenting a four-day course for a selected group of inmates. At the

completion of the course these inmates become qualified peer educators who are able to confidentially advise and educate other inmates on HIV/AIDS issues.

Lifestyles unit

In 1992 a unit for HIV-positive inmates at the Long Bay Complex was opened. This unit provides an intensive and structured 3-month program for positive inmates wishing to attend. The program aims to assist these inmates with not only coping and adjusting to being positive and imprisoned but also with life once released.

Disinfectant bleach policy

The presence of two and sometimes three inmates in cells with open toilets, whilst not an HIV/AIDS concern, can cause serious health problems in relation to hepatitis A, salmonella etc. The provision of an appropriately strengthened bleach or other disinfectant for each cell (or within easy access through the wing office) to deal with this potential problem has recently been approved by the Department. This bleach can also be used by inmates to disinfect needles and syringes if they are in possession of such equipment.

Methadone

A methadone maintenance program is available for over 500 inmates.

Reception and exit HIV resource kits

All inmates on entry to and exit from the correctional centre system will receive appropriate information on the range of HIV/AIDS and related services available for them.

Information sessions

Regular update and information sessions are held by the regional AIDS coordinators on HIV/AIDS issues. This often includes presentations from outside agencies (e.g. Sex Workers Outreach Project, AIDS Council of NSW etc).

Videos and awareness days

Specialized videos for inmates on

HIV/AIDS issues in prison are often presented and awareness days often held.

Discussion

The point to be highlighted from the programs outlined above is that their implementation and acceptance have also led to an increasing awareness and acceptance of 'controversial programs', such as the bleach availability and condom distribution programs, by both staff and inmates in the correctional centre system. This gradual change in attitude, which now allows for some rational debate and discussion on these issues, is attributable to the increased knowledge and awareness amongst staff of HIV/AIDS problems in the correctional centre and an understanding that the rate of HIV infection amongst inmates is a critical factor in determining the safety of all persons in this environment.

A perfect example of this process is the availability of bleach for inmates, which up to late 1992 was very restricted for reasons that appeared to be based solely upon a desire to penalize any inmates injecting drugs. This turnaround in policy, and in many cases practice, to make bleach far more available for use by inmates was only made possible by the increased knowledge of staff on occupational health and safety issues. That is, as staff became increasingly aware of the need for cell areas to be properly and regularly disinfected to allow staff to conduct cell searches without compromising their health and well-being, they also became increasingly aware that their restrictive stance on the availability of bleach was not allowing this to occur. Additionally, if inmates were to use the bleach to disinfect injecting equipment then the possibility of an officer becoming infected with HIV or hepatitis through an accidental needlestick injury would also be greatly reduced.

As a result, and after consultation between the Prison AIDS Project and the Prison Officers Union, it was agreed to jointly request the Department of Corrective Services to implement a new policy on bleach to make its availability widespread in correctional centres. This policy was duly supported by the Department.

In regard to condoms the Department of Corrective Services does not currently support

the distribution of condoms to inmates in full-time custody although recently condoms have been made available to all inmates being released to freedom, on day or weekend leave and to periodic detainees. However, a growing awareness that an increase in the number of inmates HIV-infected from unsafe sexual activity will create an increasing potential for staff to be occupationally exposed to the virus has led to the Department and the Prison Officers Union recently discussing the introduction of condoms for all inmates. This may or may not necessarily lead to condoms being distributed as a matter of urgency but it has led to it at least being considered as a viable option to reduce HIV infection rates in correctional centres.

In conclusion it can be seen that if

HIV/AIDS policies and programs are to be supported and effective at the correctional centre level then they need to be:

- 1 made relevant for both staff and inmates; and
- 2 discussed and developed in consultation with well-informed and educated correctional staff and inmates.

In essence, there appears to be ample information and evidence available to highlight the factors that need to be addressed if HIV transmission is to be significantly reduced in prisons. The real issue for those of us dealing with prisons is how we get correctional authorities and the people that make up these organizations to support and implement these necessary changes.