Building Bridges: Making the Connection between Public Health and Corrections

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Who is the person behind the voice?

- PHS Officer, Senior Public Health Advisor
- Certified Corrections Nurse Manager
- Previous work experience with USMS, FBOP, IHS, County Jails, State Prisons
- Professional: ACA, ASCA, AJA, NCCHC,
- Agency: DHHS, DOJ, BJS
Investing in the health of the incarcerated community is an investment in a safer, healthier community.
Opportunity & Responsibility

Both public health and correctional health are charged with considering the health of the (their) population as well as considering the health of the individual and the environment.
Organization: Multiple, inter-related systems

- **Federal:** Jurisdiction over federal crimes
  - Prisons (primarily); some jail space, other space rented.
  - Probation
  - Post-prison supervision (term of supervised release)

- **State:** Jurisdiction over state crimes
  - Prisons
  - Parole
  - Combined prison/jail

- **Local:**
  - Jail
  - Probation/Parole
U.S. Correctional Landscape

• Institutional corrections
  – Jails: Multiple functions; hold defendants awaiting trial or sentencing; hold sentenced offenders; serving a sentence that is usually less than 1 year, or awaiting transfer to other facilities after conviction. Approx. 50% are out in 48hrs.
  – Prisons: Generally hold sentenced offenders; confinement in a state or federal correctional facility to serve a sentence of more than 1 year average sentence: 12 years; average length of stay: 25-30 months.

• Community corrections
  – Probation: Type of sentence or sanction; supervision in the community, generally as an alternative to prison or jail.
  – Parole: Distinction between supervision (post-prison) and release decision.

Source - http://bjs.ojp.usdoj.gov
Total Correctional population

• The U.S. incarcerates about 1 out of every 100 adults (Pew, 2008), about 1 in every 47 adults are under community supervision (probation and parole) (Glaze, Bonczar, & Zhang, 2010), so in other words 1 out of 31 adults are under some form of correctional supervision (i.e., prison, jail, probation, and parole) (Pew, 2009)

• Specifically, 7.3 million adults are under some form of correctional supervision (Glaze & Bonczar, 2009)

• About 1.6 million of these individuals are incarcerated in state or federal prisons (West & Sabol, 2010).

• About 750,000 individuals are incarcerated in local or county jails (Minton, 2011)
Individuals under Community Supervision

- 5.0 million of these individuals are under community supervision (Glaze, Bonczar, & Zhang, 2010)
  - About 4.2 million of these individuals are under probation supervision
  - About 800,000 of these individuals are under parole supervision
What’s the difference between Probation and Parole?

• “Probation is a court-ordered period of correctional supervision in the community generally as an alternative to incarceration. In some cases probation can be a combined sentence of incarceration followed by a period of community supervision” (Glaze, Bonczar, & Zhang, 2010, p. 1).

• “Parole is a period of conditional supervised release in the community following a prison term” (Glaze, Bonczar, & Zhang, 2010, p. 1).
Completion Rates

- 65% of probationers successfully completed or received early dismissal from probationary supervision (Glaze, Bonczar, & Zhang, 2010)
  - 16% of probationers were incarcerated for subsequent violations or new crimes
- 51% of parolees completed their supervision or received early dismissal
  - 14% of parolees were incarcerated for subsequent violations or new crimes
- Among about 300,000 prisoners released in 15 states in 1994, 68% were rearrested within 3 years, about 47% reconvicted, and 25% resentenced to a subsequent prison term (Langan & Levin, 2002)
Correctional Populations: Jails vs. Prisons

Prison and Jail Populations at a Single Point in Time:

Approximately twice as many offenders are in prison than jail on any given day.
Number of Individuals Discharged from Prisons and Jails across One Year

Approximately 95% of the 10 million offenders discharged from the criminal justice system each year are released from *jails*.
Health Needs

