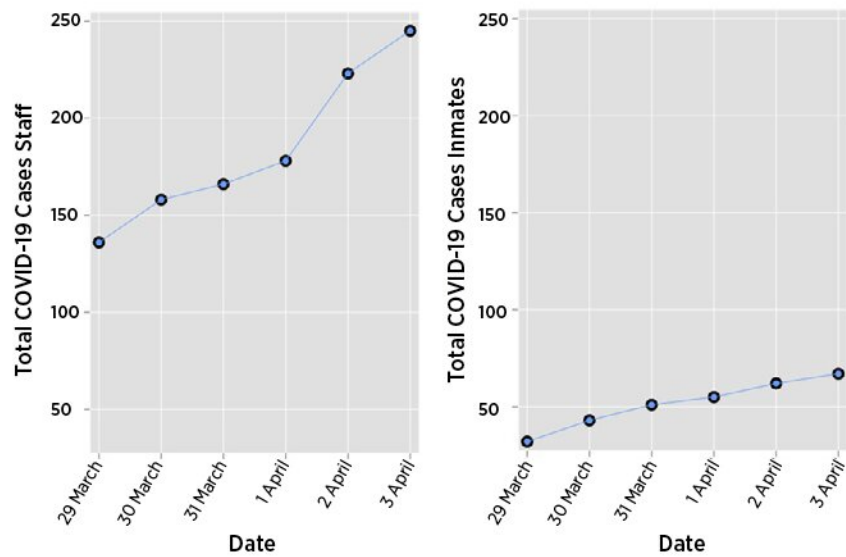


First research findings measure COVID-19 prevalence in U.S. prisons, jails

April 13 2020

**FIGURE 1:
CUMULATIVE CASES OF COVID-19 AMONG STAFF
AND INMATES**



Credit: Harvard Kennedy School

A collaboration between researchers from Harvard Kennedy School, Harvard Law School, and the National Commission on Correctional Health Care (NCCHC) has yielded the first detailed survey on the effects of the coronavirus pandemic on correctional facilities in the

United States.

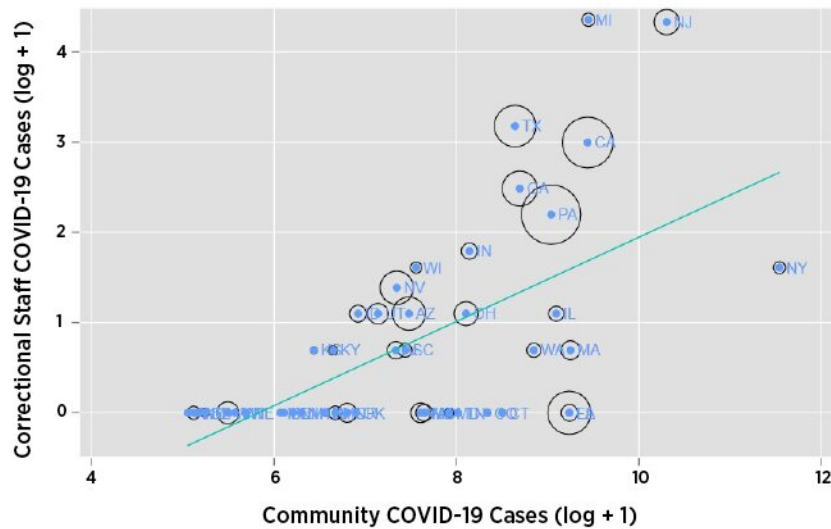
The ongoing survey has so far collected data from more than 320 facilities housing approximately 10 percent of the country's inmates across 47 states. While not necessarily representative of all correctional institutions, the results nonetheless are vital for policymakers responding to the pandemic in their own states and communities.

Among the key findings:

- Correctional [staff](#), like the [general population](#), are at risk for contracting of COVID-19 infection, with a higher infection rate than inmates.
- Many protocols call for screening inmates and staff for COVID-19 on a regular basis, but a significant fraction of facilities still lack access to lab testing.
- The nationwide shortage of personal protective equipment (PPE) as well as ancillary supplies (such as cleaning products and thermometer probes) is also a problem for correctional health care operations.

The survey was devised as a collaboration between Marcella Alsan, professor of public policy at Harvard Kennedy School, Professor Crystal Yang from Harvard Law School, and the National Commission on Correctional Health Care (NCCHC). The NCCHC sent the initial survey and a daily follow-up questionnaire to jails, prisons, and juvenile detention facilities nationwide. Results are providing unique insights into the prevalence of the novel [coronavirus](#) and the associated COVID-19 disease among the incarcerated population as well as the challenges correctional health staff are facing as they respond to the pandemic.

