

Influence Of Prison Care On Drug Abuse Among Prison Inmates: A Case Of Kangeta Prison, Meru County, Kenya

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Abstract:

Drugs and substance abuse problem affects the moral fabric of societies all over the world. These drugs find their way into prison institutions globally. Kenyan prisons are also affected by the drug and substance abuse menace. Comprehensive problem analysis had not been done in order to inform effective measures and policies addressing the problem of drug and substance abuse. This study sought to fill this gap by assessing the influence of prison care programs on drug abuse among the prisoners of Kangeta Prison. This study adopted a sequential explanatory method of research design. Kangeta Prison in Meru County, Kenya was chosen by the researcher purposively due to high rate of recidivism and increase in drug trafficking offenses in the area. The target population and the accessible population of Kangeta prison were 523 respondents which included both inmates and prison stakeholders. From this population, a sample size of 120 inmates was selected using simple random sampling technique. This sample was used for collecting quantitative data. Purposive sampling technique was also used to draw only six individuals from the stakeholders' population for collecting the qualitative data. Questionnaires were used to collect data from the inmates and interview schedules were used to collect data from the stakeholders. The validity of the instruments was checked with the help of experts in this field of social sciences. To test the reliability of the questionnaires, a pilot study was carried out using 12 respondents from Meru Prison in Meru County, Kenya which is a neighbouring prison. The analysis of the pilot data produced a Cronbach alpha value of 0.910 which attained the recommended level of equal to or above 0.70. The quantitative data was analysed by use of percentages, means, and correlations using Spearman Correlation coefficient with the aid of Excel and SPSS software. On the qualitative data, thematic content analysis was used by the help of NVIVO Software Version 14. To facilitate data collection, permits from relevant bodies such as Tharaka University Ethics Committee, NACOSTI, and Correctional Department were obtained by the researcher before actual data collection. The relationship between the variable was measured using spearman coefficient where prison care produced a coefficient of 0.642. This positive correlation indicated that there is a strong relationship between the variables. The study added more academic knowledge to the existing one, informed government on prison reviews and recommendations.

Keywords: *Drugs, Inmates, Prison Care programs*

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I. INTRODUCTION

Prisons are the correctional facilities that have the objective of helping inmates become more productive and law-abiding citizens. A significant number of inmates however resort to drug abuse while in prisons which negates the purpose of rehabilitation in the first place. Ensuring that the inmates are not drug addicts has been the target of many prisons and prison programs in many countries and especially Kenya. Despite the effort and resources of the government to fight the drug abuse in prison, drug use in prison still continues to be a problem in different prisons in Kenya. There is also scanty of documented research aimed at examining the links between various factors and drug abuse among prison inmates especially in Kenya. This study thus aims to close this gap by determining the influence of stress, prison policies and prison care programs on drug abuse among inmates at Kangeta Prison.

II. LITERATURE REVIEW

Retribution was the most common form of punishment in the past. Later, rehabilitation became the predominant sentencing philosophy. Since then, prison populations have increased rapidly while crime has continued. (Hasin, 2013) Research studies that basically concluded that "nothing works" fueled a strong belief that corrections could not rehabilitate offenders. Regardless of the way that the quantity of medication treatment programs in penitentiaries has expanded throughout the course of recent years, there is still a ton of resistance to them. It is unmistakably clear that treatment reserves have been focused on over jail development and upkeep reserves. Additionally, rehabilitation programs are overpriced and ineffective. A lot of people will relapse to drug use and crime after release if they don't get treatment in prison. These actions are part of a way of life that is hard to change and very destructive. According to Bureau of Justice Statistics (2018), approximately one quarter of drug users in prison had previously received treatment.

The 2007 research by Steven S. Martin concentrate on convicts in the Delaware Remedial facility where underlines the significance of treating drug abuse issues while a detainee is as yet confined. The Delaware model included a system of care in which some prisoners could be treated. After a year, Martin discovered that remarkably more prisoners who were released on a prison care program had not been arrested nor were they using drugs even after release from the prison. Others who were not under any rehabilitation or program most were arrested few months after release and were found to be addicts already. This scientist advocated that rehabilitation programs are needed to help drug users in prison stop abusing drugs.

