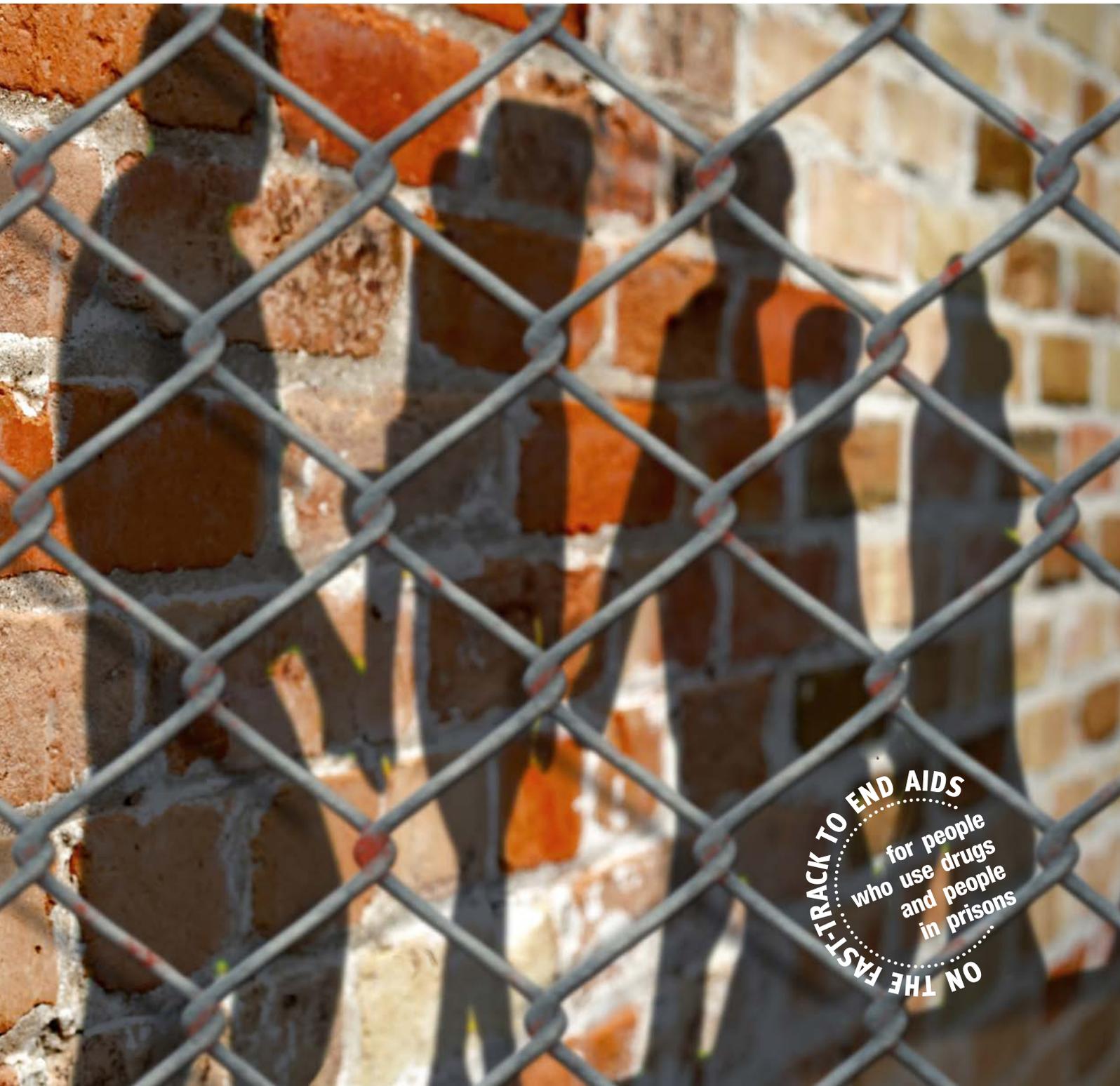




UNODC

United Nations Office on Drugs and Crime

FAST TRACK TO END AIDS BY 2030: **FOR PEOPLE IN PRISONS**



ON THE FAST-TRACK TO END AIDS
for people
who use drugs
and people
in prisons

UNODC supports 34 high priority countries in addressing HIV in prisons with the aim of achieving Sustainable Development Goal target 3.3: to end the AIDS epidemic by 2030, including people in prisons.

UNODC, a co-sponsor of the Joint United Nations Programme on HIV/AIDS (UNAIDS), is the convening agency for HIV prevention, treatment and care among people in prisons. UNODC supports governments and civil society organizations to implement large-scale and wide-ranging evidence-informed and human rights-based interventions, focusing on:

- **GUIDANCE:** developing normative guidance on HIV in prisons, including guidelines, tools, policy briefs and technical papers
- **ADVOCACY:** promoting human rights-based, gender responsive, public health-centred and evidence-based approaches
- **POLICY:** supporting the revision, adaptation, development and implementation of effective legislation, policies and strategies, such as alternatives to imprisonment
- **TECHNICAL ASSISTANCE:** supporting the development and implementation of comprehensive evidence-based interventions for HIV prevention, treatment and care in prisons.
- **CAPACITY-BUILDING:** strengthening the capability of national partners including civil society organizations

The UNODC global HIV programme supports countries in their attempts to achieve universal access to comprehensive HIV prevention, treatment and care services for people in prisons.

FACTS AND FIGURES AT A GLANCE



>10.35 million people are held in prisons globally, at any given time.

