

# HIV & HCV Prevention: Intervening at the Prison Gate

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Drug Abuse and Risky Behaviors:  
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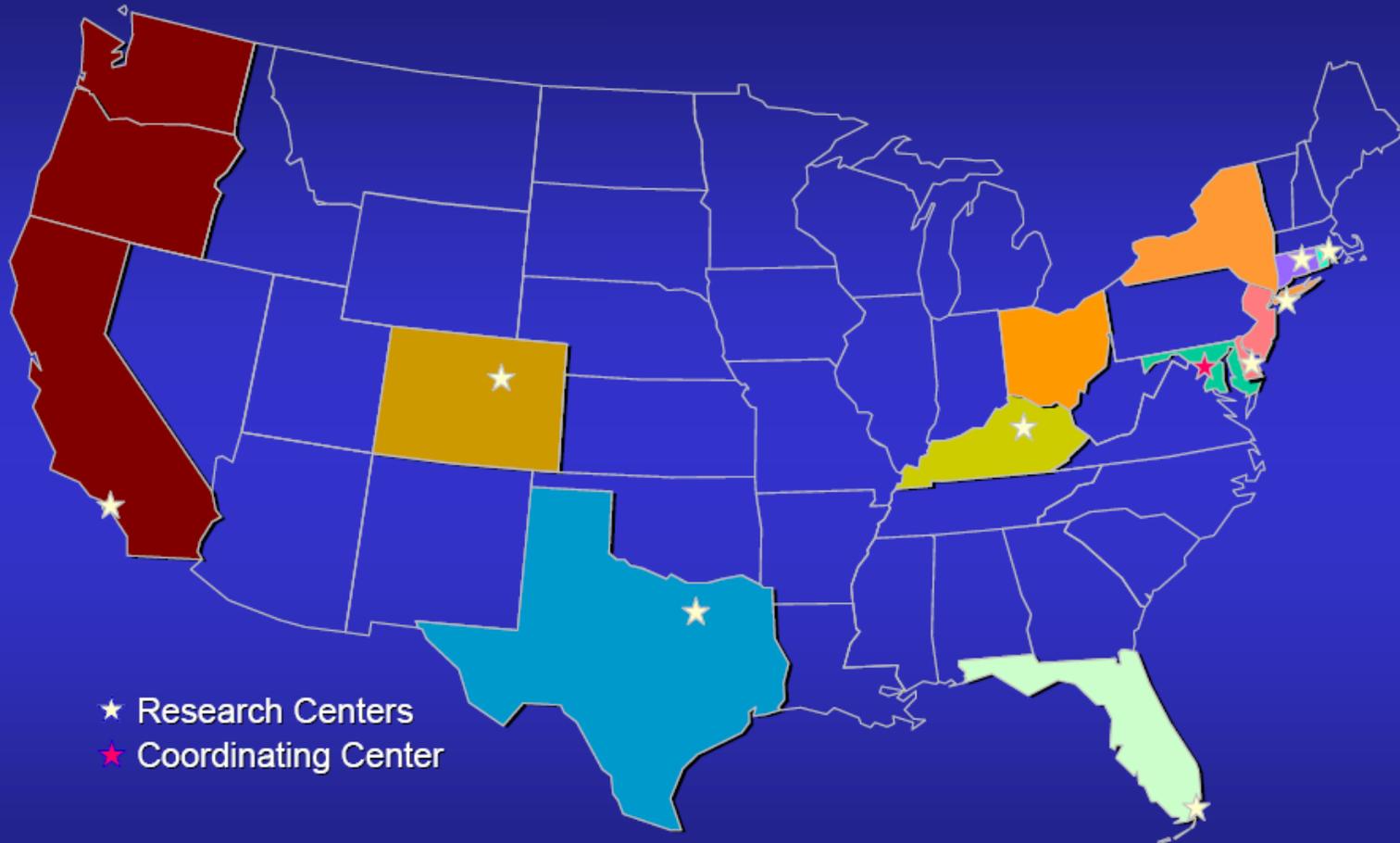