Lack of sufficient rehabilitation programs have made inmates to venture into drug and substance abuse and this is a major threat not only to them but also the prison systems. When it comes to mental health conditions including depression, developmental delays, apathy, withdrawal, and other psychosocial dysfunctions, substance usage among prisoners is usually linked. (Bureau of Justice Statistics,2018) Still, there are some in the drug addiction and corrections industries who believe that treatment should focus on the non-prison population and that rehabilitation in prison settings is ineffective. While the majority of state prisons appear to be hostile settings that hinder therapy and research, (Davis, 2009).

Substance abuse and addiction is a major problem in most of prison centers in the world with a causing a big negative influence on the rehabilitation and integration of offenders back to the society. Below are some of strategies and measures that are being deployed by other prisons in the world to curb drug addiction and abuse among the Prisoners (Hasin, 2013).

The society, the government and other stakeholders expect that after imprisonment the inmates will change their behaviour and become better, productive and law-abiding citizens. This expectation is not achieved because inmates using drugs cannot be rehabilitated easily. Offenders who were arrested even without any prior drug-related issue tends to learn the abuse from other inmates. (Bronson,2017)

III. METHODOLOGY

This study was carried out in Kangeta prison which is a correctional facility located in Igembe Central Sub County, Meru County Kenya. This location was chosen by the researcher due to the increasing recidivism in the area and also the prison is located in the area where violence and drug trafficking offences are so common (National Police Service, Annual Report, 2018). This study was done using a sequential explanatory mixed method research design in order to establish the influence of prison care programs on drug and substance usage among the prisoners of Kangeta Prison. Sequential explanatory mixed method enabled the research have a more comprehensive understanding of the research problem by combining the strengths of both qualitative and quantitative data. The target population of the study was 523 respondents when the study was conducted which includes; prisoners, remandees, prison wardens and other staffs. The accessible population was 497 inmates and 26 officers working within the prison

Sample from the inmates were obtained using the simple random sampling procedure which is a probability sampling method. This method of sampling ensured that each sample had an equal chance of being chosen. A random sample is intended to be a fair and balanced representation of the general population. (Etikan, 2017). Additionally, the researcher used a purposive sampling method to draw only six individuals from the prison staffs and other stakeholders. These respondents were interviewed by the researcher. These included include, one prison police, one ex-inmate of the prison, one health care official, one prison counsellor, a probation officer and a rehabilitation/vocational training coordinator.

For the purpose of getting a better sample from the inmate's population the sample size calculation formulae proposed by Nassiuma (2000) was used this formula enabled the researcher to take into consideration the possible errors and coefficient of variation. Below is the formulae:

$$n = \frac{NC^2}{C^2 + (N-1)e^2}$$

Where:

n = Sample size,

e = Standard error.

C = Coefficient of variation,

N = Population,

C=25%

(Nassiuma 2000), e = 0.02 and N= 497(Kangeta Prison inmate)

$$n = \frac{497 \times 0.25^2}{0.25^2 + (497 - 1) 0.02^2}$$

$$= \frac{31.0625}{0.2609}$$

$$= 119.06$$

=120 Respondents were selected to participate in this research.

The researcher utilized the questionnaire to obtain essential data from respondents, the questions were both open ended and closed. The questionnaire was administered by the researcher. The questionnaire was organized into four sections, where section A covered personal information about the respondents and the remaining sections capturing data based on the objectives of the study. Interview schedules was used to get qualitative data from the relevant experts selected purposely by the researcher.

To ensure there is internal and content validity of the instruments, the research presented these instruments to different experts in the social sciences and readers for their judgements, considerations and suggestions. A pilot study was carried out in order to evaluate the instruments' reliability. The researcher used the Cronbach alpha coefficient, which is a number between 0 and 1, to evaluate the internal consistency of the questionnaire's items. The Pilot study was conducted in Meru main Prison because it has some similar characteristics with Kangeta Prison. The pilot sample was 10% of the sample to be used in the study. Therefore, twelve respondents were given questionnaires at the pilot stage. Results obtained were then spilt into two and measured in the Cronbach's alpha. And a score of 0.915 was determined which surpass the allowed value of 0.7, showing that the instruments used were reliable. (Malhotra, 2010).

