

Philadelphia FIGHT: Offering Comprehensive Care to Reduce Recidivism

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Chronic disease impacts nearly 117 million people in the United States, equating to approximately one in every two adults. The challenges posed by these diseases include great financial strain, social stigmatization and the progressive deterioration of quality of life. While these challenges are incredibly difficult for many people who are learning to modify their lives to accommodate changes in health, they are particularly complicated for those living in low-income and crime-ridden communities. Among these chronic, life-altering diagnoses is HIV/AIDS, which presents its highest incidence rate in the incarcerated community. Compared with the general population, incarcerated individuals have greater contributing risk factors that are associated with acquiring and transmitting HIV, including drug use, commercial sexual behavior, untreated mental illness and low socioeconomic status. By virtue of numerous social determinants of health prior to, during and post-incarceration, prisoners are also significantly more likely to experience poor health outcomes and carry the highest burden of chronic disease compared with the general public (Binswanger, Krueger, & Steiner, 2009).

Each year, approximately 650,000 people are released from prison or jail in the United States, and a staggering two-thirds will be rearrested within three years of release. These arrests are typically for low-level and non-violent crime, and while the crimes aren't justifiable, they are often committed because the prisoner has adjusted poorly to life beyond bars. Unsuccessful reentry may be attributed to numerous factors, many of which are testament to the destitute and disenfranchised communities from which re-offenders came. Some key indicators of successful reentry into the community include establishing employment and housing and positive mentorship. However, the importance of addressing the medical needs of these individuals is sorely overlooked, and the consequences of failing to do so rarely go unseen.

Oftentimes, many of the social support resources needed for successful reentry are scattered or unsolicited. Despite a continual increase in recidivism, few organizations have recognized and addressed the need for a comprehensive care facility for the formerly incarcerated. For nearly 25 years, however, Philadelphia FIGHT has been offering just that. Beginning in 1990, Philadelphia FIGHT has been providing informed, culturally competent medical care to people living with HIV/AIDS, regardless of ability to pay or life circumstances. In addition to the quality medical care provided, Philadelphia FIGHT has rallied its resources to impart

consumer education, advocacy and social services and to promote continuing research on HIV/AIDS.

With so many challenges placed upon an already burdened population, Philadelphia FIGHT restores the sense of community support needed to improve care, prevent disease transmission and potentially prevent recidivism. Through a network of well-developed health centers, the organization embodies comprehensive care that helps to address the social, spiritual and medical needs of a community in desperate need of attention. One of its services is the Institute for Community Justice (ICJ), which was founded specifically to reduce the number of people in prison living with HIV. Furthermore, the ICJ recognizes the long-lasting impact of mass imprisonment on communities and provides programs to empower, educate and support those who are most affected. Once released from prison or jail, community members are offered various educational programs by the Reentry Center, which offers career-building skills as well as opportunities for creative expression.

While the key to any successful medical intervention is education, many medical centers simply treat the symptoms rather than the source. For the community advocates at Philadelphia FIGHT, the care providers recognize the importance of holistically approaching HIV treatment and prevention. A patient may visit the Jonathan Lax Treatment Center in Centre City Philadelphia for client-centered primary care, but he or

she will soon be enveloped by the multifaceted approach to which FIGHT attributes its success. Among its many programs and services are behavioral health, community health centers, HIV counseling and testing, faith initiatives and youth programs to benefit the local community. Of particular note are the AIDS Library, the only public library in the world dedicated specifically to HIV/AIDS, and Clínica Bienestar, one of the city's first Spanish-speaking HIV clinics. Another program, called Project TEACH (Treatment Education Activists Combating HIV), focuses its efforts on positive transitions into the community after imprisonment, including courses on HIV education, stress management and wellness and community support services that are specifically designed for the formerly incarcerated. In an effort to make a more significant impact, the organization also participates in a citywide AIDS Education Month in June. These innovative programs and services are well supported by a team of health professionals, social service advocates and volunteers recruited by AmeriCorps VISTA volunteers through a partnership with Lake Effect Leaders, a collaborative project between Allegheny College, Edinboro University, Gannon University and Mercyhurst University. Lake Effect Leaders employs the VISTAs, who place recent college graduates for a year in local nonprofit organizations to focus on community empowerment and breaking the cycle of poverty.

Despite this seemingly intuitive solution, the

comprehensive nature of the Philadelphia FIGHT is far from ordinary. One of the many challenges presented in all aspects of health care in the United States is disjointed care and poor interdisciplinary communication. By having a one-stop shop to centralize all aspects of care, including social services designed specifically for easy acquisition, the clients are capable of managing their care independently. Their doing so also instills in them a sense of self-efficacy, a quality that is often lacking in formerly incarcerated individuals. This change of mind-set is not an unfamiliar notion to those who serve with Philadelphia FIGHT. Not only does this organization work to empower individuals to rebuild their lives after imprisonment, it also provides great hope to patients who were once faced with a less-than-hopeful diagnosis.

The innovation exemplified by the social advocates of Philadelphia FIGHT is not difficult to replicate in other major cities, and certainly would benefit thousands of other individuals facing difficult life circumstances. Programs similar to FIGHT have the opportunity to significantly decrease health care expenditures on chronic disease, as well as reduce recidivism by creating better-acclimated community members. While the resources provided in these care facilities are likely present throughout the country, they often are so inaccessible that they simply are not reaching the target populations. The opportunities to coordinate care more effectively are boundless, but without the leadership and funding in

place, the desired health outcomes cannot be achieved. For a better community in regard to the financial, medical and social measures of success, more comprehensive care facilities should continue the brave fight for justice and improved health.

Reference

Binswanger, I. A., Krueger, P. M., & Steiner, J F. (2009). Prevalence of chronic medical conditions among jail and prison inmates in the USA compared with the general population. *Journal of Epidemiology and Community Health*, 63(11), 912–919. doi: 10.1136/jech.2009.090662.