THE HEALTH STATUS OF Soon-To-Be-Released Inmates

A Report to Congress Volume 2

> National Commission on Correctional Health Care



The Health Status of Soon-To-Be-Released Inmates

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Preface

Through the mid-1990s, a number of studies, limited in scope, found a higher prevalence of certain infectious diseases, chronic diseases, and mental illness among prison and jail inmates. Further, each year the Nation's prisons and jails release more than 11.5 million inmates. The potential that ex-offenders may be contributing to the spread of infectious disease in the community became of increasing concern. In addition, as these ex-offenders' diseases get worse, society may have to pay substantially more to treat them than if these conditions had been treated at an earlier stage—or prevented altogether—while these individuals were still incarcerated.

In 1997 Congress instructed the U.S. Department of Justice to determine whether these concerns were well founded and, if so, to recommend solutions. The National Institute of Justice (NIJ), the research arm of the Department of Justice, entered into a cooperative agreement with the National Commission on Correctional Health Care (NCCHC) to study the problem. *The Health Status of Soon-To-Be-Released Inmates* report is the result of that research.

The NCCHC commissioned a series of papers (summarized in volume 1 of this report and provided in full in volume 2) that documents indisputably that tens of thousands of inmates are being released into the community every year with undiagnosed or untreated communicable disease, chronic disease, and mental illness. Another set of commissioned papers clearly shows that it not only would be cost effective to treat several of these diseases, but in several instances, it would even save money in the long run. The report concludes with policy recommendations designed to improve disease prevention, screening, and treatment programs in prisons and jails. The recommendations have been carefully crafted. First, they are based on a consensus among a number of the Nation's leading experts in correctional health care and public health. Second, they propose interventions for which there is strong, and in many cases overwhelming, scientific evidence of therapeutic effectiveness. Third, they reflect a realistic consideration of what correctional systems can reasonably be expected to accomplish.

There are serious political, logistical, and financial barriers to improving health services in prisons and jails. As documented in this report, however, a number of jurisdictions have found ways to overcome some of these barriers, often through collaborations with public health departments and national or community-based organizations.

Prisons and jails offer a unique opportunity to establish better disease control in the community by providing improved health care and disease prevention to inmates before they are released. Implementing the recommendations in this carefully researched report will go a long way toward taking advantage of this opportunity and contribute significantly to improving the health of both inmates and the larger community.

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President

National Commission on Correctional Health Care

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A steering committee coordinated the work and provided expert guidance to this project.

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