

Criminal justice involvement, HIV, HCV, and health among people who inject drugs or smoke crack cocaine in Oakland, CA, 2011-2013

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Background

- People who inject drugs or smoke crack cocaine are disproportionately affected by HIV and HCV.
- They are also more likely than people who do not use illicit drugs to be involved in the criminal justice system.
- Community supervision, including probation and parole, can have positive and negative health effects.
- We conducted an NIMH-funded, community-based study of people who inject drugs or smoke crack cocaine in Oakland to learn more about the prevalence of criminal justice involvement, HIV, HCV, and other health concerns.

Methods

- “Urban Health Study II”
- Aug 2011- Aug 2013
- People who smoke crack or inject drugs (N=2,094) recruited using targeted sampling
- Community-based research: 3 sites
- HIV testing and counseling
- Survey: Interviewers using lap-top computers



Participant Characteristics (N=2,094)

	%
West Oakland	37
Deep East Oakland	48
Fruitvale	15
Male	59
Female	41
African American	88
Latino	4
White	4
Other	4
Used crack past 30 days	88
Injected drugs past 30 days	23

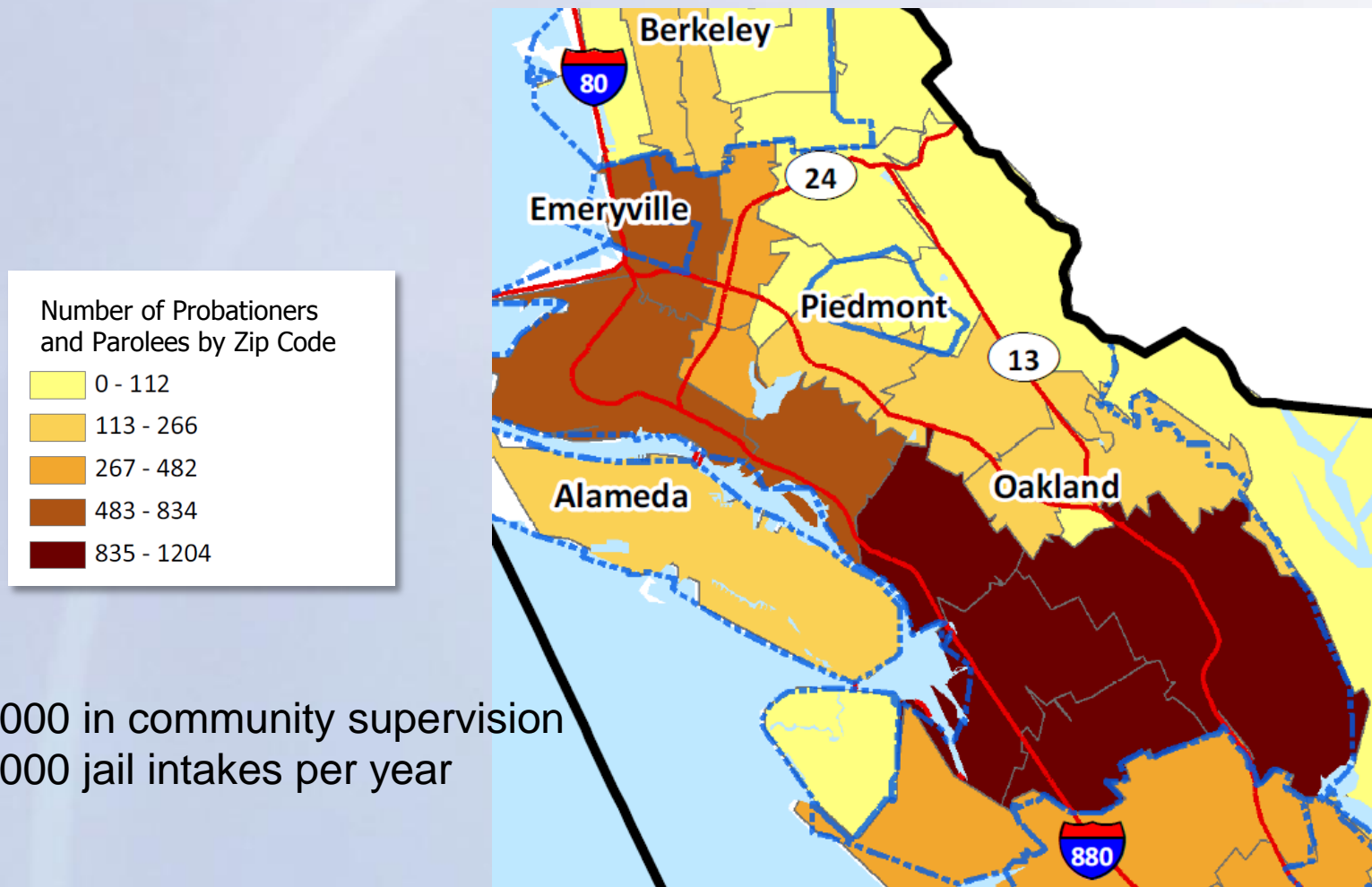
Risk Environment Theory



The space – whether social or physical – in which numerous factors interact to increase the chances of harm.

