PRISON REFORMS AND HIV/AIDS IN SELECTED NIGERIAN PRISONS

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Abstract

The latest reform in the Nigerian criminal justice system is in line with the global trend to shift from a retributive penal system, where the well being of offenders was a trivial issue, to a rehabilitative system where the welfare of offenders is given a pride of place. The issue of HIV/AIDS in prisons has however not been considered from this perspective. This study was carried out among inmates and officers in selected prisons in Nigeria focusing on institutional policies, level of awareness as well as the various risk practices engaged in by inmates regarding HIV/AIDS. Majority (76.3%) of the respondents heard of HIV/AIDS through the radio prior incarceration, HIV/AIDS testing was not voluntary as the prison rules stipulated that inmates be screened on admission. Indepth interviews with prison officials also revealed that they had a very low knowledge of HIV/AIDS. Some of the prison rules still reflect the retributive penal philosophy despite several reforms in the system. The study concluded that there is a need for the relevant authorities on HIV/AIDS control to begin to shift their focus to the prisons, and certain rules, which still reflect the old penal system be relaxed to demonstrate the global reform in penology.

Key Words: Prison reforms, Nigerian, HIV/AIDS

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INTRODUCTION

A number of reforms have taken place in the Nigerian criminal justice system (Odekunle, 2007). From the judiciary to the police and to the penal institutions, successive regimes have made and implemented various policies in line with contemporary developments in the system. The latest of these reforms was in line with the global trend to shift from a punitive and retributive penal system, to a reformatory and rehabilitative system whereby the welfare of offenders is given a pride of place. A major issue that affects offenders' welfare is the respect for the rights of inmates despite their incarceration. Advocates of inmates' rights are of the opinion that inmates are always deprived of very basic human rights (King, 2001). This is usually done through certain inherent policies in the system, which still reflects the archaic penal philosophy. Some of these violations include; provision of insufficient treatment for serious medical conditions; lack of adequate health education on disease control; and denial of conjugal visit just to mention but a few.

In countries whose penal philosophy is motivated by the rehabilitative philosophy, inmates are treated first as citizens with certain inalienable rights despite being in prison and not just as criminals who the society is better without. The introduction of specialists like psychologists, social workers, and medical doctors as prison officers (Thomas, 1972; Hill, 1988; O'Brien, 1998) was a significant symbolic step in this direction, underscoring the point that inmates are human beings in contrast to the prevailing policy of identifying inmates by numbers (King, 2001).

Consequently, the role of the prison officers changed from being a guard or "strict disciplinarian" to being a reformer and a change agent. The Prison authorities also had to change their recruitment policies as the right people had to be employed to do the job. In Nigeria however, the prison system is changing gradually as demonstrated by the several reforms the institution has been subjected to over the years. But these changes are more pronounced on papers than in actions. Rotimi (1983:63) observe that the aims of imprisonment in Nigeria have not been clearly laid down in form of statute but it is assumed that they are retributive in nature. Consequently, the issue of HIV/AIDS in Nigerian prisons can be explained against this backdrop. A recent rapid assessment on HIV/AIDS in Nigerian prison revealed a prevalence rate of 8.7% compared to the National figure of 5.8% (Iwoh, 2004). A lot of resources have been expended on the fight against AIDS in Nigeria but the prisons are not getting the needed attention. Reforms in the country are also characterized by inconsistencies and lack of implementation. This study therefore focuses on the extent to which the reform in the penal system has affected the treatment of inmates, using their awareness level and risky practices of HIV/AIDS as critical indicators.

METHODS

The study was conducted in two selected prisons in southwestern Nigeria, which were Agodi Prison in Ibadan, Oyo State and Ilesa Prisons in Osun State. A sample of 341 inmates across sexes was purposively selected for the study. Some officials of the prisons who were purposively selected were also interviewed. These included officers who had regular interactions with inmates and were in charge of relevant areas like administration, discipline, welfare and health. The research instruments were self-administered questionnaires for the inmates and in-depth interview for the officials. The research team obtained official approval for the study from the Command headquarters of the Nigerian Prison Services and the research objectives were explained to the participants who gave their consent before the study commenced. Other ethical considerations were strictly adhered to. Data were analyzed using both descriptive and inferential statistics.

