

Testimony of Vincent Jones Executive Director Center for Health Justice Subcommittee on Crime, Terrorism, and Homeland Security U.S. House of Representatives Tuesday, May 22, 2007

Good morning. My name is Vincent Jones. I am the Executive Director of the Center for Health Justice, an organization based in Los Angeles. The Center for Health Justice empowers people affected by HIV and incarceration to make healthier choices and advocates for the elimination of disparities between prisoner health and public health.

More specifically, Center for Health Justice provides treatment adherence education to HIV+ inmates, HIV prevention education to incarcerated women and men at high-risk for HIV infection, and supportive services to HIV+ parolees upon release. We are also the nation's largest provider of condoms inside correctional facilities, and provide prisoners access to condoms in the Los Angeles and San Francisco County Jail systems. Finally we run a nationwide HIV prevention hotline that prisoners may call collect while incarcerated.

The Center for Health Justice was founded in 2000 by HIV advocates with over 20 years experience in the field to focus HIV treatment advocacy and prevention efforts on incarcerated populations, an often forgotten subset of the HIV community. But ignoring this population is the detriment of us all.

Here are the facts: In the US one in four people with HIV pass through a jail or prison each year; 26 years into the epidemic a quarter of those with HIV are undiagnosed. Women, especially women of color, constitute an increasingly large proportion of new infections. And this might come to a surprise to some but over 90% of people in prison or jail return to their communities in a short period of time, bringing back to their communities the effects of poor HIV medical treatment and prevention efforts inside.

The fundamental tenet of our organization is the principle that HIV prevention and treatment in correctional facilities should be equal to that of the general public. We call this health justice. In general, HIV+ folks in the community have access to quality medical care, HIV medications, treatment education and advocacy and support services: HIV+ prisoners should also. HIV+ and at-risk folks in the community have access to prevention education, condoms and HIV hotlines that provide information to reduce the risk of transmission: HIV+ and at-risk prisoners should to.

Applying principle of Health Justice to the real world is not only the right thing to do but it is also good policy.

Today, I am here to tell you that our staff and board have examined HR 1943, the STOP AIDS in Prison Act of 2007 through the lens of Health Justice and decided to support this legislation. We applaud Congresswoman Maxine Waters for recognizing the intersection of HIV and correctional facilities and thank her for her leadership on this very important issue.

As you know the purpose of the bill is to stop the spread of HIV and AIDS among prisoners, to protect staff from HIV infection, to provide comprehensive medical treatment to prisoners who are living with HIV, to promote HIV awareness and prevention among prisoners, to encourage prisoners to take responsibility for their own health and to reduce the transmission of HIV in prison.

We like the fact that many elements of this legislation conforms with existing standards and practices employed outside of correctional facilities. More specifically:

- Testing and Counseling upon intake is consistent with the provision of testing to individuals who
  are not incarcerated. The strong pre and post test counseling component of the legislation is
  critical because it helps inmates understand the potential ramifications of a positive OR a negative
  result. In either instance, it is incumbent upon them to make healthier choices and appropriate
  counseling and education makes that more likely.
- Improved HIV Awareness through Education is critical. The simplest and most cost-effective way
  to address the HIV epidemic is through education and primary care providers, but incarcerated
  populations generally lack formal schooling and adequate healthcare. Hence, in-custody programs

often mark their first and only opportunity for HIV prevention education and in the best teachable moment: when constituents are sober, contemplative, and in single sex environments. In our experience while education is available to some portion of prisoners at some times in some facilities, all programs could benefit from increased access by community service providers and health departments and prisoner peer educators to provide HIV education. We particularly support the provision of educational materials to be available at intervals during incarceration including at orientation, in medical clinics at regular educational programs and prior to release. In our experience education, particularly about a sensitive topic as HIV, is best reinforced frequently and provided repeatedly to individuals who at various points during their lives and incarceration may be more open to receiving such information.

- Controlling the HIV epidemic begins with more people knowing their HIV status. HIV Testing upon
  request is the norm in the general public and should be the case inside correctional facilities as
  well. We are delighted that the legislation stipulates that an inmate request for an HIV test can not
  be used against her or him in a punitive manner. The few obstacles to testing that exist the
  greater likelihood that an individual will choose to be test and begin to make healthier choices
  upon learning their HIV status.
- The encouragement of HIV testing of pregnant women is also critical and is the norm in the general population. We know that we can stop the transmission of HIV from a mother to her child if the appropriate treatment is given at the right time.
- By doing HIV prevention and treatment education in correctional facilities for the past seven years, we know that HIV is often one a myriad of issues that our clients face. For this reason, we apply a holistic approach to treatment. We are pleased that this bill calls for comprehensive treatment as well. Not only is comprehensive HIV treatment the goal in the general public but it is a more effective approach to reducing re-infection and prolonging lives. The confidential counseling and voluntary partner notification aspects of this legislation are important too because they help to create an environment in which HIV positive inmates will seek out and adhere to treatment.
- Providing for a formulary that will contain all of the FDA- approved medication necessary to treat HIV/AIDS is essential. The science around HIV is constantly evolving and the disease affects people differently. One drug that does the trick for one person may not work at all for another. The provision of automatic renewal systems for medication is also essential and we're glad it's included in this bill. It is not uncommon for inmates to go without medications for weeks because their prescription expired after three months but access to a physician to renew them took more than that time. We were able to resolve this issue with the Sheriff's Department of Los Angeles County, and we are happy to see that this specific issue was addressed in this bill. It reflects the author's comprehensive understanding of the challenges of HIV care in an incarcerated setting.
- Requiring that medical and pharmacy personnel provide timely and confidential access to medications similarly reflects that the author of the legislation understands that in correctional settings it is difficult to provide medications in a way that protects confidentiality. In our experience, HIV+ prisoners' confidentiality is often violated when medications are distributed to folks in long lines and without a way to conceal the type of medication being distributed. And as you know, one's HIV positive status is a highly protected status in terms of confidentiality law in the general public and should be in incarcerated settings due to the many real negative implications that can and do result from being HIV positive in prison or jail.
- We assist inmates in developing pre-release plans that take their health into consideration and know the effectiveness of these types of tools. We are happy that this bill provides for similar planning especially. Many inmates often lack access to adequate health care but can be helped to surmount the obstacle with the proper planning
- To our knowledge, no population is required to take an HIV test. We are happy that this bill
  provides a clear opt-out provision for inmates. While we believe it is important for more people to
  know their status, we know that inmates are more likely to make healthier choices after learning
  their status if they choose to take the test themselves.

>li>The bill further requires that testing be offered upon entry and release, in contrast to legislation proposed in various other jurisdictions requiring testing only upon exit. Testing upon entry and release is preferable because it allows an individual receiving a positive diagnosis to do so in an environment where he or she can receive required care, rather than just a diagnosis upon departure.

 The exposure incident provision in the bill is one which we look forward to working with the author to improve. It could be argued that this provision making prisoners living with HIV the subject of scrutiny rather than members of our community to be supported with increased counseling and testing and educational resources. We agree with the goal of reducing intra-mural HIV transmission including to staff but we believe this could be done in a different manner.

## IN CONCLUSION

We are pleased that the Congress of the United States has taken official notice of the issue of HIV among

the incarcerated. We support efforts to increase HIV testing in a manner that mirrors HIV testing in the community, takes advantage of the public health opportunity incarceration presents without taking advantage of prisoners and their decreased capacity to decline or meaningfully consent to participation in interventions.

Thank you for the opportunity to provide our expertise to those whose goals are consistent with our mission: to empower those affected by HIV and incarceration to make healthier choices.

Thank you.