-- Rhodes, 2002

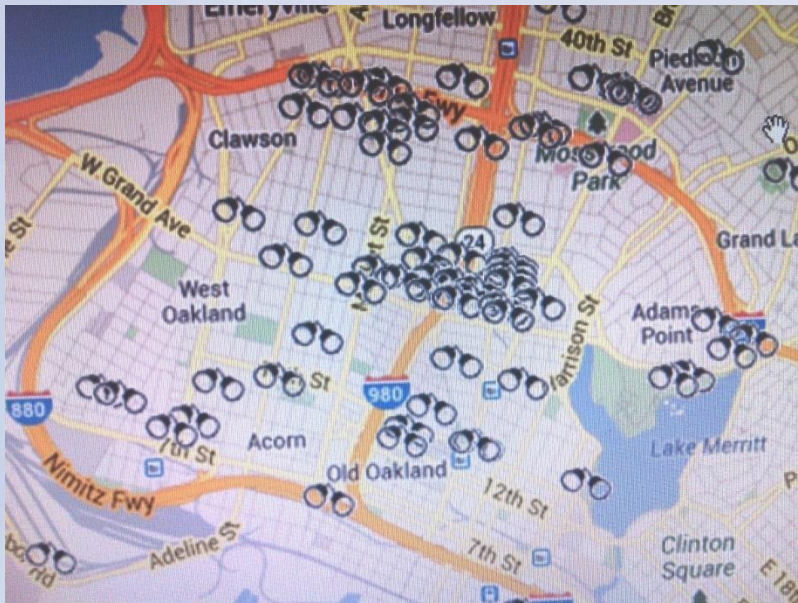
Community as Criminal Justice Setting



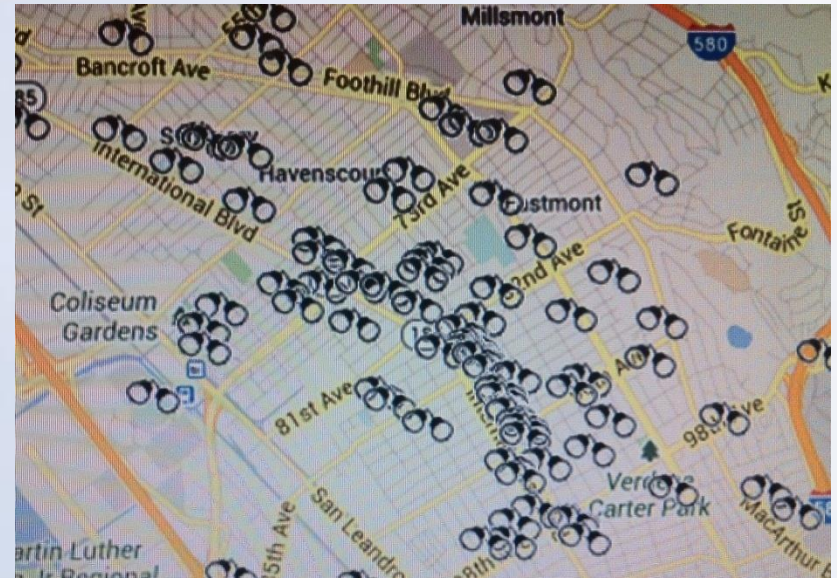
Source: Urban Strategies Council, 2010

Community as Criminal Justice Setting

Arrests: August and September 2013



West Oakland Site



Deep East Oakland Site

Criminal Justice System Involvement (N=2,094)

	Ever	Past Year
	%	%
Arrested	93	30
Jail	92	30
Prison	44	3
Probation	79	28
Parole	42	10
Any CJ involvement	94	47

Risk Environment Factors (N=2,094)

	%
Currently homeless	53
Income below poverty level	75
Physically assaulted past year	23
Sexually assaulted past year (women only)	8
Shot at past year	8
Witnessed shooting past year	22

HIV/HCV prevalence (N=2,094)

HIV antibody positive:	3.7%
Ever tested for HCV (self-report):	63%
HCV-positive (self-report):	32%

HIV Testing (N=2,094)

- 85% had ever tested for HIV
- 19% had tested in 6 months prior to study
- Among those who shared syringes, only 20% had tested for HIV in past six months
- Among those who had risky sex, only 14% had tested for HIV in past 6 months

Heroin Overdose

- Among heroin users (n=879), 5% reported overdose in past 6 months
- Among all participants, 12% had witnessed an overdose in the past 6 months.
- Only 5% had ever received overdose training, and only 4% received prescribed naloxone

Risk Environment Factors by Community Supervision (CS) among Women

	CS Past Year (n=202)	No CS Past year (n=565)	
	%	%	p.
Currently Homeless	60	38	<.0001
Sexually assaulted (year)	12	5	.0022
Physically assaulted (year)	36	22	.0001
Illegal income (6 months)	44	20	<.0001

Community Supervision Correlated with Risk Environment among Women

OUTCOMES	AOR*	95%CI
Model 1: Currently Homeless	2.2	1.6, 3.2
