Expanded Peer-Based HIV/AIDS Prevention Education
Programs in Illinois Prisons

Illinois has a long track record of providing HIV/AIDS prevention education in its correctional facilities. Recognizing the importance of these services for prison populations and the community at-large, the Illinois General Assembly and Governor Rod Blagojevich approved increased funding in FY06 to expand the availability of HIV prevention education in prison facilities. The Illinois Departments of Public Health (IDPH) and Corrections (IDOC) have a unique opportunity to build on past successes and further improve the state’s programs. Based on conversations with program administrators in five states, the AIDS Foundation of Chicago (AFC) offers the following set of recommendations to guide the expansion of prison-based HIV prevention education programming.

State public health and corrections officials should work together to:

- Integrate the peer-based HIV prevention education program in prison facilities and the community re-entry program for HIV-positive individuals. Such integration may include joint marketing of these services for all new inmates at orientation based on a successful integration model utilized by the state of New Jersey.
- Increase the number of peer educators. The ratio of educators to inmates in Texas is 1:271 vs. 1:375 in Illinois.
- Involve local community-based organizations (CBOs) in training peers, meeting regularly with peers (weekly if possible) to trouble-shoot and offer support, and ensuring that the program is working. CBOs’ roles in other states (such as California, Texas, New York, New Jersey, and Oklahoma) include:
  - Training peer educators (initial and refresher courses)
  - Conducting periodic groups for peer educators (check-ins, etc.)
  - Organizing conferences for peer educators
  - Organizing health fairs for inmates
  - Running support groups for HIV-positive inmates or newly positive inmates

CBO staff undergo extensive training about prison safety, rules, and regulations that must be strictly enforced. CBOs are made aware that failure to follow rules will result in permission to enter facilities being revoked.

Other best practices Illinois should consider:
- In some prisons in New York and California, CBO staff are permanent on-site. In others, they are roving and come in once a month or as needed.
CBOs should be geographically close to prisons. Texas now has seven CBOs around the state working with the peer education system.
A statewide coordinator is needed as a liaison between prisons and the CBOs. The coordinator is an ambassador to wardens for the program, collects data, ensures that the curriculum and program are uniform statewide, oversees CBOs, and makes sure the program is running smoothly.

- Peer educators should be Spanish-speaking where needed, and classes should be offered in Spanish if appropriate for the prison’s population. Materials should be available in Spanish (examples: California and New York).
- The program should be comprehensive. In some prisons in New York, all entering inmates attend a week-long HIV/AIDS prevention education program.
- The program should include modules on other health problems, such as all forms of hepatitis.
- Programs should be tailored for either men’s or women’s prisons.
- Peer educators should be creatively recognized for their work, for example, by holding graduation sessions.
- Every outgoing inmate should be encouraged to attend a session on HIV/AIDS, including a discussion of the re-entry program and the importance of using condoms in the community. The offer of voluntary HIV testing and a discussion of services for HIV-positive inmates should be included.
- Pre-release programs should include a discussion of the importance of condom use when leaving prison. A California program to educate departing prisoners on condom use outside the prisons was very successful, with 37% of participants using condoms after leaving compared to 19% of non-participants. We urge that IDOC provide inmates with condoms in their departure bag.
- We ask that the IDPH and IDOC use funds to print materials—including low literacy and bi-lingual materials—for inmates prior to HIV testing and in visiting rooms. These are requirements of the African-American HIV/AIDS Response Act, although they have not been funded.
- IDPH and IDOC should build in statewide evaluation for the entire $2 million HIV and corrections appropriation with uniform process and outcome indicators.

For more information on these recommendations, please contact AFC’s Director of State Affairs John Peller at jpeller@aidschicago.org or 312-922-2322.