Prevalence and correlates of community re-entry challenges faced by HIV-infected male prisoners in Malaysia

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Summary: HIV-infected prisoners face an inordinate number of community re-entry challenges. In 2007, 102 HIV-infected prisoners in Malaysia were surveyed anonymously within six months prior to release to assess the prevalence and correlates of community re-entry challenges. Staying out of prison (32.8%), remaining off drugs (39.2%), finding employment (32.6%) and obtaining HIV care (35.4%) were the re-entry challenges reported most frequently. Global stigma, negative self-image and public attitudes-related stigma were independently associated with challenges to obtaining HIV care. In multivariate analyses, those with previous incarcerations (adjusted odds ratio [AOR] 3.2, 95% confidence interval [CI] 1.4–7.0), higher HIV-related symptoms (AOR 2.0, 95% CI 1.0–4.1) and higher public attitudes-related stigma (AOR 2.6, 95% CI 1.2–6.1) had a significantly higher likelihood of identifying more re-entry challenges. Targeted interventions, such as effective drug treatment, HIV care and public awareness campaigns, are crucial for stemming the HIV epidemic and improving health outcomes among HIV-infected prisoners in Malaysia.

Keywords: Malaysia, prisoners, HIV, AIDS, substance abuse, re-entry, HIV stigma

BACKGROUND

The global magnitude of incarceration is staggering. During the past two decades, prison populations around the world have steadily increased, and by the end of 2006, nearly 10 million people were incarcerated worldwide.1 Malaysia's incarceration rate, which is one of the highest in Southeast Asia, is inextricably linked to its drug problems. From 2001 to 2007, drug-related arrests increased from 21,200 to 54,000. This coupled with the recent introduction of mandatory sentences of two to five years for those with failing government-sponsored drug treatment at compulsory drug treatment centres or had been convicted of drug use more than twice, contributed to 15,227 prisoners or 30% of the total prison population by the end of 2007.2 Nearly all prisoners return to local communities, and therefore face a cascade of interrelated challenges during their transition back into the community.3-6 Numerous factors, including problems associated with obtaining employment, financial and poverty-related burdens,7-10 stable housing and transitional support11 and reuniting with family and other support networks12 are just a few of the cited issues that contribute to re-incarceration. Re-entry challenges are magnified for those who have significant co-morbidity; a disproportionate number of prisoners are affected with a myriad of illnesses, including mental illness, substance use disorders and infectious diseases such as HIV/AIDS, viral hepatitis and tuberculosis.13-15 Disparities in continuity of care, lack of health-care coverage and resources, and high rates of drug and alcohol relapse thwart positive health and social outcomes for both HIV-infected and non-infected prisoners.16-25

Infectious diseases such as HIV/AIDS pose special community re-entry issues globally.26 Not only are these considerable challenges in the continuity of HIV care,27 which when discontinued leads to significant morbidity and mortality, but also results in heightened risks for infection of others when risk reduction interventions are not provided.28 In particular, the most common mode of transmission of HIV among prisoners is injection drug use and there is scant evidence of effective treatments that successfully transitions HIV-infected prisoners with substance use disorders back into the community.29

In Malaysia, criminalization of drug use and a delayed public health response exacerbated the growing HIV epidemic, particularly among injection drug users (IDUs).29 As a result, 25% of cumulative HIV/AIDS cases occurred among IDUs.30 In 2005, the government recognized that it had not achieved a reduction in HIV/AIDS cases and rapidly implemented syringe exchange31 and methadone maintenance programmes.32 Nevertheless, the prevalence of HIV among 50,000 Malaysian prisoners, whose HIV testing is mandatory, is approximately 5%.25 This is 15 times greater than that found in the general adult population where it is 0.4%.33 As a consequence, HIV-infected prisoners in Malaysia represent a critical group for targeted intervention, yet their community re-entry challenges have not been assessed. Therefore, the objective of