



COVID-19 & Prison Populations

April 2020

Background

Incarcerated people, and those who work in jails and prisons, are at greater risk of contracting COVID-19 due primarily to tight living conditions and an inability to properly socially/physically distance. The majority of inmates come from social conditions that disadvantage their capacity for health. Moreover, those in custody are often medically vulnerable, having higher rates than the general population of chronic illness such as diabetes, heart disease, asthma, tuberculosis or other respiratory issues, all of which make them particularly vulnerable to the effects of COVID. Additionally, the average age of the prison population is rising and individuals over age 50 now comprise approximately 25% of the federal prison population.ⁱ

Conditions in prisons are often crowded, common spaces are used for the purposes of eating, talking on the phone, hygiene etc. Generally speaking, cells are shared. Prisoners are also in close contact with guards and other prison staff in that there is physical touching required to remove handcuffs, to frisk, to transport etc. This makes social/physical distancing a near impossibility. Compounding this is a lack of unlimited access to cleaning supplies such as sanitizer (note, sanitizers in correctional facilities do not contain alcohol in the general population but healthcare and other staff can access alcohol-based sanitizers) and soap.

From a health perspective, were COVID-19 to spread in a prison population (as with the situation in long term care), it could become out of control very quickly infecting prisoners, prison staff, guards and prison healthcare workers as well. According to the World Health Organization, effectively tackling a COVID-19 outbreak in a prison would necessitate that local and federal officials coordinate a system that brings together both the health and justice sectors. These sectors are obligated to ensure prison staff are well informed and guarantee that the human rights of all are respected across facilities. Public health officials and emergency preparedness personnel must all make a concerted effort to protect such a closed population. Many have called for the release of non-violent prisoners to other facilities in order to lessen the risk of outbreak. Without a doubt, this is a layered issue that brings with it a series of complexities around the ethics of releasing individuals who have yet to finish a sentence, for whom there may not be a supportive transition plan in place, and for whom there may be inadequate services available to ensure not only their safety but also the safety of the public. In British Columbia roughly 100 (to date) inmates have been released under temporary absence as is laid out in the [BC Correction Act](#).

It is worth noting that in British Columbia there are two sets of correctional services. Correctional Services Canada (CSC) is federally run and the BC Correctional Services which, since 2017, is under the Provincial Health Services Authority (PHSA). In BC, each correctional centre has a health team who works under the PHSA. Each new inmate is assessed by an intake nurse and then receives a mental health screening with follow up as necessary. Inmates have access to primary care physicians, nurses (LPNs, RNs, and RPNs), concurrent disorder counsellors, addictions counsellors, psychologists and psychiatrists. Occupational and physical therapy as well as optometry and urgent oral care are also provided as needed. Those nurses who work in these settings receive significant training and orientation specific to working with the prison population and PHSA has implemented guidelines on personal protective equipment for healthcare providers. These health teams that work under PHSA abide by and work under the direction of the public health officials and work closely with other partners within the BC Correctional Services umbrella and are cognizant of how decisions made impact those on the 'non-health' side of operations.

Nurses who work in correctional facilities carry with them all of their nursing expertise and trust. By profession, nurses are patient-centred and hold the trust of the inmates at the facilities they work in. As a result, nursing is well positioned to help manage illness, provide guidance and offer nursing expertise in managing an outbreak. As plans evolve to protect inmates and create the conditions under which they can remain safe from the harm this virus entails, we expect that nursing expertise will be included in the strategic decision-making.

Key Messages

- Nursing is well positioned to help manage illness, provide guidance and offer nursing expertise in managing an outbreak in the prison population.
- NNPBC supports the coordinated efforts of federal and provincial groups to ensure that prison staff and inmates are communicated with effectively.
- NNPBC understands that incarcerated individuals are extremely vulnerable to COVID-19.
- NNPBC supports a thoughtful and balanced discussion about best approaches to ensuring that risk to the prison population is minimized.
- NNPBC understands that complex problems come with complex solutions and rallying cries to simply release non-violent offenders do not reflect the nuances of this situation.
- NNPBC supports reasonable measures within prisons to ensure that social distancing can be maintained while ensuring human rights are not compromised.
- NNPBC supports ensuring that all those who work in prisons are provided with the necessary and proper personal protective equipment to do their jobs safely and effectively.
- Nursing is among the world's most trusted professions and as such is strongly positioned to ensure that incarcerated individuals are properly educated about handwashing and hygiene techniques to help combat the spread of COVID.

Further Reading/Resources

- [WHO- Preventing COVID-19 outbreak in prisons: a challenging but essential task for authorities](#)
- [Prison Policy Initiative- Responses to the COVID-19 Pandemic](#)
- [CTV News- Consider Releasing some inmates](#)
- [Why the Prison Population is so vulnerable to COVID-19](#)
- [WIRED- COVID poses a heightened risk in jails and prisons](#)
- [NEJM- Flattening the Curve in Prison Populations](#)
- ["A Glimmer of Light" for Men in Prison" by Helen Brown and Kelsey Timler](#)

Please feel free to direct questions and additional comments to info@nnpbc.com.

¹ Health status of prisoners in Canada: Narrative review." Canadian Family Physician vol. 62,3 (2016): 215-22.