

# Study examines factors of inmate relationships during incarceration and STI/HIV prevention

April 10 2017

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HIV incidence among African-American men is nearly eight times that of white men, and twice that of Latino men. Incarceration, which disproportionately affects African-American men, is thought to be a factor in this wide disparity. There have been strong, independent associations drawn between history of incarceration, sexual risk behaviors, and sexually transmitted infection (STI). However, research on the sex partnerships of incarcerated African-American men and the types of partnerships most likely to protect against STI/HIV-related sex risk is limited.

To address this need, Dr. Maria Khan, PhD, MPH, Associate Professor in the New York University School of Medicine's Department of Population Health and affiliated researcher of the New York University Rory Meyers College of Nursing, Center for Drug Use and HIV Research (NYU CDUHR) conducted the study, "The Committed Inmate Relationships During Incarceration and STI/HIV Prevention," published in the *Archives of Sexual Behavior*. The study's aim was to characterize the relationships of incarcerated African-Americans and the influence of those characteristics in protection against STI/HIV risk when in the community, when STI/HIV transmission risk is greatest.

"We identified subgroups of participants with distinct relationship profiles and measured associations between relationship characteristics and multiple partnerships of inmates and their partners in the six months

before incarceration," said Dr. Khan.

The data were drawn from Project DISRUPT, a cohort study of African-American men (N = 207) being released from prison in North Carolina who were in committed heterosexual partnerships at prison entry.

The researchers stress the importance of understanding these relationships because some correctional settings do offer family-strengthening programs for inmates and their committed partners, however most programs are designed for married couples.

"Unfortunately while a majority of inmates have committed partners, only a minority are married said Dr. Khan."

To better understand the most common kinds of relationships of African American men who enter prison, Dr. Khan and her team interviewed African-American male inmates in committed relationships at the time of prison entry, assessing demographic/socioeconomic characteristics and relationship quality indicators.

They found the average committed relationship was three years. The vast majority were in partnerships characterized by stability; they lived together, helped one another financially, raised children together, reported relationship satisfaction, and were together for multiple years or longer. Satisfaction indicators—versus length, marriage, or cohabitation—were the strongest independent correlates of inmates' and partners' multiple partnerships. Pre-incarceration economic deprivation, mental disorder symptoms, substance use, and violence in relationships were associated with dissatisfaction/instability.

"Being in a marital or non-marital [partnership](#) with high levels of relationship satisfaction - which was a majority of committed partnerships—was associated with protection against non-monogamy for

inmates and their partners," notes Dr. Khan.

Additionally, the results highlighted many of the barriers to maintaining the non-marital relationships such as: limited phone time; distance from prison; expense of visiting; and child-care expenses.

"The study's findings highlight a need for criminal justice policies and programs that support the partnerships of inmates by reducing barriers to maintaining healthy ties during incarceration, strengthening relationship skills during incarceration, and addressing factors underlying dissatisfaction/instability, STI/HIV risk, and violence," said Dr. Khan.

The researchers note that the most significant limitation of this study was that they were unable to interview the female partners of the study participants.

This study begins to fill an important research gap and suggests that family-strengthening programs and couple-level interventions that improve relationship skills and address STI/HIV risk are appropriate for inmates in a broad range of marital and non-marital committed partnerships.

"Prison-based programs designed to maintain healthy partnerships, strengthen relationship skills, and reduce HIV risk-taking and violence in relationships are warranted and should be targeted to both marital and non-marital partnerships," said Dr. Khan. "Programming also should address the poverty, mental illness, and substance use factors that threaten [relationship](#) satisfaction/stability and increase HIV risk."

Improved understanding can inform expansion of correctional facility-based family-strengthening programs to a greater proportion of protective partnerships and HIV risk reduction programs to partnerships vulnerable to sex risk.

**More information:** Maria R. Khan et al. The Committed Intimate Partnerships of Incarcerated African-American Men: Implications for Sexual HIV Transmission Risk and Prevention Opportunities, *Archives of Sexual Behavior* (2017). DOI: [10.1007/s10508-016-0916-y](https://doi.org/10.1007/s10508-016-0916-y)

Provided by New York University

Citation: Study examines factors of inmate relationships during incarceration and STI/HIV prevention (2017, April 10) retrieved 9 April 2024 from <https://medicalxpress.com/news/2017-04-factors-inmate-relationships-incarceration-stihiv.html>

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