RESULTS

Inmates' Socio-demographic Characteristics

Table 1 presents background information of selected inmates. In all, 91% were males, while 9% were females. Generally, male population usually predominate in prisons (Coyle, 2002). The respondents were mainly young people with a mean age of 31 years implying that they were in sexually active ages. Reports have confirmed that majority of those who contract the HIV/AIDS virus fall under the age of 30 years (NDHS, 2003).

On the educational background of respondents, only one-fourth had post secondary education and interestingly, more than half of those with post secondary education did not complete their education for reasons varying from financial constraints (53%), to incarceration (25%). The inmates were mainly of the Yoruba extraction in Nigeria; while very few were from other tribes of the country. This may be a reflection of the areas in which the study was carried out and also the fact that crimes are tried where they were committed. Over half of the inmates were single, while almost 45% were married. This is an indication of a tendency for the period to be a time of abrupt sexual discontinuation, particularly among the married inmates.

Table I: Respondents' Socio-demographic Characteristics

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VARIABLE	MALE (N=309)	FEMALE (N=32)	BOTH (N=341)			
Age of respondents						
18-20 years	10.4	6.3	10.0			
21-29 years	38.8	37.5	38.7			
30-39 years	28.2	37.5	29.0			
40-49 years	17.8	9.4	17.0			
50 years and above	4.9	9.4	5.3			
Mean age	31.4 years	32 years	31.5 years			
Median age	30 years	30 years	30 years			
S.D	9.84 years	10.42 years	9.88 years			
Educational level of responde	ents					
No education	13.3	9.4	12.9			
Primary	21.4	31.3	22.3			
Secondary	41.1	28.1	39.9			
Post-secondary	24.3	31.3	24.9			
	Occupational status before incarceration					
Civil Servant	16.2	31.3	17.6			
Artisan	20.7	18.8	20.5			
Trader	53.7	43.8	52.8			
No Occupation	9.4	6.3	9.1			
Religion						
Christian	64.1	53.1	63.1			
Islam	33.7	40.6	34.3			
Others	2.3	6.3	2.6			
Ethnic group						
Hausa/Fulani	8.4	18.8	9.4			
Igbo	18.1	12.5	17.6			
Yoruba	67.0	68.9	67.2			
Others	6.5	0.0	5.8			
Marital status						
Married	45.0	46.9	45.2			
Single	50.5	46.9	50.2			
Separated/divorced/widowed	4.2	6.2	4.7			

Awareness of HIV/AIDS among Inmates

Majority of the respondents (67.6%) did not have a good knowledge of AIDS (for instance, the full meaning of AIDS) though they had an idea of what it means as many of them gave different interpretations of AIDS in their local language. Almost all the inmates (90.1%) were of the opinion that AIDS is avoidable. Those who had heard of AIDS heard mostly from the radio (76.3%). This corroborates previous findings by Orubuloye et al, (1995) which reported that prisoners heard most of the information on AIDS from the radio. On measures to prevent AIDS, more female inmates than males were of the opinion that abstinence

could prevent AIDS. Majority of the inmates were however of the opinion that AIDS could be prevented with the use of condoms (see table II). Many of them (69.4%) were not aware that AIDS could be contracted through intercourse with prostitutes. Very few of them (21.7%) also knew that AIDS could be contracted through homosexual intercourse. This is interesting; more so that homosexual practice is a common subculture among inmates.

In-depth interviews conducted with some of the officers revealed that there had been reported cases of homosexual practices among the inmates in the past. Also very few of the inmates were aware that AIDS could be contracted through injecting drug use (IDU), though most of the respondents denied involvement in this act. Majority (69.8%) of the respondents were not also aware that AIDS could be contracted through unscreened blood transfusion. However, out of all the means of contracting HIV/AIDS virus, sexual intercourse was the most commonly known to inmates.