Criminal Justice | Drug Abuse Treatment Studies  
*A project of the National Institute on Drug Abuse, National Institutes of Health*  
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

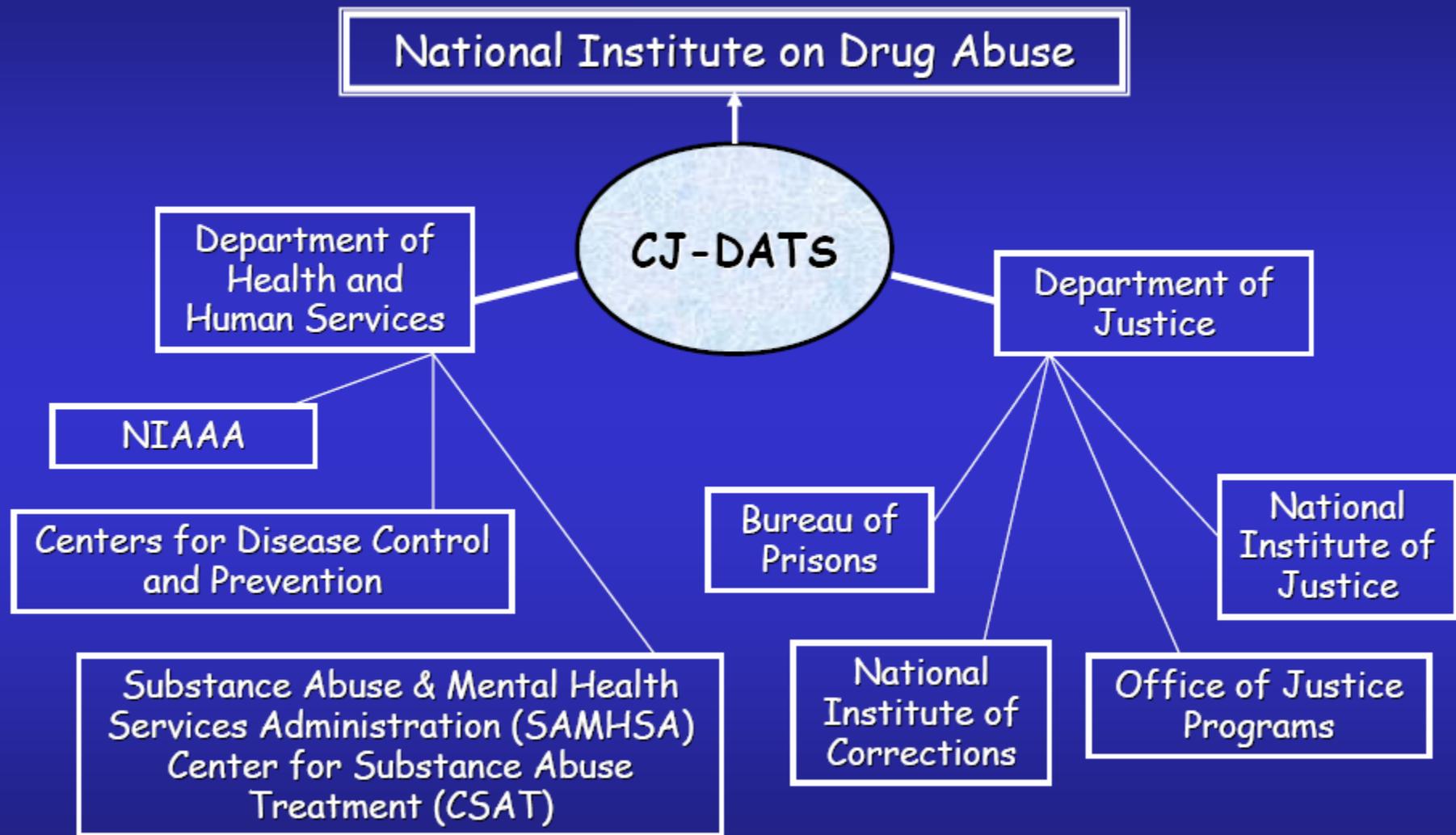
## Cooperative Agreement Mission

- Establish a national research network to test different integrated system-level drug abuse treatment models for drug-involved criminal justice populations.
- Facilitate knowledge development about drug treatment services that can improve offender outcomes.

