

HOLLA: Developing an HIV/Hepatitis C/STD Prevention Intervention for Men Recently Released from Prison

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Project Description: This is an HIV-prevention intervention project aiming to reduce risk and increase testing among men recently released from prison. In the formative research phase of this project, we engaged men and their potential service providers in in-depth qualitative interviews to develop an understanding of their experiences and their community.

In the intervention phase, we have used the information gained through the qualitative interviews as a guide to choosing and tailoring a proven-effective case management intervention model so that it can address the unique HIV prevention and health care needs of these men. We are currently working to implement and evaluate the tailored intervention in Oakland and Richmond, California. The intervention is modeled on the Healthy Living Project and uses a 5-session design to help improve coping effectiveness, reduce HIV risk and increase HIV testing and receipt of social services.

Significance: Through consensual and nonconsensual sex with other men and needle sharing, men in prisons may be exposed to HIV. As a result, when they leave prison, these men require services for HIV diagnosis, prevention and treatment that are accessible, appropriate and tailored to the unique issues these men face. Little is known about the best ways to tailor services in light of personal and community-based issues facing men after release, including whether prison-related experiences influence HIV risk behavior on the outside.

Interesting Findings: Among the 27 men interviewed in the formative phase, all but one was African American. Men's ages ranged from 20 to 62. All men were released on parole and across the sample there was a mix of severity in the crimes committed and so in the "level" on which they were housed in prison. The average length of stay among the men interviewed was 13 months (with a range from 1 month to 7.5 years). While all men interviewed were living in Oakland, they had been released from a range of California facilities (for example, the Vacaville medical facility, San Quentin, Sierra foothills firecamps, San Luis Obispo, Soledad, etc.). At the time of the interviews, men were living in diverse housing arrangements (for example, with common-law wives, in treatment centers, in half-way houses, on the street, etc.). Our analysis focused on factors influencing HIV risk inside prison and in the community, on HIV prevention and other services needed and on men's advice for intervention development and tailoring.

We discovered a number of factors influencing HIV risk and service needs. Inside prison, risk was influenced by environmental factors (such as violence and prison structure), social network factors (such as gang membership, cell mates, friends/acquaintances inside) and individual factors (such as race, age, physical size, substance use, appearance, education level). Only one man in our sample was willing to talk openly about his MSM experience, yet all men said that it happened to others. Talking about risk was complicated by secrecy, by issues of sexual and ethnic identity and by how men defined sexual experiences relative to coercion. According to HOLLA participants, risk occurs among men who: are in prison for longer periods of time; use and need drugs; have sex with men (and may or may not hide their identity); and/or are victims of sexual assault. Additional factors influence risk once men are released and we are using these findings to tailor our intervention.

Project End Date: November 2007