In accordance with the legal requirements for conducting research in Kenya, the researcher received a letter of authorization from Tharaka University Ethic Committee and a permit from NACOSTI during the course of this study. The findings of the study were reported as they are, without any manipulation or erroneous assumptions. In order to safeguard respondents' privacy, the responses were treated with great confidence. The researcher accurately reported the findings and avoid bias and subjective data analysis. Additionally, the research also adheres to the attached timetable and appropriately schedule the administration of the research instruments. The ethical considerations in research will be respected throughout the entire research process. The NACOSTI rules and regulations were also observed in this study.

IV. RESULTS AND DISCUSSIONS

A total of 120 copies of questionnaires were distributed for the study, and 102 of those were returned, representing a response rate of 85%. This percentage was within the required standard criterion of between 80% and 100% used in research. (Morton,2012) This information is nicely represented in the table below:

All the six respondents identified by the researcher for the purpose of performing interviews participated in the study producing 100% response rate.

Table 1: Respondents Response Rate

Respondents	Sample	Response	Response (%)
Inmates	120	102	85%
Stakeholders	6	6	100%
Total	116	108	96.35

Distribution of Respondents by Age.

The information on age shows how respondents were distributed among the various age groups. There were 102 respondents in all that made up the study sample. Most participants were in the 25 – 30 age group which was made up of 31.4% of the respondents and the least were respondents in the age category of 41 and over which comprised 20.6%. The following information is shown clearly by the Below Table:

Table 2: Distribution of respondents by age

Age Group	Frequency	Percent	Valid Percent	Cumulative Percent
18-24	24	23.5	23.5	23.5
25-30	32	31.4	31.4	54.9
31-35	25	24.5	24.5	79.4
41 and above	21	20.6	20.6	100.0
Total	102	100.0	100.0	

Distribution of respondents by Education Levels

The majority of respondents completed primary school (53.9%) this shows that most of the inmates who participated in the study did not continue with education after primary education. The least group of the respondents were those who had finished college/university (3.9%) The table below summarizes this information.

Table 2: Distribution of respondents by Education Levels

	Frequency	Percent	Valid Percent	Cumulative Percent
No education	27	26.5	26.5	26.5
primary	55	53.9	53.9	80.4
Secondary	16	15.7	15.7	96.1
College/ University Level	4	3.9	3.9	100.0
Total	102	100.0	100.0	

Data analysis: The Prevalence of drugs in the Prison

The study of drug usage at Kangeta Prison revealed a nuanced picture of substance addiction among convicts. Surprisingly, tobacco was identified as the substance that was most frequently misused, garnering a significant percentage of 32.4%. The high rates of alcohol and Miraa usage among the prison population were also recorded. With a frequency of 2.0%, cocaine had a comparatively low presence. These results are presented by the Chart below:

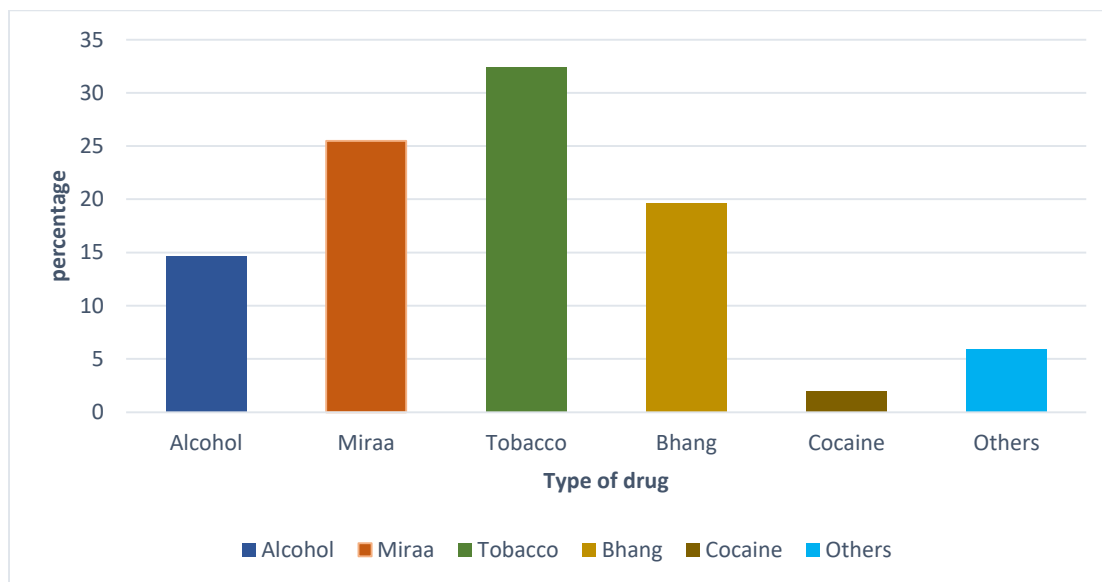


Figure 1: Distribution on abused drugs in prison

Interestingly, research conducted in Nigerian prison (Enugu Prison) by Okwudil N.K and Obayi (2014) showed some similarity. This difference could be attributed to various factors, including cultural norms and population. The absence of Miraa usage in Nigeria and its substantial prevalence in Kenya could be attributed to the geographic distribution of the plant. This is summarized by the below line graph

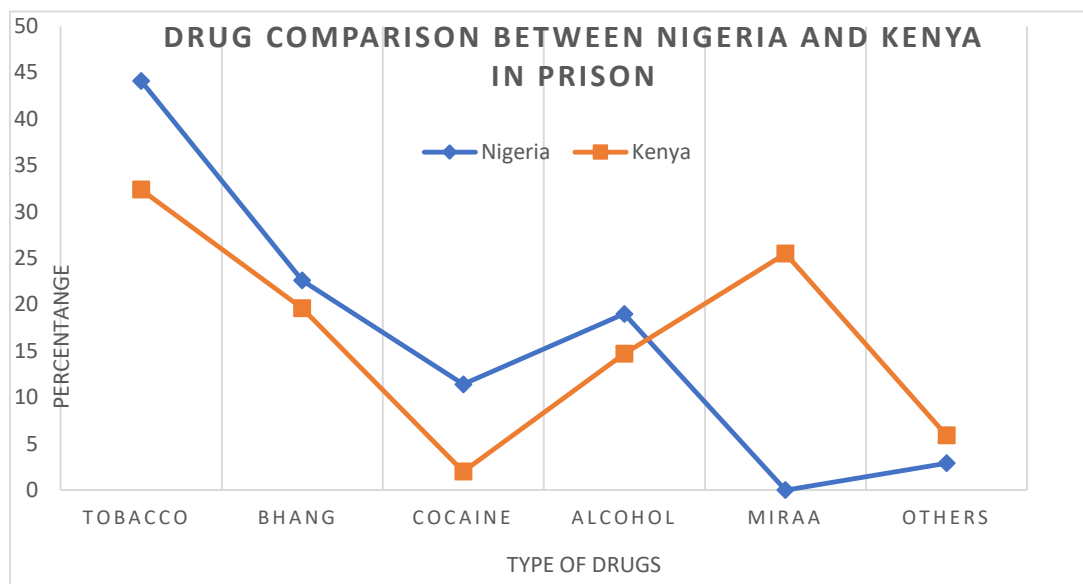


Figure 2; Drug comparison between Nigeria and Kenya in Prison

Influence of prison care programs on drug abuse among the prison inmates.

Testing Hypothesis that here is no statistically significant influence of Poor prison care programs on drug abuse among the inmates of Kangeta Prison, Meru County, Kenya. Different questions were asked by the researcher concerning the available prison care programs relating to drug abuse and their mean determined. The response produced a mean of 3.7 which shows that majority of the respondents (74.3%) agreed about the statement being asked. For instance;

When respondents were asked about the government coming up with new and improving the existing Prison care programs Will help in fighting Drugs in the Prison, about 68.60% of the respondents agreed or strongly agreed that enhancing the prison care programs will help the drug addicts while 17.6% of the respondents were contrary with this statement. The 57.9% of the respondents believed that Prison programs can be used to tackle drugs within the prison. Their responses received a mean of 3.5 which suggests that the majority of respondents still leaned toward agreement. Although a significant number of respondents about 25.5% declined about this statement and 16.7% were neutral on this statement.