# CJ-DATS Research Sites



# Federal Partners



# CJ-DATS HIV-HCV Project

- Lead Center
  - University of Delaware
- Other Participating Centers
  - University of Kentucky
  - Virginia Commonwealth University

# Statement of Problem



- HIV seropositivity rates in U.S. prisons are estimated to be 8 to 10 times higher than those in the general population.
- The prevalence of Hepatitis C (HCV) infection among prisoners ranges from 16% to 41%.
- Approximately 650,000 prison inmates are released to the community each year.
- The risk of death during the first two weeks after release from prison is 12.7 times higher than that in the general population.

# Primary Objectives

- Develop a brief, cost effective HIV-HCV intervention that has the potential for large scale technology transfer and is accessible to re-entry populations.
- Implement and evaluate the effectiveness of a new peer-facilitated, interactive, DVD-based HIV-HCV intervention protocol, as compared to:
  - the NIDA “Standard Intervention”
  - “current practice” in contemporary correctional institutions.
- Estimate the prevalence of HIV and HCV in samples of re-entering offenders.

# Intervention Format

- Peer interventions have been successful in changing health risk behaviors.
- Peer interventionists have credibility with the target population.
- DVD format:
  - Allows for video testimonials of offenders of the same race and gender as the client.
  - Insures greater fidelity to the intervention.
  - Permits large scale and inexpensive technology transfer.

# Intervention Timing

- Logically, the re-entry period is a pivotal time in which intervention efforts have the greatest potential for significant impact.
- Research has shown that:
  - HIV and HCV risk behaviors engaged in prior to incarceration typically resume and/or increase after release from the institution.
  - Many offenders attempt to “make up for lost time” when released, which involves seeking out and engaging in risky sexual behavior and drug use.

# Intervention Development

- Focus groups were conducted with members of the target population to better understand the barriers to safe sex and drug use among re-entering offenders.
- Based on this input, elements of existing, effective interventions were modified for appropriateness for the offender subculture.
- Video testimonials and scenarios were incorporated to reflect the experiences of re-entering offenders and to represent the risky situations they will likely confront in the community.

# Pilot Test

- DVD interventions were delivered to offenders in re-entry in Delaware to gauge acceptability and appropriateness.
- Participants found the intervention engaging, insightful, and meaningful.
  - Many were actually “rooting” for the people in the drug and sex scenarios to do the right thing.
  - Having healthy looking HIV and HCV positive offenders talk about contracting the disease was powerful.

# Study Design

HIV Educational Video, Recruitment

Screening, Informed Consent, Baseline Interview, Randomization

## Study Conditions:

Education Only

NIDA Standard

CJ-DATS Targeted

HIV/HCV Testing

Health Practitioner  
Administered NIDA  
Standard Intervention  
HIV/HCV Testing

