# Key health needs and challenges in New York's prisons

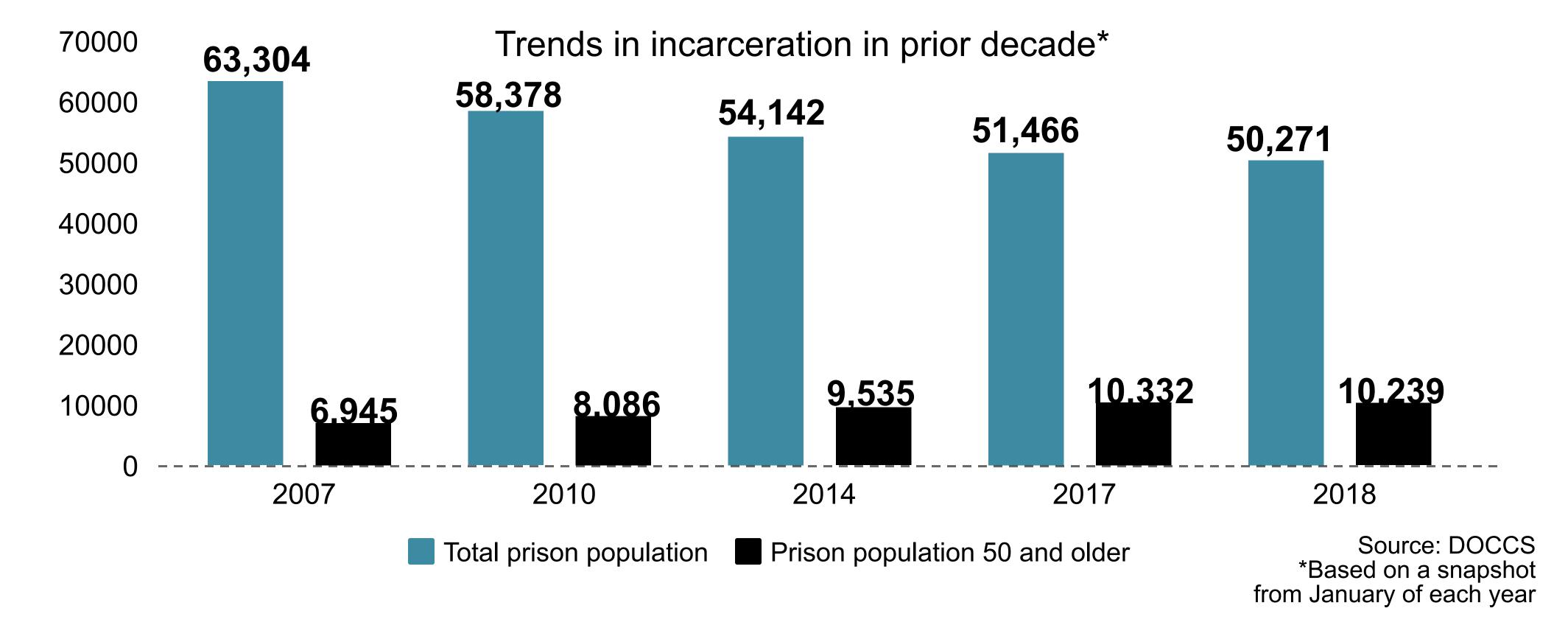
## **Overview**

- As a group, people in prison have historically had poor access to health care even before incarceration, with limited access to screening for chronic conditions or mental health issues.
- And once incarcerated, many can wait for significant periods before symptoms are detected and health conditions
  diagnosed. Through our oversight of New York's prison system, CANY works to unearth the scope of health and mental
  health needs in state prisons as well as chart the systemic issues standing between individuals in need and the care to
  which they are entitled.
- This fact sheet present keys facts and issues related to the health needs and challenges in New York's prisons.

