

2

HIV/AIDS
in
Prisons

2001/2002

High-Risk Behaviours behind Bars

This info sheet presents some of the evidence of the prevalence of high-risk behaviours – in particular, injection drug use – behind bars.

This is one of a series of 13 info sheets on HIV/AIDS in prisons.

1. HIV/AIDS and Hepatitis C in Prisons: The Facts
2. High-Risk Behaviours behind Bars
3. HIV Transmission in Prison
4. Prevention: Condoms
5. Prevention: Bleach
6. Prevention: Sterile Needles
7. Prevention and Treatment: Methadone
8. Care, Treatment, and Support
9. A Comprehensive Strategy
10. Aboriginal Prisoners and HIV/AIDS
11. Women Inmates and HIV/AIDS
12. A Moral and Legal Obligation to Act
13. Essential Resources



Drug Use

Despite the sustained efforts of prison systems to prevent drug use by prisoners — by doing what they can to prevent the entry of drugs into prisons — the reality is that drugs can and do enter. A number of studies have provided evidence of the extent of injection and other drug use in prisons. “Many prisoners crave some form of drugs. Many of them are in prison in the first place because of offences related to drugs.”

Canada

In an inmate survey carried out by the Correctional Service of Canada (CSC) in 1995, 40 percent of 4285 federal inmates self-reported having used drugs since arriving at their current institution.

Injection drug use is also prevalent, and the scarcity of needles often leads to needle sharing. Members of the Expert Committee on AIDS and Prisons were told by inmates that injection drug use and needle sharing are frequent and that sometimes 15 to 20 people will use one needle. Many staff also acknowledge that drug use is a reality, admitting that “drugs are part of prison culture and reality” and that “there does not seem to be a way to ensure that there will be no use of drugs.”

Such anecdotal evidence of the prevalence of injection drug use is confirmed by scientific studies:

- A study on HIV transmission among injection drug users in Toronto found that over 80 percent had been in prison since beginning to inject drugs, with 25 percent sharing injecting equipment while in custody.
- In a study among incarcerated men and women in provincial prisons in Montréal, 73.3 percent of men and 15 percent of women reported drug use while incarcerated; of these, 6.2 percent of men and 1.5 percent of women injected drugs.
- In a study among inmates of a provincial prison in Québec City, twelve of 499 inmates admitted injecting drugs during imprisonment, of whom 11 shared needles and three were HIV- positive.
- In a federal prison in British Columbia, 67 percent of inmates responding to one survey reported injection drug use either in prison or outside, with 17 percent reporting drug use *only in prison*.
- In CSC’s 1995 inmate survey, 11 percent of 4285 federal inmates self-reported having injected since arriving in their current institution. Injection drug use was particularly high in the Pacific Region, with 23 percent of inmates reporting injection drug use.

HIGH-RISK BEHAVIOURS BEHIND BARS

Worldwide

Many other countries report high rates of drug use behind bars:

- In Australia, in a survey of HIV risk-taking behaviour of male drug injectors while in prison, 75 percent of respondents reported having injected drugs at least once while in prison.
- In the United Kingdom, surveys found that the use and availability of injectable drugs greatly exceeds official estimates and that needles and syringes are commonly shared out of necessity. One study found that injection drug use decreased in prisons among inmates who had been users on the outside. However, inmates were more likely to inject in an unsafe manner when they did inject. The study concluded that imprisonment increases the risk of contracting HIV infection.
- A European Union study showed that injecting is highly prevalent in prisons in the countries that participated in the study (Belgium, Germany, Spain, Italy, France, Portugal and Sweden). 32 percent of over 3200 participants reported they had ever injected drugs. Of these, seven percent reported they had started to inject in prison and 45 percent that they had injected in prison.

Sexual Activity

In prisons, sexual activity is considered to be a less significant risk factor for HIV and hepatitis C transmission than sharing of injection equipment. Nevertheless, it does occur and puts prisoners at risk of contracting HIV infection.

Homosexual activity occurs inside prisons, as it does outside, as a consequence of sexual orientation. In addition, prison life produces conditions that encourage homosexual activity and the establishment of homosexual relationships between prisoners who do not identify themselves as homosexuals. The prevalence of sexual activity in prison is based on such factors as whether the accommodation is single-cell or dormitory, the duration of the sentence, the security classification, and the

extent to which conjugal visits are permitted. Studies of sexual contact in prison have shown “inmate involvement to vary greatly.” In a study in state prisons and city jails in New York, prisoners reported frequent instances of unprotected sex behind bars. One woman summarized the prevalence and range of sexual activity:

Male CO’s [correctional officers] are having sex with females. Female CO’s are having sex with female inmates, and the male inmates are having sex with male inmates. Male inmates are having sex with female inmates. There’s all kinds, it’s a smorgasbord up there.

In a survey conducted among 1100 male prisoners in Russia, only 10 to 15 percent of the prisoners reported having had no sexual contacts while serving their term. Non-consensual sexual activity was prevalent.

In Canada, according to CSC’s 1995 inmate survey, six percent of federal inmates self-reported having had sex with another inmate. This is consistent with the results of studies undertaken in provincial prisons.

Tattooing

In prison, tattooing is a social activity and involves sharing needles, which makes it risky. In Canada, 45 percent of federal inmates reported having had a tattoo done in prison.

Additional Reading

Correctional Service Canada. *1995 National Inmate Survey: Final Report*. Ottawa: The Service (Correctional Research and Development), 1996, No SR-02. The results of CSC’s 1995 inmate survey.

R Jürgens. *HIV/AIDS in Prisons: Final Report*. Montréal: Canadian HIV/AIDS Legal Network and Canadian AIDS Society, 1996, at 34-39. A summary of studies undertaken by 1996. Available at www.aidslaw.ca/Maincontent/issues/prisons/download1.html.

Second, revised and updated version, 2001. Copies of this info sheet are available on the Network website at www.aidslaw.ca/Maincontent/issues/prisons.htm and through the Canadian HIV/AIDS Clearinghouse (email: aids/sida@cpha.ca). Reproduction of the info sheet is encouraged, but copies may not be sold, and the Canadian HIV/AIDS Legal Network must be cited as the source of this information. For further information, contact the Network (tel: 514 397-6828; fax: 514 397-8570; email: info@aidslaw.ca). **Ce feuillet d’information est également disponible en français.**

Funded by The Center on Crime, Communities & Culture of the Open Society Institute; and by Health Canada under the Canadian Strategy on HIV/AIDS. The views expressed are those of the author and do not necessarily reflect the official views of The Center or Health Canada.

© Canadian HIV/AIDS Legal Network, 2001.