

Preface

This brief is based on a research study on the experiences of prison inmates living with HIV, conducted in three prisons in the state of Maharashtra, India. Based on seven case studies of prison inmates living with HIV, the author explores the health-care services in three prisons in Maharashtra, India, and highlights the major issues and problems faced by prison inmates living with HIV. The study also highlights the views and experiences of prison doctors and other prison staff vis-à-vis HIV in prisons. The results of the study aren't conclusive, but are hypotheses based on the study findings that raise questions and highlight areas for future research.

The study does not attempt to make broad conclusions about the state of HIV in prisons in India but rather sheds light on specific issues and opens up the area for further research. Attempt has been made to keep names of places and persons confidential. Mention of names of persons and places, if any, are meant purely for academic research purpose and not intended to malign the reputation of any person or institution.

The first chapter titled 'Introduction' explains the situation of HIV and the response to AIDS in prisons. This chapter is based on the review of various research studies conducted across the globe and in India on HIV in the prison setting. The chapter also presents the methodology of the present study, including the objectives, research setting, and tools employed, to conduct the research. Following a qualitative approach, the study adopted a multiple case study design to prepare detailed case studies of seven prison inmates living with HIV, through in-depth unstructured interview. The primary data are strengthened and substantiated by data collected from the prison medical officers and other prison staff through focus group discussions. Data were in the form of narratives, which were presented case wise. Qualitative analysis of the data was undertaken. The analysis process was geared towards describing and explaining the prisoner's experience of living with HIV, the way they perceive their situation in the prison vis-à-vis the health-care services, prison living conditions, etc.

The second chapter, 'HIV in Prisons', elaborately explains the concepts of HIV, its prevalence, and epidemiology in general and in prisons in particular, globally and in India. The chapter also throws light on various aspects of vulnerability of the prison population to HIV, viz. prison inmate as a key population at higher risk, high-risk behaviour prior to and during incarceration, HIV-related diseases, etc. This chapter also discusses the machineries and strategies to prevent HIV in prisons, globally and in India, and concludes with a human rights approach to HIV.

The third chapter is 'Profile of prison inmates living with HIV'. This chapter presents the seven case studies in detail and analyses the socio-economic profile of the prison inmates living with HIV, their incarceration history, high-risk behaviour prior to incarceration, etc. The analysis covering several dimensions of social and economic background of the inmate population revealed that majority of inmates were convicts, married, and in the age group of 25–40 years. The majority of the inmates living with HIV were engaged in high-risk sexual behaviour before imprisonment. The chapter also throws light on the source and extent of knowledge and information of prison inmates on HIV.

The fourth chapter on 'Experiences of prison inmates living with HIV' highlights the experiences of prison inmates living with HIV in terms of prison living conditions, risk behaviour during incarceration, prison medical services, and adherence to ethical issues. Results revealed that overcrowding and inadequate nutrition were major concerns for inmates living with HIV as these were leading to deterioration of their health. No support system was available inside the prisons to address the stress-related issues of inmates living with HIV. The prison hospital did not have provisions to cater to the treatment needs of inmates living with AIDS. Confidentiality regarding the HIV-positive status could not be maintained inside the prison.

The views of the prison medical staff and other prison personnel regarding the situation of HIV in prisons are presented in the fifth chapter titled 'Prison Personnel & HIV-Views and Experiences'. The chapter highlights the experiences and opinions of prison doctors and other prison staff on working pattern of staff, appointment, training on HIV, peer educators, reasons for HIV in prisons, etc., and presents the problems faced and suggestions offered by prison doctors and other staff. Prison doctors did not receive any training on HIV before they were appointed inside the prison. Lack of lab technician, insufficient number of prison medical doctors, and inadequate medical equipment and supplies within the prison were highlighted as the major shortcomings inside the prison.

Finally, the last chapter offers the summary and conclusion of the present study.

Prison Inmates Living with HIV in India
Case Studies from Prisons in Maharashtra

Guin, S.

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