

# WOMEN IN PRISON PROJECT

## Correctional Association of New York

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## Women and HIV/Hepatitis C Fact Sheet

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### HIV/AIDS

- Experiences that often lead women to become involved in criminalized behavior – drug abuse,<sup>1</sup> sex work, poverty, unemployment, and domestic violence and trauma<sup>2</sup> – are also experiences that put women at risk for HIV and Hepatitis C infection.<sup>3</sup>
- At year-end 2005, New York State had 4,440 inmates living with HIV, down from 7,000 in 1999.<sup>4</sup>
- New York has the largest number of HIV-infected inmates in the country.<sup>5</sup> New York also has the largest number of HIV-positive women inmates of all prison systems in the United States.<sup>6</sup>
- 12% of women in New York's prisons are HIV positive - a rate of infection almost double the rate for male inmates (6.7%)<sup>7</sup> and 80 times higher than the rate in the general public (.15%).<sup>8</sup>
- As rates of HIV are disproportionately high among African-American and Latina women in the general public, HIV disproportionately impacts incarcerated women of color.<sup>9</sup>
- New York has the largest number of HIV positive jail inmates in the country – 1,359 in 1999.<sup>10</sup>
- A 1999 New York City Department of Health study found that more than 18% of women entering the New York City jail system were living with HIV compared to 7.6% of men. This study also found that African American women accounted for over 21% of HIV positive cases; almost 14% were Latina and about 12% were Caucasian.<sup>11</sup>
- The number of AIDS-related deaths in New York's prisons dropped 93% from 1994 (244) to 2005 (19).<sup>12</sup>

### Hepatitis C

- Hepatitis C (HCV) is a viral disease that attacks the liver. People infected with HIV are often co-infected with HCV: approximately 30% of all people living with HIV in the general public are co-infected with HCV.<sup>13</sup> Effective HIV prevention must also include a focus on HCV.
- The New York State Department of Correctional Services (DOCS) estimates that more than 15% of HIV positive inmates are known to be co-infected with HCV.<sup>14</sup> People who are co-infected with HIV and HCV sometimes experience an accelerated progression of HCV.<sup>15</sup>
- An estimated 22.1% of women and 12.8% of men in New York State prisons are infected with HCV.<sup>16</sup>
- The rate of HCV infection among New York's women prisoners is more than 14 times higher than the HCV infection rate in the general public (1.6%).<sup>17</sup>
- HCV is especially prevalent among women incarcerated for crimes related to sex work and drug addiction.<sup>18</sup>
- Because HIV and HCV have shared routes of infection (blood), the U.S. Department of Health and Human Services and the Infectious Disease Society of America recommend screening all people with HIV for HCV.<sup>19</sup>

### Identification of HIV and HCV in Prison

- DOCS has only identified an estimated 45% of its HIV positive population and only 70% of its HCV-infected population, leaving hundreds of incarcerated individuals with HIV and/or HCV without appropriate monitoring or treatment.<sup>20</sup>
- Just under 62% of the women identified as being HIV positive at Bedford Hills, Albion, Taconic and Bayview were on an HIV treatment regimen in 2005-2006. Only 4% of women inmates identified as living with HCV at these facilities were on treatment for HCV.<sup>21</sup> (*Note: not all people with HCV are appropriate candidates for treatment.*)<sup>22</sup>