Peer  
Administered, DVD  
Based Intervention  
HIV/HCV Testing

2 weeks later  
Post Test Counseling

2 weeks later  
Post Test Counseling

2 weeks later, Second Session  
Post Test Counseling

30 & 90 Days later  
Follow Up Interviews

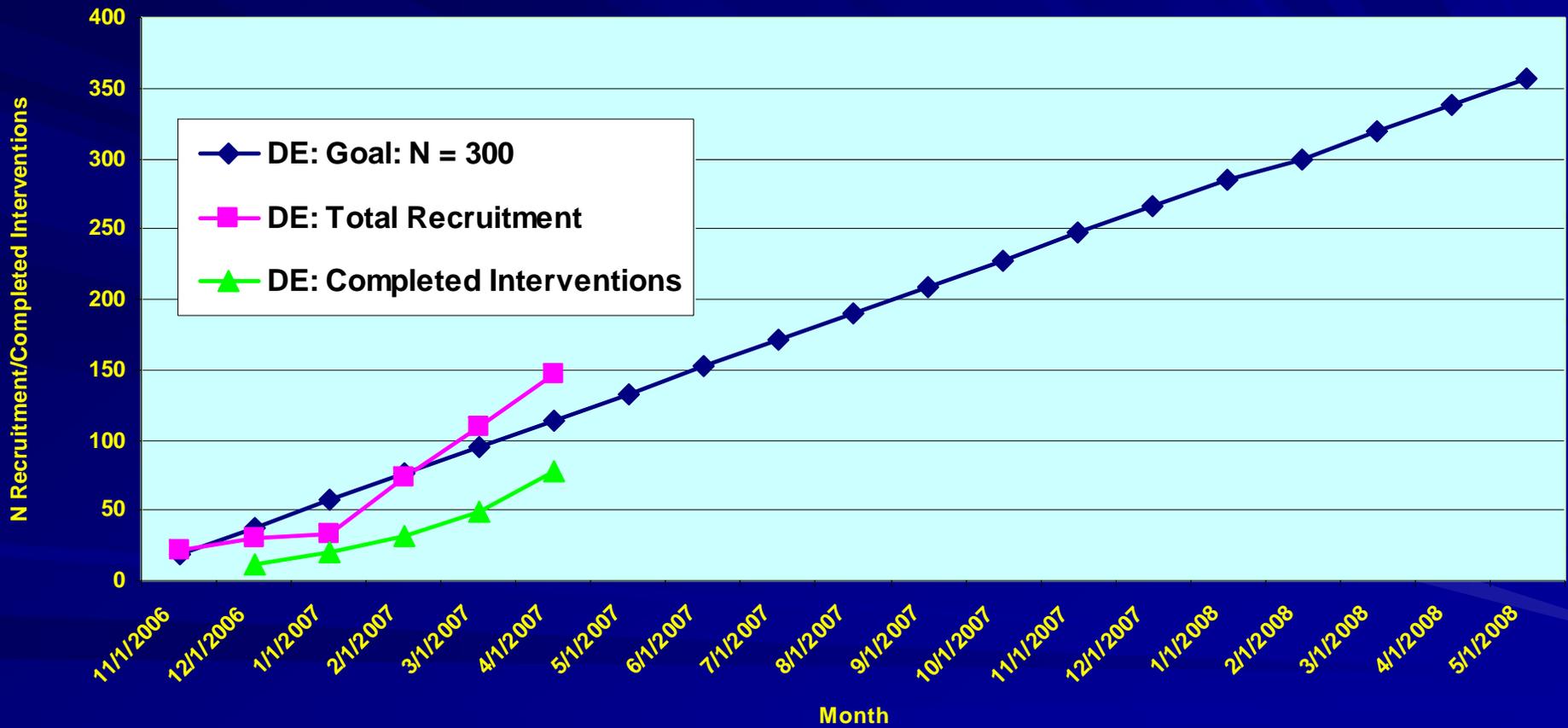
30 & 90 Days later  
Follow Up Interviews

30 & 90 Days later  
Follow Up Interviews

# The Targeted Intervention Process

- The peer interventionist guides the presentation, assists and engages the client, answers questions, and relates the material to the client's own experiences.
- The combination of message (offender-focused), messenger (peer), and mode (DVD) are expected to strengthen the efficacy of the intervention among re-entering offenders.

