IV/AIDS has become a major policy and management issue for prison administrators in this country, as in the rest of the world. It places enormous stress on already overburdened correctional systems. This paper describes the work of the recently established National HIV/AIDS in Prisons Information Clearing House (NAIPIC). Timely and accurate information can place corrections professionals in a stronger position to address the problem of HIV infection among inmates. Timely and accurate information allows the development of reasoned and effective management policies that provide sound education and training to ensure equitable delivery of services to all. NAIPIC provides a central source of information on how HIV impacts on the work and workplace of corrections professionals.

Before turning to the specific aims and roles of NAIPIC it is worth while looking briefly at the history of clearing houses. Clearing houses originated in London in 1832. The first clearing house was established by bankers for the adjustment of their mutual claims for cheques and bills, by exchanging them and settling their balances. This concept was gradually adopted by other institutions and organisations and extended to mean a central office for the receiving and giving of information.

The domain in which an information clearing house functions efficiently, is in distinguishing useful information from that which is not. NAIPIC's function is to filter the mountain of data that HIV/AIDS research programs around the world generate.

NAIPIC has three main aims:

■ to establish a cohesive national network in prisons with clear lines of communication and avenues of information gathering and distribution;

■ to make timely and relevant HIV/AIDS information available to prison systems throughout Australia; and

■ to acquire, organise, review, update and distribute current HIV/AIDS information in the form that best meets the needs of its users.

NAIPIC operated initially during the period 7 May to 7 November 1990. During this time a communication network was established, based in NSW, linking all Australian corrections systems in the following areas relating to HIV/AIDS:
policy and projects; and
- current and future needs.

Much of NAIPIC’s effort has been directed at collating current HIV/AIDS in prisons research and educational strategies and providing samples of educational material such as brochures, videos and T-shirts.

Australian prisons are relatively isolated from available HIV/AIDS information. They are independent with little tradition of sharing information. Because the virus has only a small visible presence in some Australian correctional systems, jurisdictions vary in their concern, preparation and resource allocation for HIV positive prisoner management.

In 1989 the Commonwealth AIDS in Prison survey (Heilpern & Egger) highlighted a desire to share educational strategies, information and research between jurisdictions. All jurisdictions acknowledged that this would reduce costs and accelerate the implementation process. It does not follow that a policy successful in one jurisdiction should work in another. However, communicating successful methods of managing HIV positive inmates in a way that contributes to efforts of others in their work against the spread of the pandemic is vital in Australian gaols.

After receiving a grant from CAWISE (NSW Department of Corrective Services, Prison AIDS Project), the initial approach to establishing NAIPIC was to view Australian prison systems as a marketplace. This allowed NAIPIC to develop a business plan to meet the needs of its various ‘clients’. It was clear from the start that there were several distinct ‘market segments’. These were identified as:
- directors-general and heads of departments;
- decision makers within corrections departments;
- State health departments; and
- heads of communicable disease units - including Inter-Governmental Committee on AIDS representatives.

After identifying key individuals and institutions with whom we had to communicate I began a series of visits to the States and Territories and collected a great deal of material. With this initial inflow of information from both Australian and international sources a database was created using the INMAGIC software package. Experience points to a three-tiered need for information by prisons. In order of priority these are:
- HIV/AIDS in prisons research in Australia and overseas;
- HIV/AIDS in prison education strategies in Australia; and
- general HIV/AIDS research including medical and educational material.

The costs and time involved have led NAIPIC to concentrate on the first two levels while providing information on community-based clearing houses for the third.

The clearing house was established against a background of no ultimate answers to the problem of HIV/AIDS. While much remains to be learned about HIV infection it is increasingly obvious that prison policy makers and administrators cannot delay action until medical science produces the ultimate answer. The problem must be addressed now.

While the prison environment is one not generally associated with education and care, it does offer a chance to give both uninfected and HIV positive prisoners education and care that enhances their own health and their sense of responsibility upon release. Viewed in this light, it is the whole community which will benefit from the effective management of HIV infection in prisons. Perhaps this concept is best illustrated with a comment made by the owner of the CNN television network, Ted Turner: ‘If people receive intelligent information they will react more intelligently’. This axiom applies to both inmates and administrators alike.

What is the best way to communicate intelligent, useful information? Apart from the attributes already described, information clearing houses have many other advantages. The
motto of the United States National AIDS Information Clearinghouse (NAIC) encapsulates their mission very clearly: 'We're here to make things clear'.

NAIC’s services are aimed at all health professionals and extend to minority populations, community-based organisations and the general public. Since its beginning in 1987 NAIC has compiled two extensive databases on HIV and AIDS service organisations and unpublished educational material. It has distributed over thirty-eight million free publications to users throughout the US and abroad. Among its other corrections-related activities, NAIC publishes short, non-technical summaries of AIDS-related correctional topics. The main point is that information is a vital ingredient in controlling the spread of HIV/AIDS. Information clearing houses such as NAIC and NAIPIC are among the most effective ways of delivering this information.

Unfortunately, the conclusion one is forced to draw is that Australia lags sadly behind the rest of the world in this area. However, NAIPIC is building a structure for the timely communication of information necessary to manage inmates in such a way that HIV infection is not a constant risk for either inmates or staff. NAIPIC does not dictate policy. It aims to provide information so that effective policies can be designed.

Where does NAIPIC go from here? As well as updating, maintaining and publishing its resource documents, NAIPIC proposes three main areas of activity for the future. Firstly, the development of background papers and analyses of issues relating to HIV in prisons, including occupational health and safety, education and training, management of HIV positive inmates and industrial issues. Secondly, collaboration with the National Centre in HIV Epidemiology and Clinical Research to develop strategies for improving the collection of epidemiological information on HIV infection in prisons. As yet there is no standardised collection of such information in Australia, and it would provide a useful basis for analysing issues which have implications for all prison systems. Thirdly, developing proposals for cost sharing between States in order to maintain the information system.

Prison populations have special risks and special needs. NAIPIC does not intend to become yet another AIDS bureaucracy. It aims eventually to do itself out of a job.

Reference