• Substance Abuse
  – 85% of jail detainees are substance-involved (CASA, 2010)
  – 70% of jail detainees have symptoms of mental disorders, 16% considered serious mental illness (James & Glaze, 2006)
  – 65% of prisoners meet diagnostic criteria for abuse of alcohol or other drugs, seven times the rate of the general population (CASA, 2010)
  – Less than 20% of inmates with drug dependency receive formal treatment (TRI, 2011)

• Mental Health
  – Two-to-three times as many people with mental illness in the criminal justice system as in the general population (Hammett, Roberts, & Kennedy, 2002)
  – 16% of state prison and local jail inmates have a serious mental illness (Ditton, 1999)
  – Though we have talked mostly about adults, mental illness is particularly prevalent with juvenile offenders at 50 – 75% with 20% believed to suffer from serious mental illness (OJJDP, 2001)
Drug-crime Nexus

- It is well known a relationship exist between substance abuse and criminal behavior, drug abusers are 3-4 times more likely to commit a crime than non-drug-abusers (Bennett, Holloway, & Farrington, 2008)
- Substance abuse involvement has been implicated in 78% of individuals serving time for violent crime and 83% of those incarcerated for property crimes (CASA, 2010)
Co-occurring and Medical disorders

• Co-occurring disorders are prevalent with many substance abusers also suffering from mental health issues.

• Co-occurring disorders have been found to range from 13% to 74% of inmates (TRI, 2011)

• Other medical disorders also exist as many inmates lacked preventive health care prior to incarceration (TRI, 2011), with some estimates around 40% (Maruschak, 2008)
Co-occurring and Medical disorders

– Inmates are more likely to suffer from hypertension, arthritis, cervical cancer, and hepatitis (Binswanger et al., 2009)

– AIDS cases of incarcerated individuals in state and federal prisons is twice the rate of the normal population (Maruschak & Beavers, 2009) with 15% being diagnosed with hepatitis and HIV/AIDS; 1.5% diagnosed with HIV/AIDS specifically

– Compared to the general population, inmates released to the community are twice as likely to die from cardiovascular disease and cancer (Binswanger et al., 2007).
The Bottom-line

- Despite high incarceration rates, most people (over 90%) in prison will return to the community

- People in prison (as a population) are relatively unhealthy; many are stabilized while incarcerated

- People come into prisons with higher rates of infectious diseases (e.g. HIV, Hepatitis C, Tuberculosis)

- Prison medical care and health programs represent an opportunity to improve community health
Health Care in Corrections

• In the US, the legal foundation for reasonable medical care behind bars is the case of *Estelle vs. Gamble* in 1976.
  – Prisoners entitled to: 1) access to care for diagnosis and treatment; 2) a professional medical judgment; and the administration of the treatment prescribed by the physician.

• Access to health care
• Health screening
• Health assessment
• Mental health screening & evaluation
• Sick call
• Chronic Care clinics/Infirmary Care/hospice service.
JUSTICE, HEALTH & PREPAREDNESS

• A Need for Connectivity & interconnectivity
• Important to have an understanding of Institutional & Organizational Policies, practices and norms.
• Awareness of structural challenges
• Awareness of ethical challenges related to confidentiality and privacy.
“Public health is public safety and public safety is public health.”

“Correctional Health Care is Public Health Care.”
Barriers & Challenges

- Lack of Data Across Programs and Jurisdictions
- Cultural Differences Among the Delivery Systems
- Competing priorities and everyone has their own set of rules
- Perceptions of responsibility
- Inmates - Not a Public Health System Priority
- Public Health - not a priority for corrections

Funding & Strained resources
“As a rational society, what can we do for public benefit through attention to our captive population, a population that is disproportionately minority, under-educated, with a high burden of risk and illness.”

Bob Greifinger
Issues to Consider

• Impact of public health policy on incarceration
• Public health opportunities - to enhance the safety and health of the community
• Collaboration essential for Corrections, Public Health and Community Health
• Missions of public health and corrections agencies are complementary
• Ethical and legal obligations
• Role of liaisons
Questions and Answers