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Implementing Community-Led Integrated HIV, HCV and Syphilis Testing in Polish Prisons: Experience from Foundation for Social Education

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INTRODUCTION & OBJECTIVES

People in prisons carry a disproportionate burden of blood-borne infections[1], yet access to voluntary testing remains limited. European guidance recommends actively offering testing to all people in prison[2].

In 2025–2026, the Foundation for Social Education (FES), in partnership with the Polish Prison Service, implemented a **mobile, NGO-led integrated rapid testing programme for HIV, HCV and syphilis**.

Objective: to evaluate the feasibility, acceptability and diagnostic yield of the programme as a scalable model to expand testing and linkage to care in prison settings.

METHODS

- **Setting:** prisons and remand centres in the Mazowieckie and Łódzkie regions of Poland, December 2025 – June 2026.
- **Delivery:** multidisciplinary NGO teams on outreach visits, in close collaboration with prison medical staff.
- **Testing:** voluntary, named finger-prick rapid screening tests for HIV, HCV and syphilis, preceded by brief pre-test counselling.
- **Indicators:** testing uptake, positivity, previous diagnosis and operational feasibility.



RESULTS

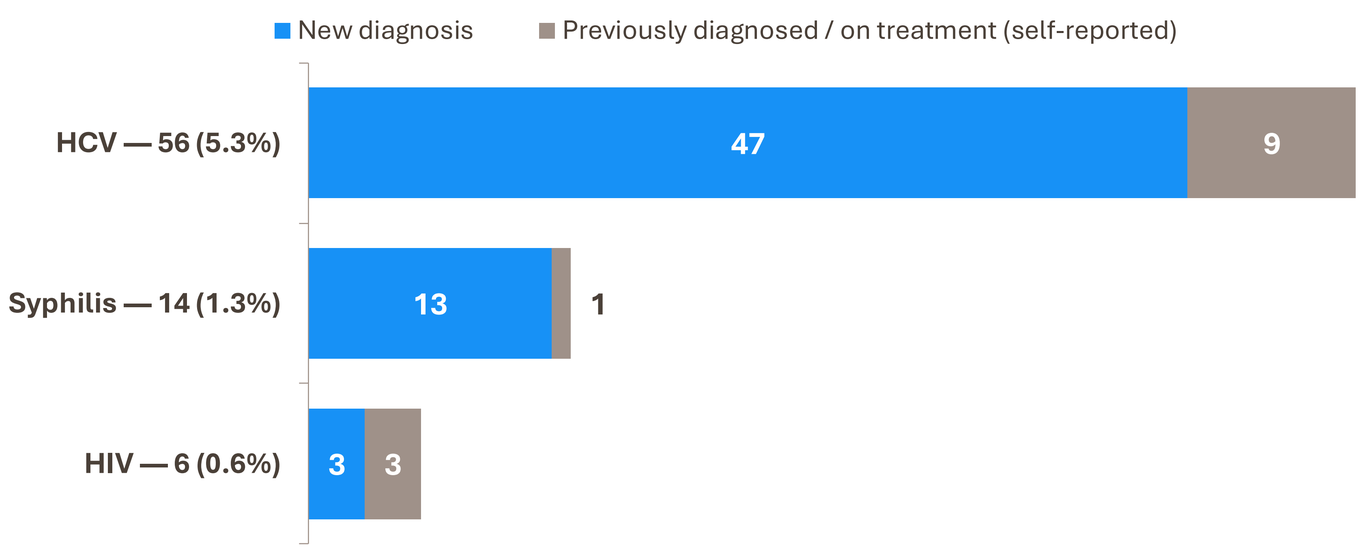
13
penitentiary units

21
outreach visits

1,052
people tested

977 / 75
men / women

Reactive results by infection: new vs previously known diagnoses



n = 1,052 people tested; % = share of all people tested. Source: FES prison testing programme, Dec 2025 – Jun 2026.

63
of 76 reactive results were new diagnoses

- HCV: **47 of 56** previously undiagnosed; 9 reported previous diagnosis or treatment.
- All HIV-positive participants were men; HCV and syphilis were found in both men and women.
- Demand exceeded capacity: repeat visits requested, some units reported **up to 300 volunteers**.
- Prison staff cooperation enabled efficient implementation in all units.

CONCLUSIONS

- A community-led mobile testing model delivered by an NGO is **feasible and highly acceptable** within the Polish prison system.
- Integrated testing identified a **substantial number of previously undiagnosed HCV and syphilis infections**, reaching an underserved population in partnership with correctional services.
- Expanding routine community-based prison testing, combined with **linkage to treatment**, could substantially strengthen national hepatitis and HIV elimination efforts.

REFERENCES

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2. European Centre for Disease Prevention and Control, European Monitoring Centre for Drugs and Drug Addiction. Public health guidance on prevention and control of blood-borne viruses in prison settings. Stockholm: ECDC and EMCDDA; 2018.

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