

# Perceptions of AIDS in Prisons: Relevance in Developing Educational Strategies

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**I**n addressing the prevention of the spread of the HIV virus in prisons, we have seen a rush to develop and implement prevention measures. Much attention has centred on such controversial issues as: compulsory or voluntary blood testing; isolation versus integration of HIV infected inmates into the prison mainstream, provision of condoms and disposable needles, and effective educational measures for specific groups within the prison.

Unfortunately, this rush to develop and implement preventive measures has resulted in a degree of polarisation which has hindered progress towards implementation of effective prevention measures. A thorough analysis of the perceptions and positions of the two main groups affected by AIDS in prison, prisoners and prison officers, has been missing from much of the debate. These perceptions, rather than an imposition of conceptual frameworks from outside, provide a critical basis when formulating guidelines and strategies for the effective implementation of AIDS prevention measures, and AIDS educational programs in prisons.

Various committees and reports have recognised that immediate, major and appropriate educational strategies must be designed and implemented for prison staff and prisoners as a major means of preventing the possible spread of the virus in prison (NACAIDS report 1987; Hammett 1989).

Most AIDS studies in the general population focus on the individual's level of knowledge, attitudes and beliefs about AIDS and AIDS prevention measures (Dawson 1988; Clark et al. 1989). It seems that most studies in prisons both in Australia and overseas follow this same model (Gaughwin et al. 1990). Some studies in prisons have concentrated on estimating risk behaviours (Miner & Gorta 1986; Conolly & Potter 1990), presenting policy and practice in prisons (Harding 1987) or evaluating AIDS prevention programs (Conolly & Potter 1990). These types of research are obviously valuable. However, we believed it was important to investigate the perceptions of relevant groups prior to developing a comprehensive AIDS prevention strategy.

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<sup>1</sup> The views expressed in this paper are those of the author and do not necessarily reflect views or policies of the Department of Corrective Services.

This article presents findings from a study of prisoners, prison officers and staff within metropolitan prisons in an Australian capital city. The study explored not only individual knowledge and perceptions, but also investigated perceptions of others' perceptions - for example, what prison officers perceive prisoners think about a particular issue.

This paper presents several examples of the need to:

- consider other people's perceptions; and
- seek reasons why people perceive issues in specific ways.

These examples reflect a broad view of 'education'. Education relates to determining appropriate methods to inform prisoners, officers and staff about AIDS and AIDS prevention measures. However, we must also recognise the role and value of 'education', for all segments, individuals and groups who influence and determine policy and practice in prisons.

There are a number of controversial areas in which effective policy must develop if there is to be a strong commitment to prevent the spread of AIDS in prisons. Too often sensitive policy decisions are made as a result of people's unrealistic fears, or by groups with vested interests.

There is a need for all concerned to be aware of people's knowledge level and their concerns or anxieties in respect to AIDS, when developing strategies and policies.

### **The Research Process**

Prisoners, prison officers and staff at each of the city's seven metropolitan prisons voluntarily participated in this study. A total of 201 prisoners, 210 prison officers and fifty staff were interviewed. Administrative staff and the Prison Officer's Union supported the research concept and saw the potential benefits in understanding the perceptions of each group in the strategy development process.

Personal interviews were conducted with individuals by trained market research interviewers. Interviewers external to the Department of Corrective Services were used to ensure that objectivity and confidentiality were explained and maintained. An Aboriginal interviewer was employed to conduct the majority of interviews amongst male Aboriginal prisoners. The interviews were conducted using a semi-structured questionnaire which was developed after discussions with all relevant groups within the prison community and with AIDS experts in Perth. The interviews took an average of 35 minutes with prisoners and 45 minutes with prison officers and staff.

### **Some Research Findings**

#### *Is AIDS a salient issue?*

Prior to developing any 'educational' strategy it is important to understand how salient the issue is amongst the target groups, and what knowledge, attitudes and beliefs they currently possess.

The study found the AIDS issue was more salient amongst staff and officers than amongst prisoners: 64 per cent of staff and 53 per cent of officers claimed that their group 'talked about AIDS' 'a lot' or 'to some extent', compared with 24 per cent of prisoners.