Table II: Distribution of Respondents' HIV/AIDS Awareness Level

VARIABLE	MALE (N=309)	FEMALE (N=32)	BOTH (N=341)
Full meaning of AIDS			
Brief idea	8.4	6.3	8.2
No idea	58.4	68.8	59.4
Good idea	33.1	25.0	32.3
Ever heard of HIV/AID	S from any of these	media	
Radio			
Yes	75.4	84.4	76.3
No	24.6	15.6	23.8
Television			
Yes	49.2	65.6	50.7
No	50.8	34.4	49.3
Newspaper/magazine			
Yes	40.9	59.4	42.5
No	59.2	40.6	57.5
Community health works	er		
Yes	27.3	53.1	30.2
No	72.1	46.9	69.8
Clinic			
Yes	28.5	37.5	29.3
No	71.5	62.5	70.7
Posters			
Yes	28.8	25.0	28.5
No	71.2	75.0	71.6
Is AIDS avoidable?			
Yes	90.9	90.6	90.1
No	6.8	9.4	7.0

Don't know	2.3	0.0	2.1
How Can AIDS be avoided	?		
Abstinence	26.2	56.3	29.0
Use condom	62.8	65.6	63.1
Limit sex to one			
partner	33.0	59.4	35.5
Avoid sex with			
prostitutes	27.8	46.9	29.6
Avoid sex with			
homosexuals	20.1	37.5	21.7
Avoid injecting drugs			
use	13.9	37.5	16.1
Avoid unscreened			
blood transfusion	27.2	37.5	28.2
Avoid injection with			
unsterilised syringes	31.2	43.8	32.6
Avoid sharing blades	38.2	37.5	38.1
Avoid kissing	8.4	3.1	7.9

Voluntary Counselling and Testing (VCT)

Prisoners were reportedly provided with voluntary counselling and testing (VCT) services. Taking a VCT may indicate the level of awareness of AIDS, because one of the cardinal points in VCT is the enlightenment of patient on the AIDS virus as well as ways of coping with the virus if tested positive. From Table III, majority of the inmates (77.4%) had not done VCT before. This was however a structural problem since, according to the officers, the prisons often ran short of the equipments needed for VCT. Most of the inmates (62%) expressed positive attitude to VCT and were willing to confirm their HIV/AIDS status.

However, very few inmates (3.8%) insisted that they would continue to have sexual intercourse even after testing positive and few (5.9%) reported that they would commit suicide if they discovered they were positive. This may underscore the essence of counselling. Interestingly, the following excerpts from the in-depth interviews with the Officers in Charge of prison health in both prisons revealed some infringements on the rights of the inmates;

"The rules say that we should carry out screening tests for inmates at the entrance point, which we do but we are always in short supply of these materials, so we don't do regular screening of inmates" (ASP in charge of Medical Unit, Ilesa).

"We do screen inmates for HIV/AIDS on entrance but the materials are exhaustible and we often run out of stock" (ASP in charge of Medical Unit, Agodi).

Table III. Distribution of Respondents' Attitude to Voluntary AIDS Test

VARIABLE	MALE (N=309)	FEMALE (N=32)	BOTH (N=341)			
Have you done a volu	Have you done a voluntary AIDS test before?					
Yes	21.0	28.1	21.7			
No	78.0	71.9	77.4			
No response	1.0	0.00	0.9			
Would you like to go for one?						
Yes	61.8	52.5	61.9			
No	38.2	37.5	38.1			
What would you do if result were positive?						
Engage in	3.9	3.1	3.8			
indiscriminate sex						
Avoid sex	14.2	9.4	13.8			
Commit suicide	5.8	6.3	5.9			
Pray about it	35.6	18.8	34.0			
Go to a physician	51.5	50.0	51.3			

Inmates' Risky Practices of HIV/AIDS

As already noted, most of the inmates were sexually active as majority of them had their first sexual intercourse with a girl/boyfriend and about one-third of them had their last intercourse just a month before their incarceration. More interestingly, more than half of them did not use condoms during the intercourse. In keeping their hair and cutting their nails, more than half of them used razor blade and three out of five of them shared the blades with others. Observation and interviews with the Chief Wardress in charge of the female inmates in one of the prisons revealed that the wardress kept some blades with her and gave them to the inmates on request.

