

# SECURITIZING PRISONER HEALTH: A REALIST REVIEW OF CANADIAN PRISON NEEDLE EXCHANGE PROGRAMS

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**Background:** In 2018, the Correctional Service of Canada (CSC) introduced Canada's first Prison Needle Exchange Program (PNEP). This followed years of civil society advocacy mobilizing for PNEP, due to elevated rates of injection drug use, and a hepatitis C prevalence rate of over 30% among federal prisoners at the time. Implementation of PNEP has been slow and has faced significant challenges. Currently PNEP is available at nine of forty-three federal prisons, with rollout slated for an additional six institutions. CSC's PNEP model has been criticized for its high barriers, lacking confidentiality, and its security-focus to the detriment of prisoner health.

**Approach:** Employing realist review, a method of review for complex policy interventions, this paper documents the implementation of CSC's PNEP model, identifying key factors that have either facilitated or impeded its ongoing rollout, as well as uptake among prisoners. By recognizing social context and integrating environmental considerations, realist review looks at policy *outcomes and implications* in addition to narrower questions of efficacy. We draw on a range of sources including news media, program evaluations, and *Access-to-Information* requests of government data.

**Analysis:** The realist review uncovers high rates of refusal of applications among prisoners seeking to access PNEP, the active involvement of guards in ensuring compliance to program requirements, an absence of meaningful confidentiality protections, elevated rates of program discontinuation, and extremely low uptake among prisoners. Further, perceived risks regarding the circulation of needles, and the use of a "threat risk assessment" to determine eligibility function as major impediments to program uptake and efficacy.

**Conclusion:** We propose a revisioning of CSC's PNEP model to bring it into alignment with the best practices of PNEP in other jurisdictions internationally, and professionally accepted standards regarding needle/syringe access. The Canadian experience provides a cautionary tale to other jurisdictions experimenting with PNEP.

## Disclosure of Interest Statement:

The authors have no conflicts of interest to disclose.