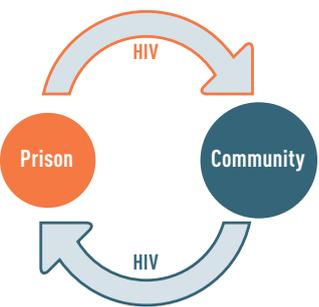
However, the annual global prison population is significantly greater due to high turnover.

1/3 of the prison population is in pretrial detention centres.

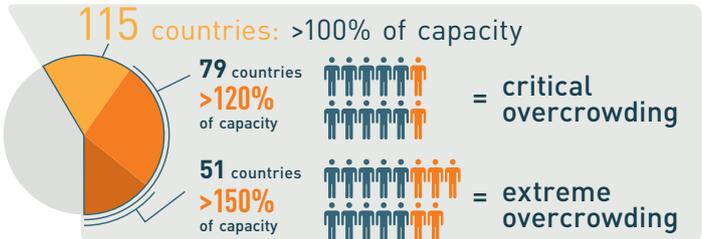


HIV and tuberculosis are among the main causes of death in prisons.

<1 year Most people in prisons will return to their community, many in less than a year.



Prison overcrowding



Total: 198 countries

Source: United Nations Commission on Crime Prevention and Criminal Justice (E/CN.15/2014/10, 2016).



Prisons are characterized by higher risks for the transmission of infectious diseases including HIV, along with limited access to health services.



The global incarceration rate has risen by 6 per cent over the past 15 years to reach a staggering **144 per 100,000**.

People who use drugs can constitute up to 50 per cent of the prison population.



Prisoners are five times more likely to be living with HIV than adults in the general population.

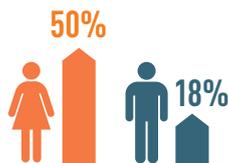
HIV is transmitted in prisons through:

- Unprotected sexual contact, both consensual and coerced
- Sharing of contaminated injecting, tattooing and other body piercing equipment
- Use of contaminated medical or dental equipment
- Transmission from mother to child



HIV in prison settings affects all regions of the world, particularly sub-Saharan Africa, reflecting the high prevalence of HIV in the general population. This is also the case in Eastern Europe and Asia; however, the high prevalence in these regions reflects the large proportion of people in prison who use drugs.

The total female prison population has increased by 50 per cent since 2000, compared to 18 per cent for the male prison population.



10% of global prison population but > HIV prevalence

Women in prison represent 5 –10 per cent of the global prison population; however, HIV prevalence among women in prisons is always higher than among men in prisons.

HIV prevention, treatment and care services are often interrupted when people are admitted to prisons, transferred between penal institutions and upon release. This has negative consequences on the health of individuals and the community.



Factors contributing to HIV, viral hepatitis and tuberculosis transmission in prisons:

- Excessive use of incarceration and pretrial detention
- Overcrowding, violence and lack of protection for vulnerable prisoners
- Lack of gender responsive interventions
- Poor access to medical and social services
- Stigma and denial
- Isolation of prison health services from public health programmes
- Limited capacities and resources
- Poor ventilation, natural light, hygiene and nutrition
- Lack of continuity of health-care services
- Health-care services in prisons are not always equivalent to those provided in the community

WHAT WORKS? A PUBLIC HEALTH AND HUMAN RIGHTS APPROACH

- The effectiveness of HIV interventions in prisons has been documented and published.
- Key HIV interventions, coupled with measures addressing criminal justice, human rights and prison reforms, can reduce HIV transmission in prisons.





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THE 15 KEY INTERVENTIONS

The comprehensive package consists of 15 interventions essential for effective HIV prevention and treatment in closed settings. While each of these interventions alone is useful in addressing HIV in prisons, together they form a package and have the greatest impact when delivered as a whole.

1. Information, education and communication
2. Condom programmes
3. Prevention of sexual violence
4. Drug dependence treatment, including opioid substitution therapy
5. Needle and syringe programmes
6. Prevention of transmission through medical or dental services
7. Prevention of transmission through tattooing, piercing and other forms of skin penetration
8. Post-exposure prophylaxis
9. HIV testing and counselling
10. HIV treatment, care and support
11. Prevention, diagnosis and treatment of tuberculosis
12. Prevention of mother-to-child transmission of HIV
13. Prevention and treatment of sexually transmitted infections
14. Vaccination, diagnosis and treatment of viral hepatitis
15. Protecting staff from occupational hazards

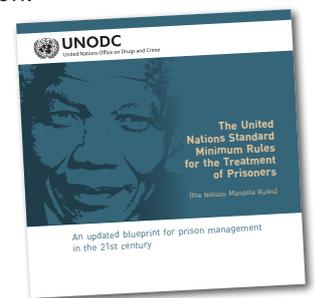
INNOVATIONS

❖ The UNAIDS Strategy 2016-2021 acknowledges existing gaps in adequate health services in prisons and provides for a specific result area on tailored HIV prevention services for key populations, including prisoners. It also promotes a public health approach in prisons and alternatives to incarceration.

❖ The 2015 United Nations Standard Minimum Rules for the Treatment of Prisoners (Nelson Mandela Rules) indicate that:

- The provision of health care for prisoners is a State responsibility. Prisoners should enjoy the same standards of health care as those available in the community, free of charge and without discrimination on the grounds of their legal status.
- Health-care services should be organized in close relationship with the general public health services and should ensure continuity of treatment and care, including for HIV.

❖ The recently adopted resolution by the twenty-sixth Commission on Crime Prevention and Criminal Justice, where Member States committed to “Ensuring access to measures for the prevention of mother-to-child transmission of HIV in prisons”.



In this document, the terms “prison” refers to all places of detention within a country and “prisoner” refers to all people detained in those places, including adults and juveniles, during the investigation of a crime, while awaiting trial, after conviction, and before and after sentencing.



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