Interestingly, there was no means of identifying which of the blades belonged to which of the inmates. The wardress seemed to be more concerned about the "safety" of the inmates in that they do not use the blades to attack each other than the risk of contracting or spreading HIV/AIDS. Another interesting finding here was the fact that the prison authorities, in a bid to empower inmates, allowed some inmates who were professional barbers to continue with the trade of barbing. These barbers were patronized by some inmates and some officers but the barbing instruments were not usually sterilized either because the inmates did not have access to sterilization tools or they were unaware of such process, hence they underscored the essence of sterilizing the kits.

Homosexuality and Prison Rape

The issues of homosexual acts and rape in prison are fundamental in the spread of HIV/AIDS. Homosexual acts could be in form of men having sex with other men (MWM), or women having sex with other women, usually referred to as lesbianism. On the other hand, rape is a common practice in prisons whereby inmates are sexually assaulted by other inmates, who in most cases, are usually older than their victims. Prison rape serves a dual purpose; it is used to enforce superiority and dominance by older inmates and also as a means of punishment. Since inmates are usually separated by gender, it means that prison rape is common among same sexes. In-depth interviews with prison officers in both prisons revealed that prison rape was common among inmates though cases brought to the knowledge of the authorities were investigated.

"Rape is common among them (inmates), it is usually done by older inmates and at times rich inmates who entice poorer one with money or other material things but we usually respond to cases brought to us by investigating and punishing the offenders" (Chief Disciplinary Officer/Chief Warder, Ilesa).

"Yes they do it (homosexual acts) among themselves. It's a common practice among the inmates". (Chief Disciplinary Officer/Chief Warder, Ilesa)

"Since they are sexually active, you cannot rule out the possibility of them having sex with one another. There were some reports of such (homosexuality) in the past, but we don't condone anything of such among inmates" (Superintendent of Prisons in charge of Administration, Ilesa)

However, not all cases of prison rape are reported, since most victims may be afraid of reprisal from the perpetrators.

DISCUSSION

The findings of this study have been able to reveal some interesting issues about HIV/AIDS in Nigeria especially as it has to do with the handling of inmates, exposing them to information on AIDS, and their well-being in terms of safe practices of HIV/AIDS. Generally, the level of awareness of HIV/AIDS among the inmates was very low and this is not unconnected with the fact that HIV/AIDS campaign is not given as much attention as it is given among those outside the prisons.

Also the fact that radio has been established as the most effective medium of mass mobilization on awareness of HIV/AIDS, but the prison authorities do not

permit inmates to have access to one and do not even make provisions for a central radio system in prison. Though this may seem as an unnecessary luxury to inmates but the aim of enlightening the prison population would be realized at the same time.

The study also revealed that some of the officers were not better aware of AIDS than some of the inmates. This was demonstrated by the seeming ignorance of the Chief Wardress of one of the prisons who did not know the implication of inmates sharing the same razor in cutting their nails. She was satisfied that they were safe as long as the inmates made use of the razors under her "watchful" eyes. This finding corroborates the finding of an earlier study by Iwoh (2004), who reported that there was low knowledge of HIV/AIDS/STIs among prison staff in Nigeria.

The study also revealed that most of the inmates' knowledge of HIV/AIDS is limited to sexual intercourse with the opposite sex. Interestingly, many of them were unaware that homosexual acts, unscreened blood transfusion, sharing of sharp instruments as well other risky practices of AIDS are as risky as sexual intercourse. Moreso, the fact that such acts as homosexual, tattooing and sharing of blades are common practices among inmates, which expose them to HIV/AIDS.