*Has sufficient information been disseminated?*

Officers' and staffs' views of the amount of AIDS information given to officers were the same: around 52 per cent said 'the right amount'.

Officers' main reasons for believing insufficient material had been provided were:

- a desire for updated or follow-up information;
- a need for job-related information;
- insufficient depth of some information;
- a concern that they are not given the 'full picture' on AIDS.

The main reasons given by staff were:

- information is lacking
- information had insufficient depth
- inappropriate presentation methods were used.

These reasons highlighted content, medium and dissemination factors when considering the development of further educational strategies for officers.

*Do people want more AIDS information?*

Not surprisingly, the majority of prisoners and officers claimed they would like more information on AIDS (66 per cent and 79 per cent respectively). Whilst this question almost 'begged' a positive response, it is noteworthy that more officers than prisoners said they would like additional AIDS information. This is consistent with other findings in the survey on prisoners' receptivity towards information and education generally.

*People's perceived knowledge level of AIDS*

The media have publicised AIDS quite extensively in the past five to six years. Within the last four years the Department of Corrective Services has conducted some AIDS awareness programs mostly amongst officers and staff, but also amongst prisoners.

In comparing the results of individuals' perceptions of their own knowledge about AIDS and their perceptions of others' knowledge level, some interesting results were found:

- all individuals consider they are more knowledgeable than they perceive other groups to be, and compared to members of their own group;
- officers consider themselves and their group to be more knowledgeable than prisoners;
- staff think officers are more knowledgeable than prisoners; and
- staff consider themselves as individuals, to be more knowledgeable than either officers or prisoners.

The implications of these findings for strategy development are that whilst officers and staff consider prisoners to be less knowledgeable than themselves personally, they may not realise that prisoners consider themselves knowledgeable.

A number of prisoners have been exposed to AIDS educational material and the majority of those prisoners consider the information provided to be 'useful'. However, some exposed and some non-exposed prisoners do not consider educational material to be 'useful' because: they know it all already, or they say they are not concerned about AIDS. Therefore, material must be considered relevant by individuals and presented in an interesting manner.

#### *Are people afraid of catching AIDS in prison?*

Beliefs about and attitudes towards AIDS are formed as a result of the content of information, and manner in which it is received. These in turn directly affect a person's anxiety level associated with AIDS. It was considered important to gain some idea of how people felt about AIDS emotionally, as a person's emotions are likely to influence their opinions about their own or other's behaviours, and/or lead them to adopt certain behaviours.

A person's perceived likelihood of catching the AIDS virus could develop from either a logical base, for example, 'if I indulge in these behaviours I may be exposed to the AIDS virus' or it could develop from an irrational base fuelled by lack of knowledge or strong emotions or, from a combination of these.

Prisoners and officers were asked how afraid they personally were, of catching AIDS in prison and how afraid they considered their group and the other groups to be. The findings suggest:

- prisoners and officers consider themselves individually less afraid than their group generally;
- prisoners' views of officers are consistent with officers' own views;
- officers' view prisoners as less afraid than prisoners see themselves;
- staff see officers as more afraid than they see prisoners to be. Staff views are consistent with how officers see their group, and are similar to how prisoners view their group.

The implication for strategy development is:

- more officers overall are afraid, than are prisoners;
- prisoners are more afraid of catching AIDS than officers and staff believe.

For example, one quarter of prisoners claimed they were personally 'very afraid' of contracting AIDS in prison. Educationalists need to be aware that prisoners have perhaps been underestimated not only in their knowledge, but also in how afraid they are of catching AIDS. We need to be cautious not to conceive stereotypes of prisoners, as being unconcerned with their own health or future.

