



## SITUATION AND NEEDS ASSESSMENT OF HIV AND AIDS, DRUGS USE AND RELATED HEALTH SERVICES IN BORSTAL INSTITUTIONS IN NIGERIA 2019

### INTRODUCTION

According to the United Nations Standard Minimum Rules for the Treatment of Prisoners, young prisoners shall be kept separate from adults. Based on age classifications, adults are thus confined in prisons while young ones/juveniles are confined in borstal homes or reformatory institutions. Key populations, including people who use drugs and people in detention settings, typically have insufficient access to HIV prevention, treatment and care services.

Fragile health systems, stigma and discrimination, sexual and gender-based violence and lack of supportive policies are some of the barriers that key populations face. Up to two-thirds of all juvenile offenders, experience some physical abuse during arrest or detention by the police and most young offenders in detention do not get proper meals, sleeping facilities and facilities for personal hygiene.

#### GOAL

The goal of the assessment was to provide critical information on the current situation with regards to the availability and quality of health services in Borstal institutions.

#### OBJECTIVES

- Availability and quality of health services
- Size of injecting drug use and other risk factors associated with HIV and Hepatitis B&C in borstal institutions

#### METHODOLOGY

A cross-sectional descriptive study with both quantitative and qualitative data collection methods was employed for the assessment among staff of borstals. The study covered three borstals located in Ilorin, Ogun and Kaduna states. Informed consent was obtained for both quantitative and qualitative components of the study. Ethical approval was obtained from the National Health Research Ethics Committee.

### RESULTS

A total of **170** staff participated in the study with **78%** being males and **22%** females. About **two-fifths (39%)** were aged 30-40 years and **over 70%** (Table 1) had completed tertiary level education. Overall, more females (**73%**) than males (**27%**) had completed tertiary level education. Majority of the respondents were in administrative roles (**59%**) in the borstals and this was similar for both males (**62%**) and females (**49%**).

Reasons for detention	Female	Male
Violence	41.8 (41)	32.3 - 52.0
Justice procedure offenses	36.8 (31)	27.2 - 47.6
Drugs related offenses	78.3 (130)	71.3 - 84.0
Sexual assault	48.9 (43)	38.4 - 59.4
Robbery/extortion	40.9 (36)	31.0 - 51.6
Burglary	65.2 (73)	55.8 - 73.5
Homicide	2.5 (2)	0.6 - 9.8
Traffic offenses	11.9 (10)	6.4 - 21.0
Theft	71.3 (102)	63.3 - 78.2
Fraud	10.8 (9)	5.7 - 19.8

Table 1: Reasons for detention at Borstals

#### Drug Use and Injecting Risk Behaviours in Borstals

Though majority of the students at the borstals were instituted because of drugs, the respondents reported that the incidence of drug use within the borstals was low.



Figure 1: Average Number of People who Use Drugs in Borstals

#### Sexual practices in Borstals

About **40%** of students were reported to engage in sexual activities between themselves and transactional sex was reported to be about **38%**. About **14%** of students were reported to have been forced to have sex in borstals.

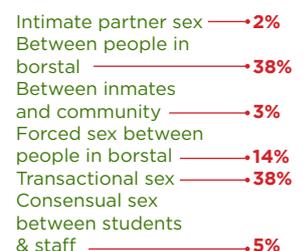


Figure 2: Sexual Practices in Borstals

## HIV Stigma

An assessment of stigma to HIV among the respondents showed that only about **70%** were willing to eat with a person living with HIV (PLWH). Seventy-two percent reported that they would be willing to continue to associate with a PLWH. Stigma was higher among males than females for all indicators of stigma. Students who were identified to be HIV or hepatitis positive were not allowed admission into the institutions.

