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media@unsw.edu.au

Embargo 14th March 2023

Prisons weakest link in the fight against blood borne viruses in Australia

The Harm Reduction in Prisons Working Group has released a [consensus statement](#) that outlines an evidence-based approach to reducing the spread of blood borne viruses (BBVs) and other injecting-related harms in prisons.

The Working Group is a national cohort of health practitioners, researchers, sector representatives and advocates and is convened by the [Social Policy Research Centre's Drug Policy Modelling Program](#) at UNSW Sydney.

“Drug use and the spread of BBVs in prisons affects everybody because people who leave prison go back into the community to their families and friends,” says [Professor Alison Ritter](#) AO, Director of the Drug Policy Modelling Program at UNSW Sydney and signatory to the consensus statement.

For instance, Australia has committed to eliminating hepatitis C by 2030, but right now prisons are the weakest link in the strategy to meeting this goal, according to the experts behind the statement.

“People in prison have a higher rate of injecting drug use than the general population and despite efforts to prevent drug supply in prison, the evidence shows that drug use is still common,” says Melanie Walker, who is CEO of the [Australian Alcohol and other Drugs Council](#) and also signatory to the consensus statement.

“The spread of BBVs in prison settings is currently like a hole in the rabbit proof fence of our National BBV and Sexually Transmissible Infections (STI) Strategies and this consensus statement outlines how we can work together to fix this gaping hole,” says Ms. Walker.

What is harm reduction?

Injecting drug use can result in a number of fatal or serious harms including overdose, BBV transmission and injecting-related injuries. But all three of these harms can be reduced and/or prevented through effective harm reduction programs.

Harm reduction involves helping people to improve their health through providing practical and non-judgmental support. This involves meeting people where they are at, acknowledging that abstinence is not the only way to reduce harms arising from drug use.

“There is a wealth of evidence that supports the effectiveness of harm reduction programs,” says Prof. Ritter AO.

“Harm reduction is effective at reaching the most marginalised members of society who would otherwise not access healthcare and it has also been proven to improve prison safety for both detainees and staff.”

Why focus on harm reduction in prisons?

Prisons are high-risk environments for the spread of BBVs due to the lack of access to new and sterile injecting equipment, which results in people sharing unsterile equipment.

Consequently, people in prisons continue to experience higher rates of hepatitis C and HIV than the general population.

“Despite Australia being an international leader in the provision of Needle and Syringe Programs to the general public, we have fallen woefully behind by excluding people in custodial settings from accessing this vital and lifesaving service,” says Prof. Ritter AO.

Prison settings also provide an opportunity to engage people who have a history of injecting drug use with health and wellbeing services that they may not have previously been able to access in the community. These interventions not only make prisons safer, they also help to ensure better health outcomes for the communities to which people are returning after their release.

“The number and breadth of organisations represented by signatories to this consensus statement is significant,” says Ms. Walker.

“What we all agree on is that it’s really important that the full range of harm reduction options that are available in the broader community are mirrored in custodial settings if we are to successfully achieve public health outcomes for all.”

Policy makers must act

Australia won’t be able to achieve critical public health goals like eliminating hepatitis C when it’s ignoring people in prisons.

“From a public health perspective it doesn’t even matter whether you care about prisoner health or not. The fact is that people come in and out of prisons and go back out into the community – so failing to address the spread of BBVs in custodial settings is a broader public health concern that directly affects Australian families and communities,” says Ms. Walker.

The consensus statement can assist policy makers at all levels of government in applying a broad and comprehensive approach to harm reduction, in prisons and outside of prisons too.

“I am delighted to support this evidence-based statement on the importance of health care services for people in prison, which is designed to help Australia achieve positive public health outcomes,” says Prof. Ritter AO.

-ENDS-

The full consensus statement is available online via [this link](#).

Media Contact:

Nadia Razzhigaeva

UNSW News & Content Coordinator

02 9348 1229

n.razzhigaeva@unsw.edu.au