**FIGURE 2:
CORRELATION BETWEEN COVID-19 INFECTIONS
IN STAFF AND COMMUNITY**



Note: COVID-19 State Case Data from the *New York Times*, Facility Data from the NCCHC-HU Survey

Credit: Harvard Kennedy School

"What's striking to me about these findings so far is that correctional staff are also at high risk, either because of community exposure or exposure in the facilities themselves. Therefore, keeping visitors out is unlikely to be a failsafe method to prevent infectious spread. Staff also need to have access to protective equipment and testing," said Alsan. "In addition, many of the facilities surveyed recounted they were screening inmates using the only method they had readily available: temperature and symptom screening. Since COVID-19 can be transmitted asymptotically, it would be much safer to empower all facilities to screen using rapid lab tests."

Yang said the findings suggest that as the pandemic continues to spread

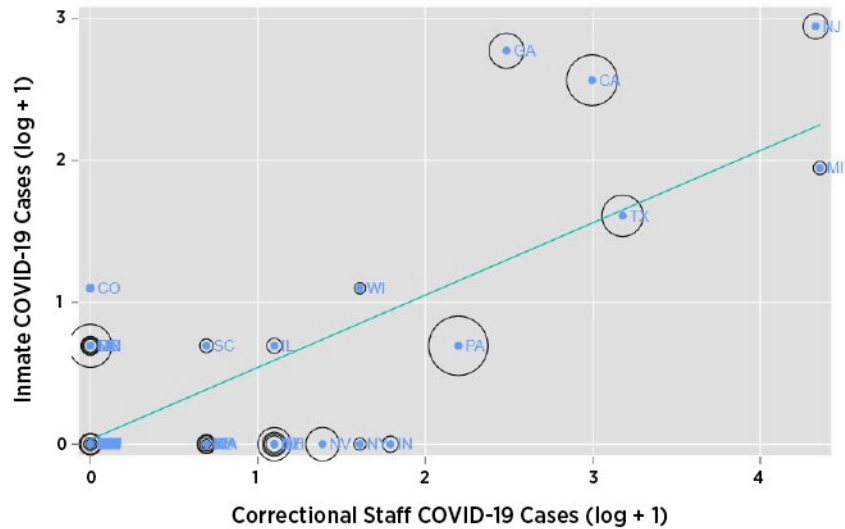
within facilities, policymakers should implement criminal justice policies that can protect the health of inmates and correctional staff without endangering public safety. She added: "Qualitative comments from participating facilities in our survey indicate a range of sound responses to the pandemic, including releasing medically vulnerable inmates, limiting pretrial detention for individuals charged with non-violent or misdemeanor offenses, quashing non-violent minor arrest warrants, and increasing the use of summons in lieu of arrests for non-violent offenses."

The surveyed correctional facilities represent more than 267,000 inmates and 53,000 correctional and health care staff. The data are primarily drawn from jails (70 percent), with prisons accounting for 20 percent and other detention facilities, such as juvenile facilities, making up the remainder of the sample. These data may not be fully representative of all correctional institutions.

"By definition, jails and prisons are closed environments and therefore potential hotspots for virus spread," said Deborah Ross, NCCHC chief executive officer. "As corrections grapples with the challenges of the pandemic, this study provides very important data in an area that is often overlooked."

"This is a truly innovative public health effort," said Brent Gibson, chief health officer at NCCHC. "It underscores that there is no bright line between correctional health care and community health. The work we are doing now not only brings immediate understanding and perspective, but also will fuel studies and programs for years to come. The lessons learned here will be beneficial far into the future."

**FIGURE 3:
CORRELATION BETWEEN COVID-19 INFECTIONS
IN INMATES AND STAFF**



Note: COVID-19 State Case Data from the *New York Times*, Facility Data from the NCCHC-HU Survey

Credit: Harvard Kennedy School

The collaboration will continue to collect data on the pandemic's effect on correctional facilities, as well as other correctional health care topics, in the months ahead. Information and reports are posted at <https://www.ncchc.org/study-of-covid-19-in-correctional-facilities>. The researchers urge all facilities to participate.

Findings to Date

Between March 25 (the initial survey) and April 3 (the latest daily follow-up), the number of reported COVID-19 cases among participating [correctional facilities](#) increased steadily (see Figure 1). The highest number of reported cases was among correctional staff—including

health care staff and correctional officers. Specifically, the number of COVID-19 cases among staff increased from 136 to 245 among approximately 100 facilities that have consistently reported each day. During this period, the number of cases among inmates increased from 32 to 67 among approximately 100 facilities that consistently reported. In addition, there were two reported deaths among correctional staff.

Combining the survey data with COVID-19 case data from the *New York Times*, the reported cases among correctional staff are highly correlated with cases in the broader community (see Figure 2).

States that have been especially hard hit by the pandemic, such as Michigan and New Jersey, are also locations where correctional officers are more affected. At the state level, reported correctional staff cases are also correlated with reported cases among inmates (see Figure 3).

As of April 3, approximately two-thirds of participating facilities reported having adequate PPE for their staff. Approximately 60 percent reported having access to laboratory testing for COVID-19. However, in the comments section of the survey, several facilities reported struggling to obtain adequate PPE and testing. They also noted long waits to receive test results, leading to uncertainty as to how to handle individuals who might be in jail for only a short time.

Provided by Harvard Kennedy School

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