Table 1

**Perceptions of One's Own AIDS Knowledge Level Compared to Other People's Knowledge Level**

**% Prisoners View...(201)**

<b>Knowledge Level...</b>	<b>Themselves</b>	<b>Other Prisoners</b>	<b>Officers</b>
Good knowledge	18.5	3.0	24.4
Some knowledge	52.5	49.8	36.3
Not much knowledge	19.5	28.9	12.9
No knowledge	9.0	4.0	3.5
Don't Know	0.5	14.3	22.9
<b>TOTAL:</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>

**% Officers View...(210)**

<b>Knowledge Level...</b>	<b>Themselves</b>	<b>Other Officers</b>	<b>Prisoners</b>
Good knowledge	17.6	12.0	4.8
Some knowledge	65.3	65.1	48.1
Not much knowledge	17.1	12.8	32.9
No knowledge	-	0.5	2.8
Don't Know	-	9.6	11.4
<b>TOTAL:</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>

**% Staff View...(50)**

<b>Knowledge Level...</b>	<b>Themselves</b>	<b>Prisoners</b>	<b>Officers</b>
Good knowledge	36.0	6.0	2.0
Some knowledge	58.0	33.0	52.0
Not much knowledge	6.0	57.0	34.0
Don't Know	-	4.0	12.0
<b>TOTAL:</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>

Table 2

**Fear of Catching AIDS in Prison - Self versus Own Group**

<b>Afraid of Catching AIDS in Prison?...</b>	<b>% Prisoners (201)</b>		<b>% Officers (210)</b>		<b>% Staff (50)</b>
	Self	Other	Self	Other	Staff Generally
		Prisoners		Officers	
Very afraid	26.4	21.4	10.5	14.4	6.0
Fairly afraid	9.0	18.9	27.1	40.2	10.0
A little afraid	10.4	15.9	18.6	25.9	30.0
<b>Sub Total</b>	<b>45.8</b>	<b>56.2</b>	<b>56.2</b>	<b>80.4</b>	<b>46.0</b>
Not very afraid	9.0	13.9	20.5	11.0	24.0
Not at all afraid	44.3	13.4	23.3	3.3	22.0
Not sure	1.0	16.4	-	5.3	8.0
<b>TOTAL</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>

Table 3

**Perception of Fear Amongst Other Group**

<b>Views Afraid of Catching AIDS in Prison?...</b>	<b>% Prisoners Views</b>	<b>% Officers Views</b>	<b>% Staff Views</b>	
	Of	Of	Of	Of
	Officers	Prisoners	Prisoners	Officers
Very afraid	24.4	5.7	4.1	32.0
Fairly afraid	20.4	15.2	26.5	30.0
A little afraid	9.5	19.0	20.4	16.0
<b>Sub Total</b>	<b>54.3</b>	<b>39.9</b>	<b>51.0</b>	<b>78.0</b>
Not very afraid	8.5	17.1	24.5	8.0
Not at all afraid	7.0	13.8	14.3	2.0
Not sure	30.2	29.2	10.2	12.0
<b>TOTAL</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>

Analysis of the relationship between level of fear and likelihood of contracting AIDS in prison showed results in the expected direction. That is, the more likely respondents were to consider it likely they could contract AIDS in prison, the more likely they were to be afraid.

## Perceptions of Various Informational Media

### *Prisoners*

Table 4 below shows that prisoners, officers and staff held relatively similar views on what would be 'a good way' of educating prisoners about AIDS, although some differences between the groups emerged for the following:

- prisoners rated small discussion groups with external experts virtually equal with documentary videos, whereas more officers and staff thought videos better;
- prisoners and officers were more inclined to consider pamphlets to be better than posters, however the reverse was the case for staff;
- prisoners were far less likely than officers or staff to consider comics to be 'a good way'. It appears some prisoners consider the use of comics for a topic such as AIDS to be somewhat demeaning, although across all groups comments were made that they could be effective for illiterate people.

These results indicate we should be careful not to stereotype prisoners and thereby reduce the effectiveness of educational programs by using media which they may view as inappropriate. We need to avoid directing information towards the 'lowest common denominator' and be aware that such a process may be seen by prisoners as insulting, as it would be to people in the general community.

