Testimony - Condoms in Prisons

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Springfield, IL

More than 7.3 million men and women were under correctional supervision in the nation’s prisons or jails or on probation or parole at year end 2007, the U.S. Department of Justice’s Bureau of Justice Statistics (BJS) announced on December 11, 2008.

About 3.2 percent of the U.S. adult population, or one in every 31 adults, was incarcerated or under community supervision at the end of 2007.

The U.S. Department of Justice found that in 2006 the AIDS rate among U.S. prisoners was three times that of the general population. Given this fact, there has been and continues to be speculation that prisons are a breeding ground for HIV infection because some of the prisoners are engaging in unsafe sex, and drug injection practices while “on the inside.”

It is mind boggling to conceive that there are 2.3 million prisoners in American’s prisons or jails; 45% are African-American males.

Once released from prison, individuals with high risk factors for HIV will return to African-American communities seeking to reunite into the social fiber of society; this may partially explains why a substantial share of the disparity in HIV/AIDS is among heterosexual African-American women.

Nevertheless, HIV risk-reduction interventions, such as condoms, are not available to the vast majority of prisoners. Policies on HIV testing and education vary widely between states and facilities.

Condoms are banned or unavailable in 95 percent of the country’s prisons; only the state prison systems of Mississippi, Vermont, Connecticut, and South Dakota makes them available, as do the county jail systems of Philadelphia, New York City, Washington D.C., San Francisco and Los Angeles.

Despite scientific evidence that shows that proper and consistent use of condoms greatly reduces HIV risk, the issue of condom access continues to be highly politicized, particularly in the correctional context.

On Oct. 15, 2007, California Gov. Arnold Schwarzenegger vetoed the latest “prison condom bill” to hit his desk. But this time he directed the California Department of Corrections and Rehabilitation to determine the “risk and viability of such a program” by establishing a pilot program.
In San Francisco, inmates have had access to condoms since 1987, and in the fall of 2006, the Center for Health Justice conducted a study where a condom dispensing machine was installed.

Preliminary data analyses indicate that inmate self-report of sexual activity did not increase during the study period. In addition, the custody staff reported no increase in reported sexual activity or any other security problems related to increased condom access.

The State of Illinois remains steadfast in its stubbornness to act outside of their conservative point of view, which sends a strong indication that the African-American community is such a disenfranchised population in the State of Illinois that politicians would rather be politically correct about not providing condoms in the prison system, than to be politically responsible for the well being of the general population.

• Of the reported 32,685 people living with HIV/AIDS in Illinois, 16,272 are African American.

The African-American communities are in dire need of action, we cannot sit idly by and allow politicians to waste precious time with the lives that they were elected to represent and protect.

When politicians allow tens of thousands identified as being high risk for HIV (the prison population) go without access to a simple and harmless life-saving device (condoms), they fail to prevent a direct collision with the catastrophe of HIV/AIDS.

As a Reverend, I understand the mentality of those who feel that to allow condoms in the prison system is to condone behavior that may go against their moral standards. However, this is not about you! This is about addressing a dangerous, life-threatening situation that exists among us.

Therefore, I respectfully request that you remove yourself from the equation and allow your personal feeling to take a back seat in your rationale. The only thing that should be of any interest to you is all of the innocent lives that will be caught up in the human drama of HIV/AIDS if you fail to address this matter appropriately.

Yes! I hear the cry of those that oppose the legislation for condoms in prisons; but it’s no different from the cry of those that opposed seatbelt legislation. Nevertheless, your duty to protect the public safety overwhelmed the personal cries of emotion.

You passed a law without concern for what a person may do to cause an accident, but rather, if an accident should occur, a safety device would be available to protect those involved.

In that spirit, I strand before you and pray that you use the same rational approach to allow prisoner access to the safety devices of condoms, just in case they decide to drive recklessly and destroy the life of an innocent passenger.
Either we properly and intelligently address this social threat on the inside of the prisons or suffer the consequence on the outside in our neighborhoods, homes, and families.

Thank you,

Rev. Doris J. Green, Director of Correctional Health & Community Affairs

AIDS Foundation of Chicago