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- <sup>1</sup> More than 88% of women in New York's prisons report having an alcohol or substance abuse problem prior to arrest. *Hub System: Profile of Inmate Population Under Custody on January 1, 2007*, New York State Department of Correctional Services (June 2007), at 55.
- <sup>2</sup> An estimated 82% of women at New York's Bedford Hills Correctional Facility have experienced severe abuse as children and over 90% have endured physical or sexual violence in their lifetimes. Browne, Miller and Maguin, "Prevalence and Severity of Lifetime Physical and Sexual Victimization Among Incarcerated Women," *International Journal of Law and Psychiatry* 22 (3-4) (1999).
- <sup>3</sup> See "At the Intersection between Poverty Race and HIV Infection: HIV-related Services for Incarcerated Women," *Infectious Diseases in Corrections Report*, Brown Medical School, Office of Continuing Medical Education, Vol. 9, Issues 6 & 7 (June/July 2006). See Michelle Onorato, MD, *HIV Infection Among Incarcerated Women*, HIV & Hepatitis Education Prison Project (HEPP), Vol. 4, Issue 5 (May 2001). See Anne S. DeGroot, MD, *HIV Infection Among Incarcerated Women, An Epidemic Behind The Walls*, HIV & Hepatitis Education Prison Project (HEPP), Vol. 3, Issue 4 (April 2000). See Hilary Beard, *Getting Real: Black Women Taking Charge in the Fight Against AIDS*, Black AIDS Institute (December 2005), at 17.
- <sup>4</sup> Laura M. Maruschak, *HIV in Prisons, 2005*, Bureau of Justice Statistics, U.S. Department of Justice (September 2007, revised 12/20/07), at 2 (hereinafter *HIV in Prisons, 2005*).
- <sup>5</sup> *Id.*
- <sup>6</sup> Laura M. Maruschak, *HIV in Prisons, 2004*, Bureau of Justice Statistics, U.S. Department of Justice (November 2006), at 3.
- <sup>7</sup> *Healthcare in New York State Prisons, 2004-2007*, Prison Visiting Project of the Correctional Association of New York, report forthcoming (hereinafter *Healthcare in New York State Prisons, 2004-2007*). Authors of this study calculated these figures by using data from the New York State Department of Health's blind HIV seroprevalence tests of newly admitted inmates to state custody conducted every two years since 2001. Authors applied this data to the number of inmates entering state custody in 2006.
- <sup>8</sup> See Table 1: *Annual Estimates of the Population for the United States and States, and for Puerto Rico: April 1, 2000 to July 1, 2005*, U.S. Census Bureau (2005) and *HIV Infection and AIDS: An Overview*, U.S. Department of Health and Human Services, National Institute of Allergy and Infectious Diseases (NIAID) (March 2005).
- <sup>9</sup> In New York State, almost 57% of African American women, more than 29% of Latina women, and just over 13.2% of Caucasian women are living with HIV. By contrast, African American and Latina women make up only 29% of the general population in New York. See *Women in Peril HIV & AIDS: The Rising Toll on Women of Color*, A Report of the New York State AIDS Advisory Council (December 2005), at 13.
- <sup>10</sup> Laura M. Maruschak, *HIV in Prisons and Jails 1999*, Bureau of Justice Statistics, U.S. Department of Justice (July 2001), at 8.
- <sup>11</sup> New York City Department of Health, Bureau of Disease Intervention Services, *HIV Seroprevalence Update 1999* (June 2001), at 126.
- <sup>12</sup> *HIV in Prisons, 2005*, at 1. Peter M. Brien and Allen J. Beck, *HIV in Prisons 1994*, Bureau of Justice Statistics, U.S. Department of Justice (March 1996), at 5.
- <sup>13</sup> Courtney E. Colton, *Hepatitis C Virus (HCV) and HIV Co-Infection in Corrections: Where Do We Stand?*, *Infectious Diseases in Corrections Report (ICDR)*, Vol. 8, Issue 10 (October 2005).
- <sup>14</sup> New York State Department of Correctional Services Response to Document Request of the Assembly Committee on Correction and Committee Health (December 30, 2003), at 11.
- <sup>15</sup> See Jan-Christian Wasmuth and Juergen Rockstroh, "HIV and HBV/HCV Coinfections," at 541-564, in *HIV Medicine 2006*, Christian Hoffmann, Jürgen K. Rockstroh and Bernd Sebastian Kamps, eds. (August 2006).
- <sup>16</sup> *Healthcare in New York State Prisons, 2004-2007*. Authors of this study calculated these figures by using data from the New York State Department of Health's blind Hepatitis seroprevalence tests of newly admitted inmates to state custody conducted every two years since 2001. Authors applied this data to the number of inmates entering state custody in 2006. A State Department of Health seroprevalence study of 4,000 inmates admitted to DOCS custody from September 2000 to March 2001 found that 23.1% of female inmates and 13.6% of male inmates were infected with HCV. L. Smith, L. Wang, L. Wright, K. Sabin, D. Glebatis, P. Smith, *Hepatitis C Virus (HCV) Seroprevalence Among Incoming Inmates in New York State (NYS) 2000-2001*, Presented at the Infectious Disease Society of America Meeting 10/24-27/02, Chicago, IL (Poster #793).
- <sup>17</sup> Gregory L. Armstrong, Annemarie Wasley, Edgar P. Simard, Geraldine M. McQuillan, Wendi L. Kuhnert, and Miriam J. Alter, *The Prevalence of Hepatitis C Virus Infection in the United States, 1999 through 2002*, *Annals of Internal Medicine*, Volume 144, Number 10705 (May 16, 2006), at 707. See "Viral Hepatitis C Fact Sheet," National Center for HIV, STD & TB Prevention, Centers for Disease Control and Prevention (May 24, 2005).
- <sup>18</sup> Jules Levin, Joseph Bick, MD and Elizabeth Stubblefield, *Recommendations For Those On The Frontline Against Hepatitis C*, HIV & Hepatitis Education Prison Project (HEPP), Vol. 5, Issue 8 & 9 (Aug./Sept. 2002).
- <sup>19</sup> Brian L. Pearlman, MD, FACP and Joseph E. Paris, PhD, MD, CCHP, FSCP, *Hot Topics in Hepatitis C*, HIV and Hepatitis Education Prison Project (HEPP), Vol. 7, Issue 6 (June 2004).
- <sup>20</sup> *Healthcare in New York State Prisons, 2004-2007*.
- <sup>21</sup> Data on file at Women in Prison Project.
- <sup>22</sup> See *Clinical Manual for Management of the HIV-infected Adult, 2006 Edition*, Section 6: Disease-Specific Treatment, Hepatitis C Infection, AIDS Education and Training Centers, National Resource Center (July 2006).