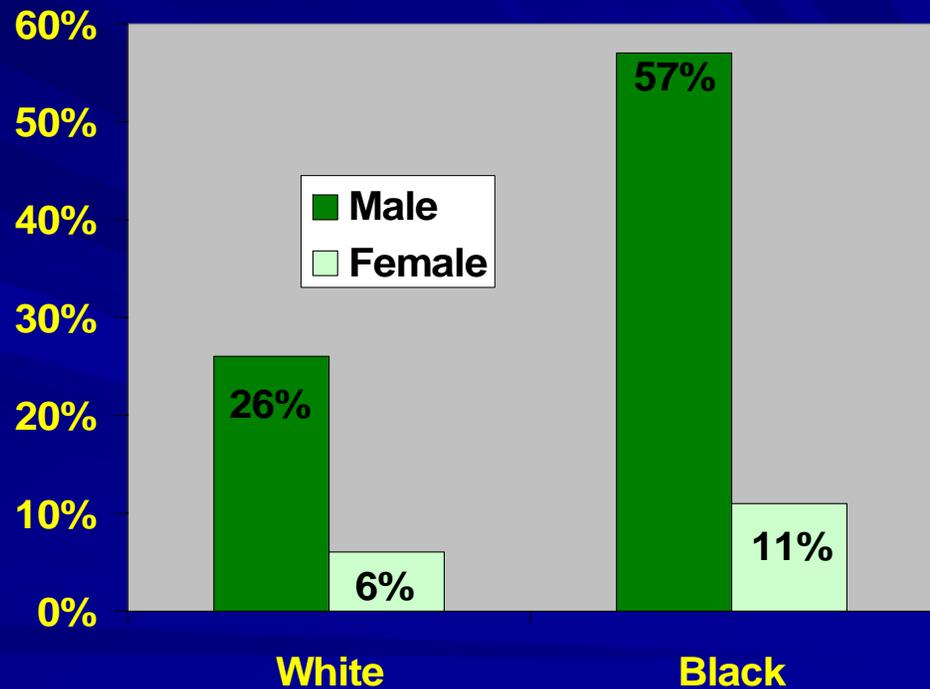
# CJ-DATS Targeted HIV-HCV Intervention Timeline & Delaware Site Progress