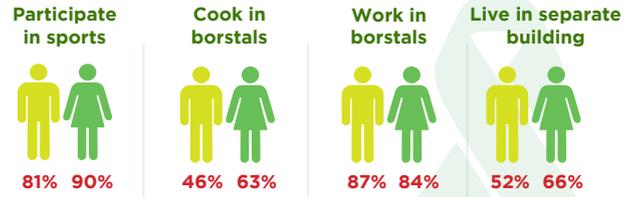


Figure 3: Attitude to HIV Infected Student Activities

## Availability of Health Services

Only **36%** reported the availability of HIV testing and TB screening services for the students. About a third (**33%**) reported the availability of treatment for tuberculosis. Less than **20%** reported availability of antiretrovirals for PLWH (**18%**) or for prevention of mother to child transmission (**12%**). Less than a third reported availability of screening for hepatitis B and C (**24%**) and vaccination against hepatitis B and C (**24%**).

Characteristics	Male% (n)	Female % (n)	Total % (n)
HIV testing services	39.7 (52)	23.7 (9)	36.1 (61)
Screening for tuberculosis	39.7 (52)	23.7 (9)	36.1 (61)
Treatment for tuberculosis	33.6 (44)	32.4 (12)	33.3 (56)
Prevention of mother to child transmission treatment (PMTCT)	14.5 (19)	2.7 (1)	11.9 (20)
ARV treatment for HIV	16.7 (22)	23.7 (9)	18.2 (31)
Male circumcision	8.3 (11)	2.7 (1)	7.1 (12)
Supplementary feeding for HIV or TB patients	8.3 (11)	15.8 (6)	10.0 (17)
Sexual and reproductive health	21.2 (28)	19.4 (7)	20.8 (35)
Condoms	16.0 (21)	7.9 (3)	14.2 (24)
Lubricants	13.7 (18)	2.6 (1)	11.2 (19)
Needles and syringes for injecting drug users	22.7 (30)	15.8 (6)	21.2 (36)
Testing for Hepatitis B	25.0 (33)	21.1 (8)	24.1 (41)
Testing for Hepatitis C	25.8 (34)	18.4 (7)	24.1 (41)
Hepatitis vaccination	27.5 (36)	10.5 (4)	23.7 (40)
Drug treatment	47.0 (62)	43.2 (16)	46.2 (78)

Table 2: Availability of health services

## Availability and Satisfaction of Health Services in Borstals

An assessment of the type of health practitioner available showed that 73% reported having access to medical doctors, 77% to nurses, 39% to pharmacists/pharmacist technician and 49% to laboratory scientist.



Figure 4: Type of Medical Staff Available at Borstals

## Satisfaction with Health Services

When respondents were asked about their level of satisfaction with the health services available at borstals, less than **50%** reported being very satisfied with the services available. More females (**58%**) than males (**43%**) reported being very satisfied with services available.

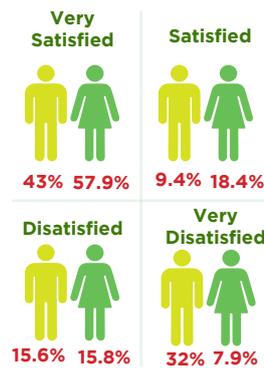


Figure 5: Satisfaction with Level of Healthcare Received by Staff in Borstals

## Exposure to Health Information

The most common health information received by respondents was on HIV/AIDS (**59%**).



Figure 6: Exposure to Health Education

## Conclusion

The situation and needs assessment of borstals in Nigeria highlights important findings that can be used to improve the services and rehabilitation of students within the institution.

- ✓ First, majority of the students are admitted due to drug related cases, but the health services are ill-equipped to deal with withdrawal symptoms that occur following cessation of use of psychoactive substances.
- ✓ Second, the borstals need significant infrastructural upgrade both in the living and training facilities of the students to ensure that they have optimal care and are rehabilitated under favourable conditions during the stay at the borstals.
- ✓ Third, the health system requires strengthening both in human resources, commodity and logistics supply, availability of laboratory and hospital equipment so as to improve the quality of services available to both student and staff of the institution.
- ✓ Fourth, the quality of health education and information for borstals staff and student should be increased and improved to reduce HIV stigma among staff of borstals.