

HIV and people in prisons and other closed settings

2023 UNAIDS GLOBAL AIDS UPDATE FACTSHEET

People in prisons are disproportionately affected by HIV. In 2022, HIV prevalence among people in prisons was two times higher than among adults in the general population (aged 15–49).¹ Men, women and transgender people face different HIV-related challenges in prisons.

The lack of access to HIV treatment and prevention services in prisons remains a significant barrier to achieving social justice and equality and ensuring health for all people in prisons.

Men, women, transgender people and gender-diverse people in prisons may also be members of other key populations, especially where these populations are criminalized. The combination of gender inequality, stigma and discrimination increases the vulnerability of people living with HIV, particularly women, and people from key populations in prisons and other closed settings.

Transgender people are estimated to be up to 13 times more likely to be sexually assaulted than cisgender people in prison (1).

Transgender people also have a higher prevalence of HIV and other sexually transmitted infections, and yet they often lack or are denied access to HIV and other necessary medical treatment (2).

In the closed environment of prisons, women are especially vulnerable to sexual abuse, including rape, by male staff and other prisoners. Women are susceptible to sexual exploitation, especially if supervised by male staff, and may be forced to engage in sex to obtain goods (3). Although data are limited due to underreporting, sexual violence against men and adolescents in prisons and other closed settings is believed to be common (3).

All survivors—including women, men, adolescent girls or boys, and people from key populations—require a multisectoral, survivor-centred response, with access to medical, psychosocial and counselling services that respond to trauma, including mental health and sexual and reproductive health services (4).

In numbers

The global median HIV prevalence among people in prisons is 1.4% (74 reporting countries), ranging from 0.2% in the Middle East and North Africa (five reporting countries) to 5.5% in eastern and southern Africa (eight reporting countries).

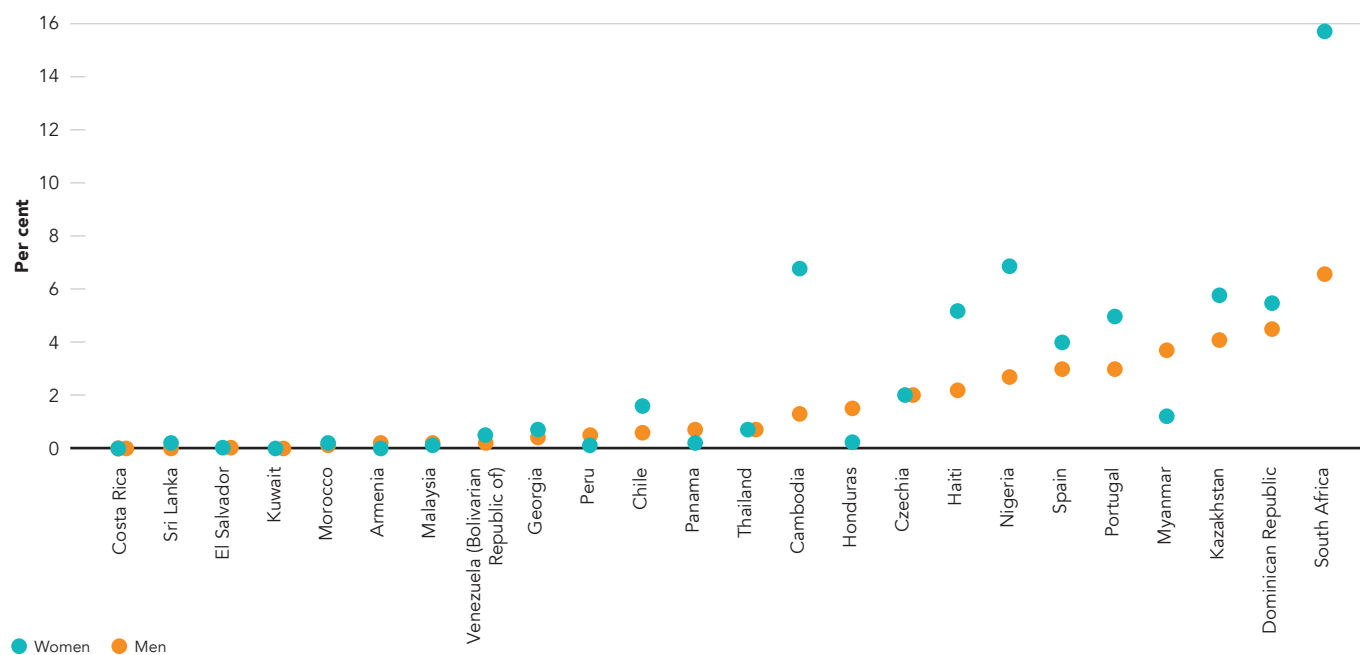
The global median prevalence of tuberculosis and HIV coinfection is 0.1%, ranging from 0% to 18.9% (52 reporting countries). The median prevalence of HIV and hepatitis C virus in prisons and other closed settings is 0%, ranging from 0% to 53% (51 reporting countries).

