Incarceration and Infection Risk

TOPIC BRIEF

The United States, with 2.2 million incarcerated people at the end of 2016, has the highest prison population compared to any other country in the world. The confined spaces, restricted movement, near-constant close contact, and limited medical care of a prisoner's cell have exacerbated the prevalence of HIV, hepatitis C virus, infections, tuberculosis, and Covid-19 in such facilities. The CDC's advice for social-distancing and health measures to flatten the curve are just not possible within incarcerated populations. In some states, the cramped and overcrowded prison quarters have violated the 8th amendment of "cruel and unusual punishment" according to the ACLU. Other realities that inmates must face are a small number of bathrooms, sinks broken or not in use, and no access to soap. Handcuffs prevent inmates from covering mouths to prevent spread of bodily fluids when sneezing or coughing. Restrictions, based on worries of high alcohol content resulting in the possibility of abuse, prevent CDC's recommendations for alcohol-based hand sanitizer. With limited ability to protect themselves, prison populations are increasingly vulnerable to transmissions of diseases between detainees. As of May 3, 2020, 1,926 people in custody and 250 staff members have tested positive, including 38 deaths on record. In Marion State correctional facility, 80% of inmates tested positive for Covid-19. Moreover, 50% of incarcerated persons have at least one chronic disease and more than 80,000 incarcerated people are older than 60 years—heightening their risk.

QUESTIONS

1. What changes have been currently made to the prison system to prevent covid-19? As a starting point, research home confinement/decarceration and suspensions of vistations.
2. What reforms can be made to alleviate the overflowing prison systems in the U.S. and reduce the burden of correctional systems and community health care systems?
3. How are realities faced by inmates a risk to prison health, public health, and public safety?

CASE STUDY: H1N1 2009 Virus

The 2009 H1N1 Influenza Virus, also known as swine flu, devastated the prison population, with filthy cells serving as incubators of this disease. On June 11, 2009, The WHO declared a global pandemic as the CDC created guidelines for preventing its spread. Yet health officials remained concerned about the risk of outbreaks in prisons, especially through the shift changes of employees causing potential cross-contamination. Despite widespread infections in Kentucky, Idaho, Nevada, Pennsylvania, New York, Maine, South Carolina, Massachusetts, Arizona, Illinois and Tennessee, the vaccine 2020 was never received in small jails despite high-risk persons, such as pregnant women.

Research more about this 2009 pandemic and see how it applies to the 2020 pandemic.

HOW TO HELP

See: https://www.innocenceproject.org/coronavirus-covid-19-jail-prison-help/ for letters templates to governors, petitions, bail funds, and other resources.