Majority (71.60%) of the respondents agreed that drug abuse in prison does not depend on the history of drug use before imprisonment, their believed that most of the addicts in prison were recruited into the addiction while within the prison. While 13.70% disagreed with this statement. To determine if counselling can be used a program tool for helping addicts, respondents were asked about it and 71.6% agreed that it can be so much of beneficial to addict if well implemented. A small portion (16.70%) believed that counselling would not work for drug addicts within the prison.

Addressing and understanding the inmates needs especially those having addiction problem is a way of making them feel better and well rehabilitated. Studies have shown most of inmates commit crime so that they can fulfil their needs therefore addressing these needs will reduce abuse of drugs for most of the inmates. A large portion (61.70%) agreed that the prison did not fully address their needs while being in prison and about 20% of the respondents felt that addressing the need would not reduce drug abuse in prison.

Prison staff are the one concerned about rehabilitating the offender and their level of concern affects the whole rehabilitation process of any inmate. About 67.70% agreed that the staffs were not concerned on helping the addicted inmates and 14.70% agreed that the staffs provided useful concern that could be used to help the addicted inmates.

In conclusion, the means for all six questions indicate that the majority of respondents agreed or strongly agreed with the statements presented. The table below summarizes this information;

Table 3: Influence Of prison care programs on drug abuse

Correlations			DA_SCORE	DP_SCORE
Spearman's rho	DA_SCORE	Correlation Coefficient	1.000	.642^{***}
		Sig. (2-tailed)	.	.001
		N	102	102
	DP_SCORE	Correlation Coefficient	.642^{**}	1.000
		Sig. (2-tailed)	.001	.
		N	102	102

The relationship between drug abuse and poor prison care programs was determined by using Spearman correlation coefficient (ρ) at 95% confidence level. The relationship was found significant after the Spearman Correlation coefficient of 0.642 was determined which shows a strong relationship between the two variables. This means that the DA scores are typically influenced by the DP scores.

The null hypothesis was thus rejected because the findings shows a relationship between Prison care programs and Drug abuse exists and the association is statistically significant at 0.001 which is less than the threshold of 0.05. This is summarized by the table below

Table 4: Drug abuse and poor prison care Programs; Spearman correlation coefficient

Statement/Question	1	2	3	4	5	Mean	SD
The government coming up with new and improving the existing Prison care programs Will help in fighting Drugs in the Prison	4	14	14	41	29	3.8	1.13
	3.90%	13.7	13.70%	40.20%	28.40%		
Prison care programs are the best methods to reduce drug use in prisons	4	22	17	33	26	3.5	1.2
	3.90%	21.60%	16.70%	32.40%	25.50%		
Those people who take drugs while in prison are not only those who have some history of drug abuse before imprisonment.	4	10	15	46	29	3.8	1.06
	3.90%	9.80%	14.70%	45.10%	26.50%		
Counselling sessions can be helpful in helping addicts within this prison	6	11	15	46	29	3.8	1.15
	5.90%	10.80%	14.70%	45.10%	26.50%		
The available programs do not address the inmates needs especially those using drugs	9	11	19	44	19	3.5	1.18
	8.80%	10.8%	18.60%	43.10%	18.60%		
Prison officials are not so much concerned in regard to prison care programs for addicted inmates	3	12	18	32	37	3.9	1.13
	2.90%	11.80%	17.60%	31.40%	36.30%		
(Mean Average)- (Standard Deviation) (SD) Average – NB - (1- Strongly Disagree, 2- Disagree, 3- Neutral, 4- Agree and 5- Strongly Agree).							

The findings from Kangeta Prison shows that rehabilitation especially on drug abuse is not so much of concern by the prison system. From the interviews conducted by the researcher a program coordinator in the prison said that;

“This prison helps the inmates by teaching them skills on farming, masonry and carpentry which they can use after release, we do not concentrate so much on drugs treatment because they require a lot of resources and skilled personnel that we do not have”.