*Table 4*

### Proportion of Prisoners, Officers and Staff Who Consider Various Informational Media to be 'A Good Way' of Educating Prisoners

Informational Media	% Prisoners	% Officers	% Staff
Small discussion group with external expert	79	71	72
Documentary videos	78	78	78
Films or movies	70	74	60
Small discussion group with external doctor	63	63	52
Pamphlets	48	49	32
Comics	36	55	64
Posters	33	33	46
Small discussion group with a prisoner who knows about AIDS	28	32	30
Small discussion group with departmental doctor	27	30	28
Small discussion group with an officer who knows about AIDS	16	7	20

*Officers*

Staff and officers' views are relatively similar with respect to the two highest rated educational strategies for officers, although officers rated films or movies higher than did staff.

More staff than officers considered posters and discussions led by a prison officer better than did officers themselves. Although both groups rated comics last, more staff than officers were inclined to think comics are 'a good way'.

Table 5

**Proportion of Officers and Staff Who Consider  
Various Informational Media to be 'A Good Way'  
of Educating Officers**

<b>Informational Media</b>	<b>% Officers</b>	<b>% Staff</b>
Small discussion group with external expert	82	80
Documentary videos	79	78
Films or movies	70	58
Small discussion group with external doctor	65	60
Pamphlets	46	40
Small discussion group with departmental doctor	36	32
Posters	24	42
Small discussion group with an officer who knows about AIDS	20	34
Comics	11	22

*Comment*

People generally are aware that AIDS information exists within the system. As publicity about AIDS continues, maintaining it in people's consciousness, provision of further AIDS information to prisoners, officers and staff needs to be carefully thought out rather than simply supplied. It is essential in further information dissemination that the style of presentation and content of material generate interest amongst target groups and take into account the varying fear levels at which people are operating.

*Testing Prisoners*

With regard to testing prisoners on arrival in prison and retesting, prisoners' and officers' views are similar to each others but different to staff views. Officers are more likely than are staff to consider that prisoners should be compulsorily tested and retested. The exception is with retesting high-risk prisoners, where prisoners' and staff views are similar to each others but different from officers' views.



Table 6

**Prisoners, Officers and Staff Views on Testing Prisoners**

	%	%	%
	Prisoners	Officers	Staff
<u>Compulsory Testing on Arrival</u>			
Yes - for High-Risk Groups	94.5	98.1	86.0
Yes - for All Prisoners	84.6	84.8	54.0
<u>Retesting From Time to Time</u>			
Yes - for High-Risk Groups	81.1	97.1	84.0
Yes - for All Prisoners	56.3	55.7	32.0

Similarly the main reasons why some members of all groups felt prisoners should be tested on arrival in prison were:

- so the individual feels safer and is aware;
- there is the risk of spreading HIV; and
- the 'unknown' factor.

Differences emerged with the following reasons:

- officers will feel safer and are more aware - far more officers than staff (22 per cent versus 7 per cent), and no prisoners gave this reason;
- prisoners and officers will feel safe and are more aware - more officers than staff or prisoners gave this reason (15 per cent versus 4 per cent);
- discrimination is avoided if testing is compulsory - this reason was given by more staff than the other two groups (15 per cent versus 5 per cent of prisoners and 3 per cent of officers).

These results challenge the stereotype of prisoner resistance to compulsory testing. Rather than being resistant, prisoners are overwhelmingly in favour of compulsory testing - for their own protection.

*Testing Officers*

Officers were more likely than were staff to agree that all officers should be AIDS tested (53 per cent versus 22 per cent).

The main reason given by officers, and to a much greater extent than was given by staff, was 'for the officer's own protection or reassurance' (45 per cent versus staff 18 per cent). Officers also considered it appropriate to 'reassure other people' such as the Department of Corrective Services, the officer's family and fellow workmates.

The main reason given by staff, and to a greater extent than given by officers, was 'to stop the spread of AIDS' (36 per cent versus 18 per cent).

*Segregating Prisoners*

Once again, prisoners' and officers' views about separating prisoners with either the HIV virus or full AIDS, were congruent and somewhat different to staff views.