# Baseline Data

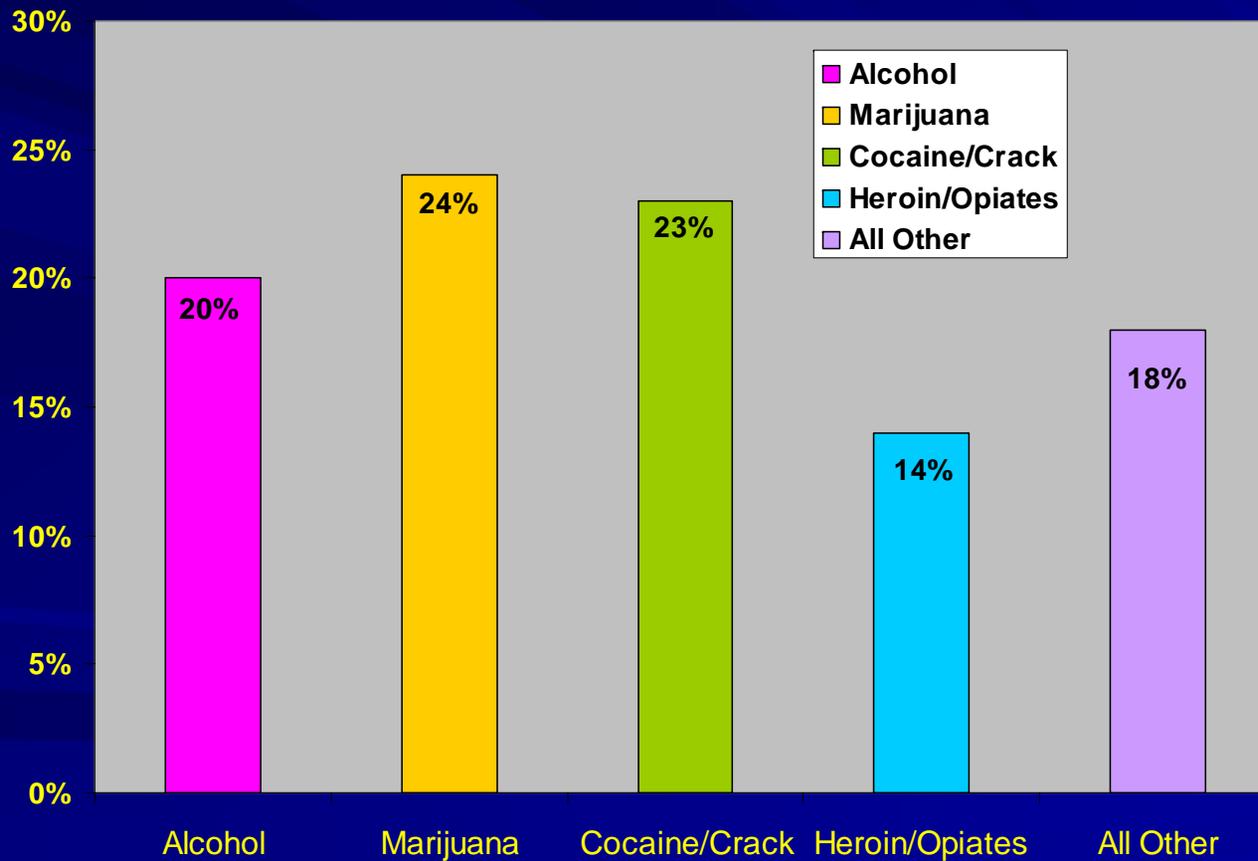
- As of April 1, 2007, the Delaware site had completed 147 baseline interviews
- 47% high school grad.
- 60% 10 or more arrests
- Mean age = 31.6 years

Delaware Participants  
by Race and Gender



# Drug Risk Behaviors

Drug of Choice Among Delaware Sample



In the six months prior to current incarceration:

8% injected drugs

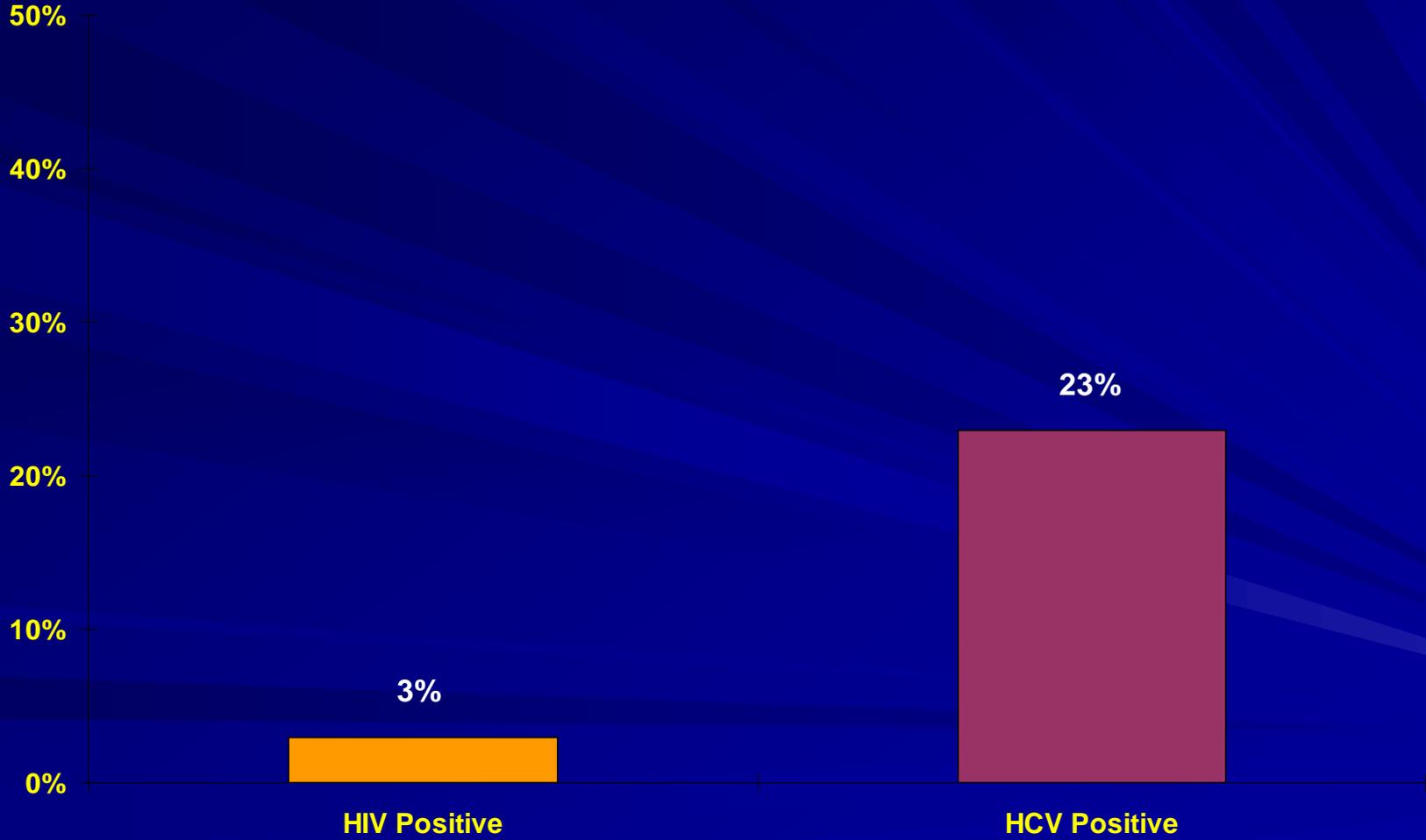
33% of IDUs shared needles

5% injected daily

# Sexual Risk Behaviors

- In the 30 days prior to the participants' current incarceration:
  - Over 80% had unprotected sex
  - Mean of 28 times, max of 200 times
- Percent having unprotected sex:
  - 40% with someone other than a main partner
  - 4% with an IDU
  - 15% with a crack user
  - 9% with a sex trader
- 67% had unprotected sex while high

# Percent HIV and HCV Positive (n = 126)



# Continuing Progress

- Kentucky has been in the field since January.
- Virginia team estimates initial recruitment during May.
- Delaware and Kentucky 30-day follow-up data analyses will commence in late May.

# Correctional Challenges to Implementation

- Some correctional systems are resistant to peer-based interventions because:
  - Some do not consider public health to be part of their mission.
  - Many do not allow “peers” in their institutions.
  - Many consider the inmate population to be undeserving.
  - Interventions require more work from staff -- scheduling, locating space, moving inmates.

# “Inmate Culture” Challenges to Implementation

- The inmate culture glorifies anti-social thoughts, feelings, and behaviors.
- Many inmates engage in anti-social behaviors while incarcerated.
- Inside the institution, “props” or respect is typically reserved for the most cunning, the most anti-social, and the most violent offenders.

# Impact of the Inmate Culture

- The inmate culture often puts offenders in a mental relapse mode before they are even released.
- In other words – inmates are programmed for failure upon release to the community.
- What Do Inmates Say They Will Do as Soon as They “Hit the Streets”?
  - Make some money (legally or otherwise).
  - “Sex it up!”
  - Get high.
  - Anything else is considered “punk stuff.”

It is for these reasons that a brief, visually-oriented, and peer-facilitated intervention has a high potential for acceptability by drug-involved offenders returning to the community.

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