A total of 91 countries have ever reported population size estimates for people in prisons. Among these, 54 refer to national estimates derived by probabilistic methods within the past five years.

HIV services	Treatment coverage gaps are notable for people living with HIV in prisons. Among the 40 countries that reported on antiretroviral therapy coverage among people in prisons from programmes in recent years, only 21 countries reported above 95% coverage, and two countries reported less than 50%. HIV programmes are generally not available or tailored for women in prison (5).
	A small but slowly increasing number of countries provide at least some HIV-related services in prisons and other close settings. Between 2017 and 2022, 51 countries reported providing condoms and lubricants, eight had needle-syringe programmes, and 28 provided opioid agonist therapy to people in prisons and other closed settings.
Sexual and reproductive health services	Women's specific health-care needs—including access to sexual and reproductive health services, treatment of infections, and nutrition and hygiene requirements—are often neglected in prison settings. The limited access for women (and their children) to antenatal and postnatal care, labour and delivery services and antiretroviral therapy poses a serious challenge to the health of mothers and prevention of vertical transmission of HIV, hepatitis B and syphilis. (5).
Laws and policies	At least 143 countries criminalize or prosecute based on general criminal laws HIV exposure, non-disclosure or transmission; 145 criminalize the possession of small amounts of drugs; 168 criminalize some aspect of sex work; 67 criminalize same-sex sexual activity; and 20 criminalize transgender people. A significant percentage of the people in prisons and other closed settings comprises people convicted of offences related to their own drug use, engagement in sex work, same-sex sexual activity or their gender identity (6).

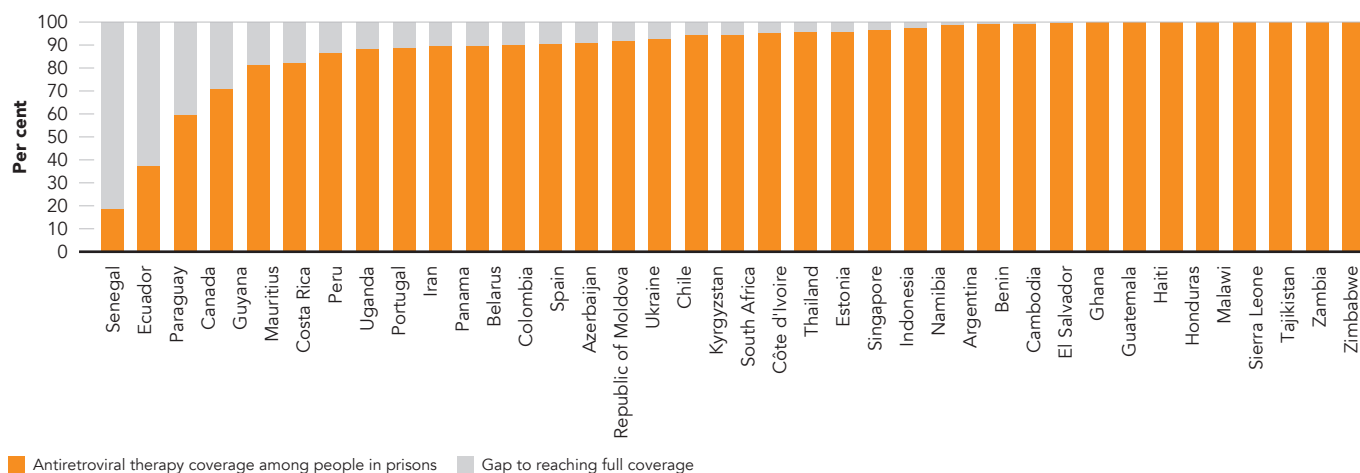
¹ Unless otherwise specified, the source for all quantitative data is Global AIDS Monitoring, 2023 (<https://aidsinfo.unaids.org/>) or UNAIDS epidemiological estimates, 2023 (<https://aidsinfo.unaids.org/>).

Figure 1 HIV prevalence among people in prisons, by sex, reporting countries, 2018–2022



Source: UNAIDS Global AIDS Monitoring, 2023 (<https://aidsinfo.unaids.org/>).

Figure 2 Gap in antiretroviral therapy coverage among people in prisons living with HIV, countries with available data, 2018–2022



Source: UNAIDS Global AIDS Monitoring, 2023 (see <https://aidsinfo.unaids.org/>).

References

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UNAIDS Key Populations Atlas

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