Furthermore, since the effects of rape on the psyche of the victims are serious and enduring, issues such as rape and sexual violence in prisons require urgent and concerted attention. This is so because a victim of rape is a potential abuser in future, moreso that most inmates will return to the society sooner or later. A rehabilitative penal philosophy will therefore provide adequate counselling services for the victims of prison rape and not just wave it away with excuse that such act does not exist. Since the period of incarceration has been identified as a time of abrupt sexual discontinuation for inmates, who had been sexually active prior incarceration, particularly, married inmates, the prison authorities can permit conjugal visits. This type of visit is usually paid by spouses of inmates and is usually in a close and intimate environment but under the "watchful eyes" of the officials. If this is considered, it might reduce the incidence of prison rape.

Lastly, prisoners' right to voluntary counselling and testing which is one of the crucial approaches in the management of HIV/AIDS is being infringed upon as they were made to undergo the test by force. This may have some unwholesome consequences on the status of inmates who test positive to HIV/AIDS. However in prisons where VCT is done, the necessary materials needed for carrying out the test were reported to be in short supply. Apparently, this is an attestation of the fact that the prison is often neglected in the campaign for the eradication of HIV/AIDS.

CONCLUSION AND RECOMMENDATION

The existence of AIDS in prisons is no longer a novel idea and inmates' risky practices have been established in Nigerian prisons. Generally, the neglect of the prison population may be a reflection of the penal policy of the country, which emphasizes punishment and retribution at the expense of reformation and rehabilitation of offenders. If the nation must meet the Millennium Development Goal of eradicating HIV/AIDS, then reforms in the criminal justice system must take this into cognisance the penal philosophy, which guarantee the well-being of inmates in line with global developments. The incorporation of HIV/AIDS enlightenment programmes in prisons should be considered as imperative as those carried out for people outside the prisons if the programmes are to make meaningful impact since the welfare of prisoners is invariably the welfare of the society. This is true because most of the inmates will someday return to the society. The epoch when inmates were considered as inconsequential members of the society under the punitive and retributive penal system is over. Finally, government should consider alternatives to imprisonment in order to alleviate the concomitant effects of prison congestion, one of which is the health implications, especially with regards to HIV/AIDS. Quite a huge resource have been expended on the eradication of AIDS globally, but for the resources to be justified, a holistic approach which will take care of all vulnerable groups, irrespective of their liberty status must be put in place. This can only be achieved when inmates in various prisons are not condemned and ostracised but are seen as part of the society and this can be achieved through prison reforms which incorporate the rehabilitative penal philosophy.

REFERENCES

Coyle, A. (2002) .A Human Rights Approach to Prison Management Handbook for Prison Staff International Centre for Prison Studies York Road London United Kingdom. PP. 15-47.

Hill, I. (1988). The Professional Role of Prison Officers, in D. Biles (ed.), Current Australian Trends in Corrections (PP. 8-14) Sydney: Federation Press.

Iwoh, I. (2004). "HIV/and the Workplace: Preventing Low Productivity among Personnel of Nigeria Prison Service." Paper Presented at the 15th International Conference on AIDS, Bangkok, Thailand.

King, S. (2001). "Prison- A New or Renewed Response to Crimes?" paper Presented at the 4th National Outlook Symposium on Crime in Australia, New Crimes or New Responses Convened by the Australian Institute Criminology and held in Canberra, from 21^{st} to 22^{nd} June.

NDHS (2003) Demographic and Health Survey, National Population Commission, Abuja, Nigeria.

Thomas, J.E. (1972) The English Prison Officer Since 1850. London. : Routledge and Kegan Paul.

O'Brien, P. (1998). "Prison on the Continent, Europe 1865-1965" in N. Morris and

D. J. Rothman, *The Oxford History of the Prison*. Oxford University Press, Oxford: pp. 203-231.

Odekunle, F. (2007). "Overview of Prison Reforms" A paper delivered at the 2007 Controller-General of prison's Retreat for Senior Officers at the MicCom Golf Hotels and Resort Ibokun, Ada, Osun State, Nigeria.

Orubuloye, I.O. Omoniyi, O.P. and Shokunbi, W.A. (1995). Sexual Networking, STDs and HIV/AIDS in Four Urban Gaols in Nigeria. Health Transition Review, Supplementary to Volume 5 pp. 123-129.