Table 7

**Prisoners, Officers and Staff Beliefs About Whether Prisoners Infected with the AIDS Virus Should Be Segregated from Other Prisoners**

	%	%	%
	Prisoners	Officers	Staff
<b>HIV-infected</b>			
Move them away	68.6	73.7	42.0
All of them to stay with other prisoners	20.4	12.4	38.0
<b>Full AIDS</b>			
Move them away	94.0	96.2	84.0
Allow them to stay with other prisoners	2.5	1.4	6.0

Similar reasons obtained across all groups were:

- because they can still transmit the virus;
- they need medical attention (in the case of full AIDS);
- it would be in their own interest: 'to protect them against victimisation'; 'for their own dignity'.

All groups commented that HIV-infected prisoners and full AIDS prisoners should not be located together: 'for psychological reasons for the HIV positive people. They'd really feel bad to see 'people with full-blown AIDS'.

Differing reasons included:

- prisoners more than officers or staff claimed 'Prisoners wouldn't want them around', 'because they don't want to catch the virus', and with regard to inmates with full AIDS because 'they don't want to be around a dying person';
- prisoners and staff were far more likely than officers to consider prisoners with full AIDS should be segregated but not isolated.

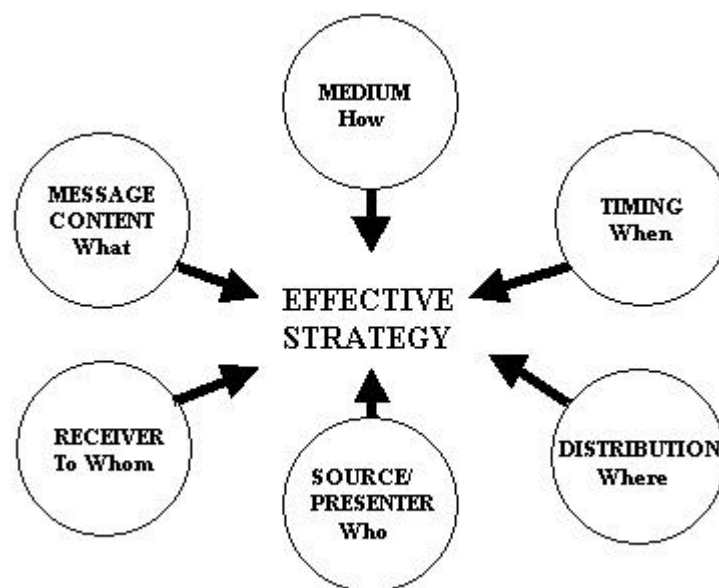
Knowledge of the reasons why people hold certain attitudes or beliefs is important when educating people as to appropriate strategies for preventing and managing HIV in prison.

Several recommendations made from this study highlighted the relevance of education in achieving appropriate separation policies. These were:

- a case-by-case approach be adopted for HIV-infected persons as it is already practised for other 'vulnerable' prisoners, but that this occur after an enhanced, systematic, ongoing educational process has commenced to better inform people and hence allay their fears;
- it is important, if a segregation policy is to be abolished, that educational procedures should precede the change of practice since 'only by achieving an appropriate degree of acceptance of the presence within their midst of HIV-infected individuals will prisoners and officers allow a segregation policy to be dismantled' (Dwyer 1989, p. 608).

### Final Comment

It is essential that a coordinated and comprehensive educational program be developed for all the major stakeholders with regard to AIDS in prisons. For any educational strategy to be effective, the following elements must be appropriately blended together:



In developing educational strategies and policies for AIDS prevention and management issues, it is essential to incorporate the views of all affected groups on each of the above elements of an effective strategy. AIDS is a life-threatening disease. Reactions to it are emotionally charged because the main modes of transmission offend many people's moral standards. It is important, therefore, that decisions should be based on carefully researched and rational grounds and not on expediency or public emotion.

As Norton (1989, p. 620) states, 'Many countries, including Australia, still have the golden opportunity to create effective and innovative AIDS education and prevention programmes'.

To assist in developing such programs, overseas statistics are available, various practices have been tried overseas and some policies changed as a result of these trials. Studies are being conducted within Australia. This survey reports on knowledge, attitudes and likely behaviours with regard to AIDS on the part of three key groups within Western Australian metropolitan prisons.

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