(Stakeholder 3, Male, KIII, 17TH JULY 2023)

The stakeholders were also asked about the availability of enough and qualified staff who performs rehabilitation programs within the prison. Surprisingly the responses from most of the respondents shows that the available staff are not so much qualified to the extent of helping inmates especially those on drug addiction and mental problems. One of the stakeholders claimed that:

“This prison does not have adequate and trained personnel to aid in rehabilitating and counseling inmates especially those with addiction and mental illness. Unfortunately, the government has not provided the necessary resources to ensure a sufficient number of qualified staff members for these critical roles”

(Stakeholder 2, Female, KII, 17TH JULY 2023)

The results obtained from Kangeta prison show that the correctional system does not put sufficient emphasis on treatment, especially when it comes to drug abuse. A worker in the prison has outlined how the prison places a strong emphasis on teaching offenders' useful skills for their use after release, such as agriculture, brickwork, and construction. This is a result of the lack of resources and skilled professionals needed for thorough drug treatment.

The stakeholder interviews highlighted a lack of skilled personnel who can effectively run rehabilitation programs, particularly for prisoners dealing with drug addiction and mental health difficulties. One interested party emphasized that the institution lacked the necessary funding and government support to fill the personnel and rehabilitation programs gaps. These themes are summarized by the figure below; The Rectangle shows the main theme, the triangles show the sub theme while the circles shows sub-sub themes

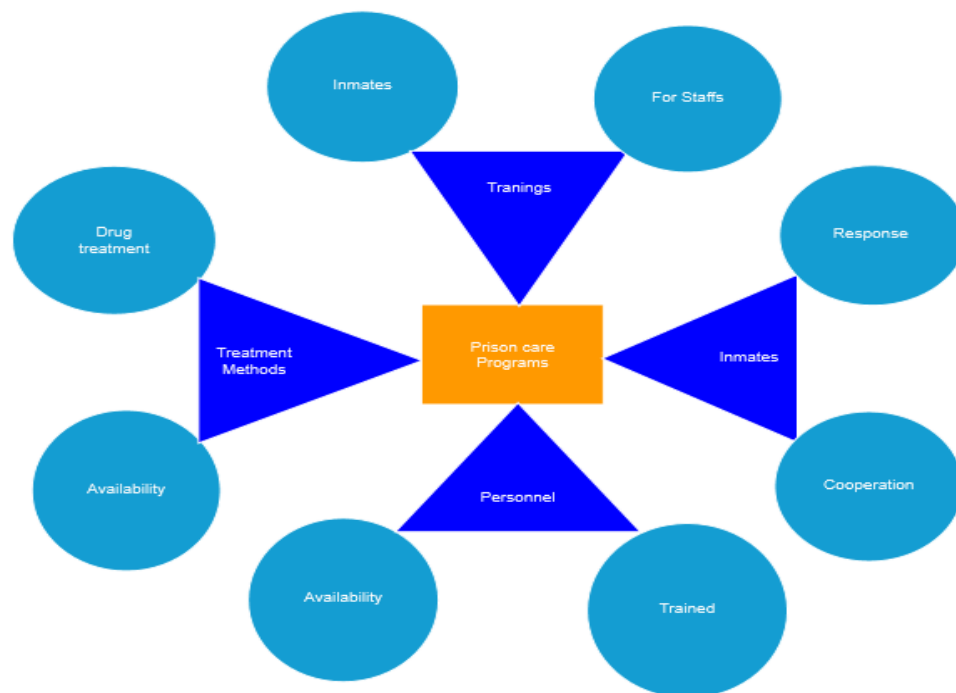


Figure 3: Concept Map on Themes of Prison care Programs

The findings from Kangeta prison matches with what Papa, E (2015), where he found that the current criminal justice system do not concentrate of the rehabilitation of the offender, their aim is just to arrest and incarcerate the offender. This shows that the inmate will leave the prison just punished but their behaviour cannot be changed by only punishment because other rehabilitation programs are needed.

