Beliefs, attitudes and knowledge are important factors in the control of HIV/AIDS. To control the HIV/AIDS, it is imperative to prevent new infections of the disease occurring, as well as preventing the deterioration of those infected with HIV to the AIDS status. Redican et al., (1994) noted that one way to prevent the disease is to know something about it. This is made possible through researches; community based programmes, VCT, general professional counselling, awareness programmes and advocacy, training programmes, and the production and distribution of materials about HIV/AIDS. Attitudes can be acquired through condition learning, observational learning and cognitive appraisal of information on the basis of evidence. This implies that HIV/AIDS prevention and control requires change in attitude to impart change in behaviour. According to Duh (1991), proper understanding about HIV/AIDS removes unreasonable fears and stigma about the disease. This is important if HIV prevention is to be of effect within the prison setting.

The study was a survey of the prisoners' attitudes towards HIV/AIDS pandemic at Kisumu Main Prison (Kodiaga). The study findings concurs with Hulton et al.,(2000), Lwanga., (1990) and other authors who noted that education may have little impact on behaviour change efforts if positive attitude about HIV/AIDS are not promoted. Positive change in attitudes towards the disease would lead to positive change in behaviour, awareness and beliefs about HIV/AIDS and control services among inmates at Kodiaga Prison. The study also found that a dignifying social environment and efficient provision of HIV/AIDS prevention and control services for the inmates at Kodiaga prison would influence positive inmate response to HIV/AIDS pandemic, prevention and control. The study did find that the prison's poor social environment encouraged risky behaviours such as sharing of sexual partners, razorblades and toothbrushes, and homosexuality/lesbianism and sodomy.

The conceptual framework was based on factors, which lead to the spread of HIV/AIDS. This concurs with the Human Rights Special Report on Inspection of Prisons in Kenya., (2000) that observed that HIV/AIDS in Kodiaga Prison is real and made worse by the practice of sodomy, homosexuality and sexual exploitation.

Simple random sampling of the inmate respondents was used to select thirty-five percent of the respondents from the three divisions within Kodiaga Prison - Men main prison, women main prison and annexe. Key informants were also picked in the study. Questionnaires and in-depth one-to-one interviews were used to collect data from the sampled population and key informants. A pocket diary to note the events as they happened was also used. The key informants were chaplains, counsellors, welfare officers, VCT managers and medical officers. Statistical Package for Social Sciences (SPSS) was used to analyze data and the results were presented in frequencies and percentage tables..

Based on the findings it was recommended that; the government should provide conducive and dignifying living conditions for the inmates, provide condoms, ensure proper staffing for the counsellors and VCT managers, equip the prison hospital to make it efficient and cheap for inmates, make provisions like toothbrushes and razorblades to the inmates and train the lower cadre of prison's staff on HIV/AIDS disease; the attitude and behaviour change agents to make provision for training, education and advocacy, ARV's at the VCT, professional counselling, prison community based programmes, production and distribution of materials about HIV/AIDS, to the inmates at Kodiaga Maximum Security Prison.