

HIV Testing and Treatment Services in Wisconsin Prisons

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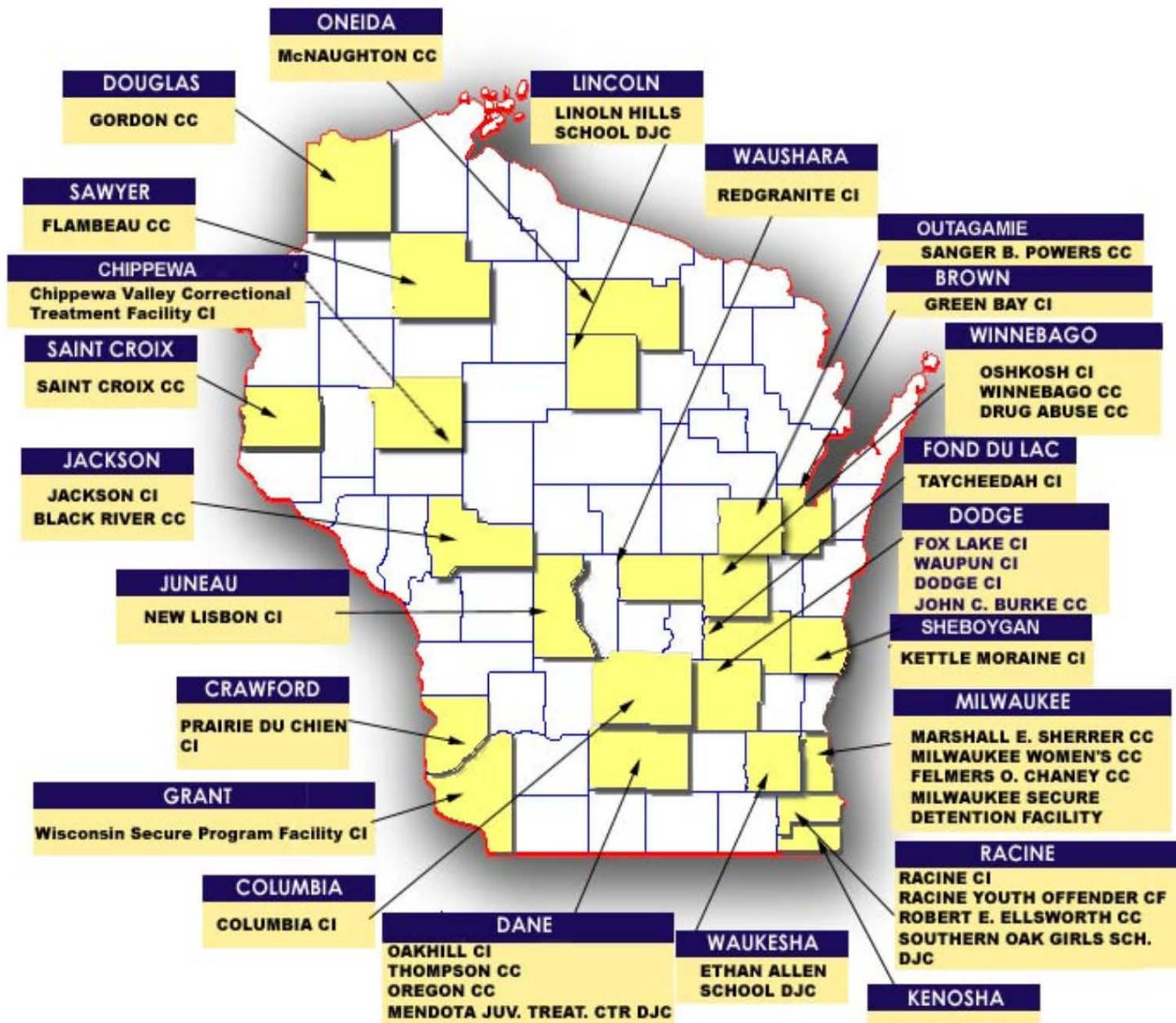
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Prisoners in Wisconsin

- **Growing population**
 - From < 10,000 in 1980 to >22,000 in 2005
 - Why? sentencing laws, high recidivism (85% within 3 years)
- **>90% of are male, low SES , low educational attainment (56% did not have a high school education), and two-thirds (66%) had a lifetime history of AODA treatment**
- **African American (46%), White (42%), Hispanic (11%)**
- **Most are under the age of 40 (average age 34 years)**
- **Over representation of communicable diseases, such as HIV/AIDS (0.8%), hepatitis B (5%) and C (14%)**
- **>35% received HIV diagnosis in correctional setting, and >65% received HCV diagnosis**
- **Limited access to healthcare prior to incarceration**



Prison HIV and HCV Testing

- All prisoner intake health assessment and testing takes place at centralized locale
- Opt-in HIV testing with written informed consent
 - Standard EIA with confirmatory WB
 - 90% participation rate
 - Some nurse delivered counseling, but most do not receive their test results
 - All HIV positives get an evaluation, additional testing and referral to UW HIV Care Program for consultative services
- HCV testing “Opt-out”
 - Transitioning from risked base HCV testing to screening all
 - Most do not receive their test results
 - All HCV positives get an evaluation, additional testing and some are referred to UW Hepatology Clinic for

Prison HIV Treatment

- UW HIV Care Program faculty and staff provide in clinic and telemedicine consultation and care for any prisoners with HIV
 - >95% participation rate
 - All necessary laboratory testing and all FDA approved antiretroviral medications are available
 - Centralized pharmacy services
 - *Keep on person* medications
- HIV care outcomes
 - Most accept and adhere to ART
 - >65% on ART with >70% undetectable VL

Transitional Care

- Majority are released to the greater Milwaukee/Southeastern Wisconsin region
- >83% of HIV positive prisoners receive documented transition case management services starting 3 months prerelease
 - Enrolls prisoners on ADAP
 - Sets up appointment with community HIV provider
 - 79% of former prisoners attend their first clinical appointment
- Of re-incarcerated prisoners previously on ART
 - 30% were not receiving ART
 - 73% had decrease in CD4 count
 - <50% had maximal viral suppression

Sources of Support

- Ryan White/HRSA Part B funding for transition case management
- HRSA SPNS for Linkage to Care community case management
- NIDA Seek Test and Treat research project

What Can Made it Work

- Establish a working and collegial relationship with Correctional staff and administration
- Employ to usual successful behaviors:
 - Good Attitude
 - Patience
 - Consistency
 - Overall Flexibility and Creativity
 - Learning to Walk the Line