

## Harm Reduction in Corrections: Prison Needle Syringe Program

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“Prison needle syringe programs aim to reduce the spread of infections such as HIV and Hepatitis C among people who inject drugs.”<sup>1</sup>

### Background

Although non-prescription drugs are contraband in the Canadian prison system, the prevalence of banned substances (such as marijuana, hard drugs, and drug paraphernalia) continues to be a concern. Eliminating banned substances is nearly impossible within the prison system and approximately 70 percent of federal offenders assessed have a substance use issue requiring intervention.<sup>2</sup> According to Correctional Service Canada<sup>3</sup>, preventing drugs from entering correctional institutions remains challenging due to the high volume of movement within the facilities, inmates’ and their visitors being pressured to smuggle drugs, and the significant measures undertaken by drug dealers to ensure supply due to the high demand within prisons. Unfortunately, the rate of HIV in federal prisons across Canada is at least 10 times higher than the general population, while Hepatitis C Virus (HCV) rates are at least 30 times higher<sup>4 5</sup>, putting a significant percentage of the prison population at high risk of infection from needle sharing.

While correctional facilities across the country provide harm reduction services such as methadone maintenance treatment programs, the tools that increase safe administration of the non-approved substances, such as clean needles and sterile injection equipment are currently not available despite the growing evidence of safe injection programs being a successful harm reduction intervention outside the walls of correctional facilities.<sup>6</sup>

According to the Canadian AIDS Treatment Information Exchange (CATIE), there are 60 successful prison needle syringe programs (PNSPs) existing worldwide, with the first being established in Switzerland in 1992. While there is substantial evidence on the effectiveness of PNSPs in reducing behaviours that contribute to HIV and HCV transmission, there continues to be significant opposition from Canada’s correctional facilities due to the notion that supplying safe injection equipment will increase drug use, violence, and needle-stick injuries, all of which have been proven to be false through research and evaluation of PNSPs.<sup>7</sup>

In September of 2012, a legal challenge was filed by four HIV/AIDS agencies and a former inmate who contracted hepatitis C during his incarceration against the Minister of Public Safety, Correctional Service of Canada (CSC), Commissioner of the CSC and Attorney General of Canada. The lawsuit argues that the decision to treat clean needles and syringes as “contraband” violates section 7 and 15 of the *Canadian Charter of Rights and Freedoms*, which is to “protect the life, liberty and security of the person”, and “the right to equality before and under the law”, respectively. Consequently, this constitutional challenge seeks an order that will bring clean needle exchange programs to federal prisons, and is currently moving through the Ontario court system.

1 Van der Meulen, E. & Chu, S. (2015). *Harm reduction behind bars: Prison-based needle and Syringe Programs*.

2 Correctional Service Canada. (2015). *Forum on Corrections Research*.

3 Correctional Service Canada. (2015). *Forum on Corrections Research*.

4 Canadian HIV/AIDS Legal Network. (2008). *HIV and Hepatitis C in Prisons*.

5 Canadian HIV/AIDS Legal Network. (2006). *Prison needle exchange: Lessons from a comprehensive review of international evidence and experience*.

6 Van der Meulen, E. & Chu, S. (2015). *Harm reduction behind bars: Prison-based needle and Syringe Programs*.

7 Canadian HIV/AIDS Legal Network. (2015). *Prison Needle and Syringe Programs: Policy Brief*.



# Issues Brief

Nursing in B.C. has been a strong proponent of harm reduction, and continues to demonstrate its commitment to advocating for vulnerable populations through many initiatives including ARNBC's involvement in a [nursing coalition](#) (alongside the Canadian Nurses Association [CNA], Registered Nurses Association of Ontario [RNAO], Canadian Association of Nurses in AIDS Care [CANAC]) who has been granted intervener status in this constitutional challenge. Through this coalition, nursing expertise would suggest that the social issues around contraband should be considered as less significant than the good health of prisoners, particularly when they will ultimately be released back into the community.

Many inmates are significantly less healthy than the rest of the general population, and are often victims of poverty, childhood trauma, and other forms of marginalization. While a large portion of incarcerated Canadians live with substance use issues, many of the services that they would be able to access in the community (such as clean needle and syringe programs) often become unavailable once they enter a correctional facility. The PNSP Nursing Coalition strongly supports the United Nations *Basic Principle for the Treatment of Prisoners*, and believes that people in correctional facilities should have "access to health services available in the country without discrimination on the grounds of their legal situation."<sup>8</sup>

## Key Messages:

- Access to safe injection equipment and good preventive healthcare is a basic human right in Canada.
- HIV and HCV are at alarmingly high rates within federal correctional facilities across the country and the treating clean needles as contraband puts all prisoners at risk.
- Contraband can and will exist. If there is no way to eliminate it, at the very least it is the responsibility of the prison and healthcare system to try to reduce infection and transmission of disease.
- Models of PNSP exist across the world, and have been proven to decrease HIV and HCV transmission, overdoses, abscesses and increase referral to health and social programs.
- Many nurses across B.C. work with individuals who suffer from substance use disorder, and are well positioned to continue to advocate for, and challenge those who make decisions based on ideology, rather than evidence.
- Nursing in B.C. has, and continues to lead several harm reduction initiatives which have contributed to improved health outcomes for individuals living with substance use issues.

## Questions for Nurses

1. What would you like to learn more about in relation to prison needle syringe programs?
2. What other harm reduction initiatives are you aware of within the correctional setting that ARNBC can further examine and study from a nursing perspective?

## Further Reading

- [Prison Health Now](#).

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8 United Nations. (2017). *Basic Principles for the Treatment of Prisoners*.

