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## NY program provides HIV interventions for inmates

*Both condoms and jobs are focus*

*[Editor's note: This is the second part of a special report on how prisoners returning to the community often need specific HIV prevention interventions. In this issue of AIDS Alert we highlight the efforts of a New York prison re-entry program that serves as a vehicle for HIV prevention, as well as a way to reduce prison recidivism. In the July, 2009 issue of AIDS Alert, we featured a study that found a large portion of HIV-positive prisoners released into the community do not immediately access care or treatment.]*

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A New York AIDS service organization (ASO) has found that a good HIV prevention program for people who were incarcerated in state prisons involves a multi-step program that includes health/HIV education, finding them a place to live, finding them a job, and following up with community support.

In the nearly three decades the world has been dealing with HIV/AIDS, it's become clear to public health officials, ASOs, and clinicians that effective HIV prevention, particularly for some of the most vulnerable and highest-risk populations, requires a holistic approach.

"When guys are first getting out of prison they have much more immediate needs than HIV prevention," says **Nancy Fisher**, director of prevention services for AIDS Council of Northeastern New York in Albany, NY. The AIDS Council has five offices that work with 15 counties in Northeastern New York, and it's located 160 miles from New York City.

The organization also works with HIV positive inmates, providing them with services in their home communities through a case management model.

"They have issues with housing and employment, so we stabilize them in most things and make referrals, and then we deal with teaching them safer behaviors," Fisher explains.

Here's how the organization handles HIV prevention for newly-discharged prisoners:

- A community re-entry specialist works with men and women

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## upon prison discharge.

"I work with people who are at risk for HIV simply because of their lifestyles before they went into prison," says **David Howard**, community re-entry specialist with AIDS Council of Northeastern New York.

The re-entry prevention program's goal is to

slow down the prisoner recidivism rate by helping prisoners returning to the community receive positive support and reinforcement. **(See story about how program helps with attitude change, p. 3.)**

"I see men in the department of parole who I develop a positive relationship with," Howard says. "Parole officers refer them to me."

The newly-released men and women have to contact Howard, but once they do he is flexible about when and where they'll first meet.

The stigma of HIV/AIDS leads to many ex-offenders choosing to meet outside of AIDS Council's offices, he notes.

"We have a one-on-one consultation and evaluation," Howard says. "I ask at every intake: 'Have you been tested for HIV?'"

Nearly all of the people say they were tested while in prison, so Howard offers to have them retested if they wish. He also hands out condoms and information, along with making them referrals for housing and employment services.

### • Provide support services to released prisoners.

"The thing is that when a guy comes home from prison he paints a picture that everything is all right, but the reality is that he doesn't have a place to live, he doesn't have Medicaid, and he doesn't have too much to look forward to," Howard says. "So they come in and meet with me, and they can be honest with me because I'm an ex-offender, and I identify with not having anyone out there that I can talk with."

Howard helps them both find and prepare for job interviews, and he cultivates contacts throughout the region with the goal of finding people who will hire ex-offenders.

"David has many connections with employers who will hire ex-offenders, so he knows where to send them so they'll have a better chance of success," Fisher says. "He tells them how to dress and how to carry themselves, and they can hear it from him because they see him as a mentor."

Howard also helps ex-offenders address substance abuse problems by helping them attend group support meetings.

"Ninety percent of the people who return from prison have substance abuse issues," he says. "I'm also in recovery, and I serve as a model for them."

### • Work with other organizations that target same population.

AIDS Council also works with other organizations that help ex-offenders, including ROOTS — Re-entry Orientation and Opportunity Toward Success, which is a group for ex-offenders, Fisher

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### Editorial Questions?

Call **Gary Evans**  
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says.

"They've developed a curriculum that points ex-offenders toward success," she explains. "And we have a subcontract with them where we provide twice monthly meetings."

The meetings are small group interventions that discuss HIV prevention, along with behavior change strategies, including changing one's attitude toward life and work.

"I have a lot of young men who show up and who are serious about changing their criminal thinking and who don't want to go back to the corner to sell drugs," Howard says. "They want to make a contribution to their community."

The problem is their low frustration tolerance and proclivity toward easy boredom.

"We have some young men on a waiting list to enroll in a community college," Howard says. "We have to create things to keep people occupied and busy so they won't fall back into recidivism."

Within this context, teaching ex-offenders about HIV prevention is one part of the package, while teaching them how to be happy and productive members of society is another part, he explains.

- **Provide HIV prevention classes within prison walls.**

Howard has taught basic HIV information in correctional facilities in 16-session classes of 1.5 to 2 hours duration per session.

"I taught basic HIV information and about how if you are getting high with someone, here's how to sterilize the utensils you're using," Howard says. "If you don't have a constant partner, here's how to properly use condoms, and I teach communication skills and how to adjust and deal with HIV."

- **Provide peer associate program.**

For ex-offenders who are staying in AIDS Council's region, there are opportunities for them to become peer associates, Fisher says.

"For folks who are ready, we provide training and individual interventions," Fisher says.

"They're dealing with their own risk reduction behavior, and we provide opportunities and outreach for them to share the HIV information they've learned with others in their community."

This reinforces HIV education among a high-risk population, and it helps peer associates build their own HIV risk reduction behavioral skills, Fisher adds.

