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Women and HIV/Hepatitis C Fact Sheet

The high rates of HIV and Hepatitis C among incarcerated women in New York State spotlight the need both for expanded gender-specific services and programs and for heightened attention from correctional administrators, elected officials, service providers and community advocates.

HIV/AIDS

- Experiences that often lead to women's incarceration sex work, drug abuse, poverty, unemployment, and physical, emotional, and sexual victimization are also experiences that put women at risk for HIV and Hepatitis C infection.¹ An important indicator of HIV risk for women is a history of trauma associated with poverty and sexual abuse;² such histories are pervasive among women incarcerated in New York.³
- At year-end 2004, New York State had 4,500 inmates living with HIV the largest number of HIV-infected inmates in the country. New York's prisons house one-fifth of all inmates known to be HIV positive in the U.S.⁴
- New York State also has the largest number of HIV-positive women inmates of all prison systems in the United States 400 women at year-end 2004.⁵
- 14.2% of women in New York's prisons are HIV positive.⁶ The rate of infection among women inmates in New York is more than double the rate for male inmates (6.7%) and almost 100 times higher than the rate in the general public (.15%).⁷
- As rates of HIV are disproportionately high among African-American and Latina women in the general public, HIV disproportionately impacts women inmates of color.⁸
- New York has the largest number of HIV positive jail inmates in the country 1,359 in 1999.9
- 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.¹⁰
- The number of AIDS-related deaths in New York's prisons dropped 92% from 1994 (244) to 2004 (20).¹¹

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.¹² 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.¹³ People who are co-infected with HIV and HCV sometimes experience an accelerated progression of HCV.¹⁴
- 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.¹⁵
- 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%).¹⁶
- HCV is especially prevalent among women incarcerated for crimes related to sex work and drug addiction.¹⁷
- 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 living with HIV for HCV.¹⁸

Identification and Treatment in Prison

- Many women in New York's prisons either do not know or have not revealed their HIV and/or Hepatitis C status: of the combined female inmate population in four of the five all-women's correctional facilities in New York State (Bedford Hills, Albion, Taconic and Bayview), only 8.5% (compared to the estimated 14.2%) had been determined to be HIV positive and only 11.5% (compared to the estimated 23.1%) had been determined to be infected with HCV.¹⁹
- Just under 62% of the women identified as being HIV positive at Bedford Hills, Albion, Taconic and Bayview are on an HIV treatment regimen. Only 4% of women inmates identified as living with HCV at these facilities are on treatment for HCV.²⁰ (*Note: not all people infected with HCV are appropriate candidates for treatment.*)²¹

¹ 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).

² See note 1. See Hilary Beard, Getting Real: Black Women Taking Charge in the Fight Against AIDS, Black AIDS Institute (December 2005), at 17.

³ 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).

⁴ Laura M. Maruschak, *HIV in Prisons, 2004*, Bureau of Justice Statistics, U.S. Department of Justice (November 2006), at 2.

⁵ *Id.*, at 3.

⁶ Id.

⁷ Id., at 1 and 3. 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).

⁸ 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.

⁹ Laura M. Maruschak, HIV in Prisons and Jails 1999, Bureau of Justice Statistics, U.S. Department of Justice (July 2001), at 8.

¹⁰ New York City Department of Health, Bureau of Disease Intervention Services, *HIV Seroprevalence Update 1999* (June 2001), at 126.

¹¹ See note 4, HIV in Prisons, 2004, at 8, and Peter M. Brien and Allen J. Beck, HIV in Prisons 1994, Bureau of Justice Statistics, U.S. Department of Justice (March 1996), at 5.

¹² 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).

¹³ 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.

¹⁴ 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).
 ¹⁵ 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). See John A. Beck, Esq., Health Care in New York State Prisons, Testimony Presented Before the Standing Committee on Health and Corrections of the New York State Assembly (April 30, 2004), at 17.

¹⁶ *Id.* 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 also* "Viral Hepatitis C Fact Sheet," National Center for HIV, STD & TB Prevention, Centers for Disease Control and Prevention (May 24, 2005).
¹⁷ 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).
¹⁸ 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).
¹⁹ Data on file at Women in Prison Project.

²⁰ Id.

²¹ 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).