The method of treatment has been hampered by the use of drugs within jails. For instance, studies conducted on Kericho Prison in Kenya by Maritim (2018) on the impact of drug abuse o rehabilitation shows that the prison lacks rehabilitation methods that could address the issue of drugs in the prison. When these inmates were released 53% of them got arrested with drug addiction issues that they got within the prison, indicating that they did not receive adequate care and rehabilitation while they were incarcerated.

A survey study conducted in Canada prisons by Watson (2016), shows the impact of prison care programs in rehabilitating an addict while in prison. Watson found that about 40% of Canadian inmates were already addicted to drugs before imprisonment, while 70% of the abusers in those prison go into drugs after arriving in the prison (Within the first three months). From this study Watson also found that the available methods of rehabilitations in the Canadian prisons did not full help inmates who were struggling with drugs related disorders

The findings from Kangeta and other prison indicates that a significant portion of drug treatment programs within most prisons are not yielding satisfactory results. The ongoing issue of inmate drug abuse despite these programs suggests that there are challenges in their design, delivery, or effectiveness. Comprehensive reforms and enhanced strategies are warranted to address these shortcomings and improve the success of drug treatment programs in prison settings.

V. CONCLUSIONS

1. The study had the objective to investigate the claim that ineffective prison treatment programs had little or no effect on inmates' drug use. The majority of respondents agreed with these claims, according to the analysis of responses to various statements about prison care programs and their effect on drug consumption.
2. The majority of participants were between the ages of 25 and 30, and the majority of prisoners had only completed their primary school.
3. The association between drug usage and inadequate prison care programs was established by the study using the Spearman correlation coefficient. According to the data, there is a significant positive association between the two variables.
4. According to stakeholder interviews, the prison system frequently places more of a priority on teaching useful skills to be used after release than it does on drug misuse rehabilitation because of resource limitations. It was also brought up that the institution lacked skilled staff to deal with drug addiction and mental health difficulties.
5. The results of this study agreed with earlier findings from domestic and foreign studies. Numerous studies have demonstrated that the current prison systems frequently fall short of meeting the demands of offenders in terms of rehabilitation, particularly when it comes to drug abuse therapy.

The examination of the presence and quality of rehabilitation programs in prisons has been identified as a crucial determinant in the resolution of drug abuse amongst inmates. The outcomes of the study show that the current programs at the jail under review are insufficient for dealing with the problem of drug usage and addiction. Conversely, the mitigation of drug usage is challenging in correctional facilities that possess inadequate, obsolete, or ineffective rehabilitation programs. The study findings highlight the pressing need for the allocation of sufficient funding and the implementation of reforms to facilitate evidence-based rehabilitation efforts within correctional facilities.

VI. POLICY RECOMMENDATIONS

1. More than physical therapy or counselling is needed to completely change long-term addicts and new addicts; some inmates may even need Cognitive-Behavioural Therapy (CBT), a widely recognized evidence-based strategy for treating drug usage and addiction. It concentrates on supporting people in recognizing harmful thought patterns and actions that support drug use.
2. In a prison context, qualified therapists and counsellors work one-on-one or in groups with convicts to investigate the fundamental reasons for their consumption of drugs and assist with helping them in learning ways of coping that deal with desires and stimuli. Inmates may enhance their self-control and decision-making skills by modifying harmful behaviours and adopting healthy options.
3. Co-occurring mental health conditions that could be causing drug usage might also be addressed with CBT. Other Medication-Assisted Treatment. Methods can be used together with the CGT so that to fully remove the desires and withdrawals symptoms from the addicts. This approach could work so while in this Prison.
4. The prisons may establish new programs and enhance those already operating for vocational training and education: For inmates to successfully reintegrate into society, access to educational programs and vocational training is essential. Inmates boost their employability and develop a feeling of purpose and self-worth through earning work skills and education. By giving offenders a route ahead and the chance to create a secure future, these programs lessen the probability that they will relapse to drug misuse again.
5. The jail can arrange for family members to meet up with detainees to chat about their time there and offer spiritual support to such inmates. Sessions in family therapy offer a secure setting for dealing with previous traumas, mending relationships, and establishing constructive communication patterns.
6. Providing post-release support, convicts may provide a very successful reintegrate into society and develop into better members of it. For those in recovery, leaving jail and entering the community is a crucial stage.

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