Model 2: Physically assaulted past year	1.4	1.0, 2.1
Model 3: Sexually assaulted past year	2.0	1.1, 3.7
Model 4: Illegal income past 6 months	2.4	1.6, 3.4

*Adjusted for the following factors:

Model 1: Age, drug injection, physical assault, sexual assault

Models 2&3: Age, homelessness and sexual assault

Model 4: Age, homelessness, injection drug use, physical assault and sexual assault

Receipt of Services by Community Supervision Status among Women

Past 6 months	CS past year (n=202)	No CS past year (n=564)	
	%	%	p.
HIV test	29	18	.0022
Drug treatment	19	14	ns
Mental health care	31	28	ns
Job counseling	7	8	ns
Has health insurance	63	73	.0103

Community Supervision Not Correlated with Receiving Services

OUTCOME	AOR*	95% CI
Model 1: HIV test	1.6	1.1, 2.5
Model 2: Drug treatment	1.3	0.8, 2.1
Model 3: Mental health care	0.9	0.6, 1.3
Model 4: Current health insurance	0.8	0.5, 1.1
Model 5: Job counseling	0.7	0.4, 1.4

Adjusted for the following factors:

Model 1: Age, drug treatment and health insurance

Model 2: Age, injected drugs and health insurance

Model 3: Age, drug treatment and self-reported mental health diagnosis

Model 4: Age, drug treatment and injected drugs

Closing Thoughts

- There is a need for more community-based HIV and HCV testing and treatment among people who use illicit drugs.
- Probation could be a good place to provide linkage to case management and HIV/HCV treatment.
- Increase OD training and naloxone distribution to non-users of heroin
- ‘Realignment’ and ACA provide an opportunity to shift resources from punishment to support
- Re-consider community supervision as a form of support along with safety.

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