Aboriginal or Torres Strait Islander people who are prisoners are not at risk of HIV/AIDS infection just because they are Aboriginal or Torres Strait Islanders. Some Aboriginal people may be in a high-risk category because of their behaviour, but no more so than other people who behave in a like manner. Simply being an Aboriginal or Torres Strait Islander does not place a person at risk of contracting the AIDS virus.

Education and Prevention

Aboriginal or Torres Strait Islander people who are prisoners, and in fact all people who are prisoners, require ongoing information about HIV/AIDS prevention and access to education and the means of protection.

The issue of Aboriginal prisoners and HIV/AIDS has received little attention despite the level of racist treatment they receive in prisons. However, there is now a need to provide resources to address the specific issues of AIDS and Aboriginal and Torres Strait Islander prisoners in a more open and concerted manner. This is especially so given fears expressed about AIDS by Aboriginal and Torres Strait Islander people, by prisoner officers and by prisoners.

AIDS education and prevention should be addressed in a comprehensive package for all Aboriginal prisoners. In addition, the health status of Aboriginal people must be taken into account. The generally lower health status of Aboriginals may mean that the onset of AIDS after exposure to HIV will be more rapid than in the general prison population. Education and prevention programs must also address use of intravenous drugs and other substances, because some Aboriginal prisoners have said they are tempted to use heroin or other substances when really depressed or bored in prison.

HIV Screening/Testing For Aboriginal and Torres Strait Islander Prisoners

This issue is a major concern that Aboriginal prisoners have expressed to a number of Aboriginal health services. Aboriginal prisoners do not agree with compulsory HIV testing. There are serious ramifications that have to be considered such as:
the close-knit Aboriginal community within the prison system;
traditional Aboriginal cultural values;
lack of confidentiality in some prison systems; and
ostracism of Aboriginal inmates who are HIV positive by their fellow inmates.

There is a great need within the prison system for pre- and post-counselling, and support mechanisms which are regarded as culturally acceptable and appropriate by Aboriginal prisoners. In addition, trained Aboriginal health workers must be employed to provide counselling and support.

There is some fear expressed by Aboriginal prisoners that AIDS could be another weapon against Aboriginal people in the prison system. It is not necessary to be an Aboriginal or Torres Strait Islander to know that discrimination is rife in prisons. The fear that Aboriginal prisoners have expressed is that HIV seropositivity together with their Aboriginality would subject them to increased discrimination.

**Media Issues**

Aboriginal people, whether in prison or not, strongly resent irresponsible and sensationalised media reporting of stories relating to Aboriginal people, AIDS and sexually transmitted diseases (STDs). What is asked for is that the media consult with Aboriginal people and report issues accurately rather than misrepresent them.

**Royal Commission Into Aboriginal Deaths In Custody**

There have been many deaths in custody of Aboriginal people. The Royal Commission into Aboriginal Deaths in Custody is inquiring into nearly a hundred deaths. While it has not completed its inquiries it is quite clear that:

- the high number of Aboriginal deaths is largely related to over-representation of Aboriginals in prison - ten times the national average; and
- the vast majority of deaths are health-related, primarily to alcoholism.

In its interim report the Royal Commission made fifty-six recommendations concerning the need to review sentencing practices, treatment of drunkenness, conditions and procedures at police lockups, training of police and prison officers, medical issues and post-death investigations.

These recommendations are primarily matters for the States to implement. They are providing some impetus for improved police and prison practices and the adoption of sentencing practices which keep Aboriginals out of prison. There is clearly a long way to go.

Gaols are high-risk environments for the transmission of the AIDS virus. Measures which keep Aboriginals out of prison as well as procedural reforms within the prison systems are vital to avoid increased exposure of Aboriginals to AIDS risks.
Aboriginal Visitors Scheme

In February 1988, the Western Australian Cabinet approved the implementation of major recommendations of the Vincent Interim Inquiry into Aboriginal Deaths in Custody (1988).

One of the recommendations approved was for the establishment of an Aboriginal Visitors Scheme (AVS) to appoint people who would visit Aboriginal detainees in police lockups and prisons. It was also envisaged that these visitors would provide support to Aboriginal prisoners and observe and report on conditions in places of detention.

The AVS has been effective as one means of reducing the incidence of self-harm and deaths in custody. Visitors appointed under the AVS are Aboriginals who have the confidence of their local community and who are expected to be able to make informed and objective judgments, and to report appropriately. They are afforded a status which facilitates the performance of their functions and receive payment in recognition of their duties. Aboriginal Visitors are appointed to participate in the Scheme on a rostered basis in areas with a significant Aboriginal population. The roster provides for regular attendance at prisons and police lockups, as well as crisis visits. A number of other States have similar programs.

Consideration should be given to establishing similar schemes specifically relating to HIV/AIDS. Alternatively, the existing Aboriginal Visitors Schemes could be adapted to address the issue of HIV/AIDS and Aboriginal and Torres Strait Islander prisoners.

Conclusion

In conclusion, HIV/AIDS is a major issue for the Aboriginal community in general and in particular, for Aboriginal people in prison.

Many people argue that any person in prison is likely to be at an increased risk of HIV infection. As is well-known, Aboriginal people are over-represented in prison. It is not uncommon for an Aboriginal person to have spent time in gaol, albeit only brief periods for minor offences. Once in prison an Aboriginal person has reduced access to protection from HIV infection because he or she is less likely to be able to effectively use the health education, counselling and information services that are generally available.

In the unhappy event that an Aboriginal person becomes infected with HIV, the risk that this infection poses to his or her health may be increased because of the chronic health problems that are so common in Aboriginal communities.

The challenges are quite clear:

- finding socially acceptable alternatives to imprisonment for Aboriginal people in particular in relation to minor offences;
- improving the access Aboriginal people have to health information and education services once in prison;
- providing educational material which is culturally relevant particularly in terms of language and general presentation;
- improving prisoners’ access to the means by which they might protect themselves from HIV/AIDS and other STDs - for example, clean needles and condoms;
- keeping testing confidential and voluntary, and improving pre- and post-test counselling facilities;
- ensuring that Aboriginal or Torres Strait Islander people from appropriate health services are used as health educators within prisons to deliver programs to Aboriginal and Torres Strait Islander prisoners; and
- ensuring that State and Territory Governments and prison administrators consult and liaise with Aboriginal community-based health specialists, so that culturally appropriate approaches to dealing with AIDS are implemented.
Reference


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