"This is a positive thing for them to do and to spend their time," she says.

The peer associates program helps teach ex-

offenders responsibility, and it gives them something positive to do rather than to just hang out on their block, Howard says.

Howard also hoped that informal peer educator relationships would be built during the prison HIV prevention sessions.

"So maybe the guys with younger siblings could take it back and share it with their families," Howard says.

"I have some inmates who returned to the community who had peer education training for HIV," Howard adds. "These men received education about HIV and a certificate, and then they shared HIV prevention information with their family and close friends."

For the men who received the certificate upon completing all of the HIV sessions, this was a proud moment, Fisher says.

"For some, it's the first time they've stuck with something all the way through, and they're very proud," she adds. ■

## **HIV prevention program for ex-offenders succeeds**

### *Teaching listening, patience*

**B**efore HIV educators can hope to change HIV risk behavior among high-risk ex-offenders, they need to help these men and women change their attitudes about their lives in general, an expert says.

"They're so used to getting new pairs of sneakers by going to the street corner and selling drugs," says **David Howard**, community re-entry specialist with AIDS Council of Northeastern New York.

Howard tries to teach them how they'll appreciate what they have more if they work, wait, and save for them.

"Life's a slow walk," Howard says.

Ex-offenders often listen to what Howard says because he is an ex-offender too: "They know the passion in me to help people," he says.

Howard's approach combines the practical with the emotional. He'll hand out a dozen condoms, along with job leads, to men who have just re-entered the community. And he'll behave as a good friend or counselor who will listen to their concerns and patiently show them the way to make themselves marketable in what is always a difficult job environment.

When he finds a job for an ex-offender the reaction is often that it pays too little and requires too much.

Howard helps them put this in perspective.

"I tell a lot of gentlemen and women when I work with them that 'I can't do your job, but here's what will help you keep your job and move onto a better job,'" he says.

For example, Howard teaches them how to listen and follow what their employers or teachers are telling them.

"Listening means following directions and taking suggestions," Howard says. "A lot of people miss that point."

Occasionally there are success stories that show that ex-offenders can make lifetime changes, given the right kind of support and education.

"We had one guy who was in prison for 15 years for murder," Howard recalls. "I met him at a re-entry support group."

The man was big and intimidating, but Howard saw that he wanted to change.

"He liked what I said, and he latched on to some of the things I said at a re-entry program," Howard says. "He got a job eight days later as a part-time worker at a deli."

Within two weeks, the man had become a full-time employee, and a month later he received a raise and was considered to be one of the owner's best hires.

With help from the re-entry support group, the man then met the owners of a weatherization business. He went to work for them and was eventually promoted to being a supervisor with a decent income, Howard says.

When the weatherization company hired another ex-offender, the older man served as a mentor, helping out his younger assistant, earning high praise from the business owner, Howard adds.

"I work with people who will listen to what I say and who are willing to have an opportunity to prove themselves," Howard says. ■

## The 'Safety Counts' HIV prevention model

*Early snapshot holds promise*

Investigators are using an adaptation of the Safety Counts model for HIV prevention to

evaluate the impact of HIV education, hepatitis education, and a substance abuse intervention on people who are at high-risk for HIV infection in New York.

"We are looking to see if people change," says **Kristin Stainbrook**, PhD, an assistant director of research at Advocates for Human Potential in Albany, NY. The advocacy program is studying the intervention, which is being administered by the AIDS Council of Northeastern New York.

"We want to know if their understanding of HIV increases, whether they change risky behaviors, whether they decrease substance use and decrease their risk factors," Stainbrook says.

Safety Counts, which is one of the approved HIV interventions listed by the Centers for Disease Control and Prevention (CDC) in Atlanta, GA, was designed for a substance abuse population.

The prevention intervention includes face-to-face group and individual sessions, educational activities, creative strategies for reducing risk behaviors, and a graduation session.

"I think we've had some good results," Stainbrook says of the ongoing study. "We're in the middle stages of the study and have been collecting data for about 1.5 years, following up with people who've completed the program."

About 60 people have received the intervention so far, and the early findings suggest the intervention has helped to reduce drug use and binge drinking, as well as to reduce participation in unsafe sexual practices, Stainbrook says.

"There has been some slight increase in people feeling comfortable talking with their partner about using protection or saying, 'No,' to risky behaviors," she adds. "Also their knowledge of HIV has increased, which has been one of the best findings."

While people participating in the intervention are not necessarily remaining abstinent and are still using drugs and drinking, they say they are less likely to practice unsafe sex and are more likely to use clean needles, Stainbrook says.

The study will continue and the sample so far is small, she notes.

The clients like the group session environment and say they learn a lot from each other, Stainbrook notes.

"The sessions are fun and include food, games, and prizes," Stainbrook says. "We also have some very engaging staff."

The intervention includes having people get together to discuss their personal issues regarding HIV prevention. They also participate in games intended to increase their awareness and improve their behavioral change skills.

For example, one game is based on Jeopardy and includes questions about HIV.

“One thing the program has tried to do, and we don’t know if it’s been successful, is to develop peer associate groups,” Stainbrook says. “The incentive is the possibility of clients becoming a peer and participating in some of the outreach activities.” ■