# **Key Health Concerns**

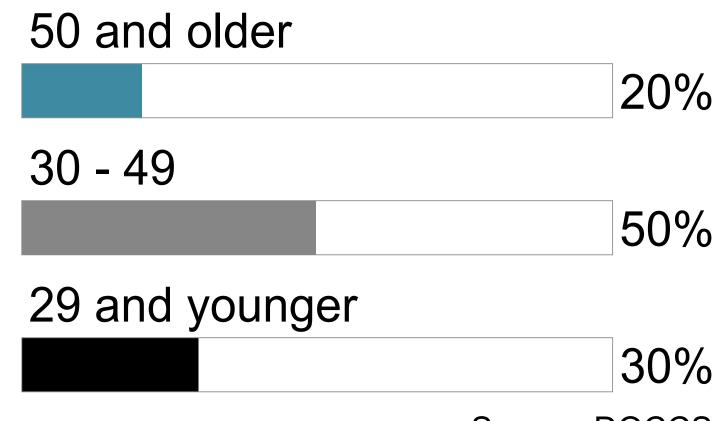
AN AGING PRISON POPULATION

• While the overall number of people incarcerated in New York's prisons has dropped nearly 20% over the previous decade, the percentage of incarcerated people aged 50 or older nearly doubled — from 11% of the population in 2007 to 20.4% in 2018.



- There are currently over 10,000 individuals who are
   50 years old or older incarcerated in state prisons.
- Research comparing people in and out of custody suggests that prisoners over age 50 display accelerated aging, with health needs that resemble those of individuals 10 to 15 years older who have not been incarcerated
- Aging and elderly individuals tend to have a higher incidence of health care needs than younger populations.





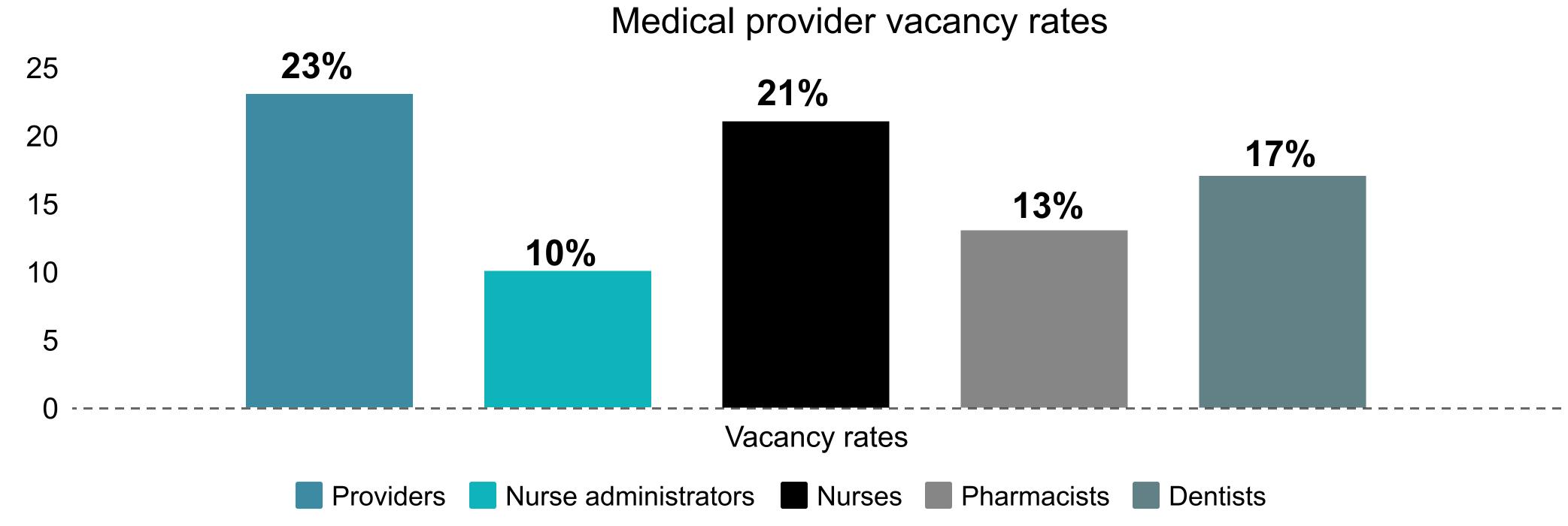
Source: DOCCS

**CANCER** 

• Currently, the scale of cancer diagnoses in New York's prisons is not publicly reported by the state. However, we gather this information through our prison oversight and during our most recent prison inspection, we visited one of five regional medical centers in the state that provides intensive and palliative care to individuals with acute needs. Half of the individuals with whom we spoke had a cancer diagnosis.

### INADEQUATE SCREENING AND PREVENTIVE CARE

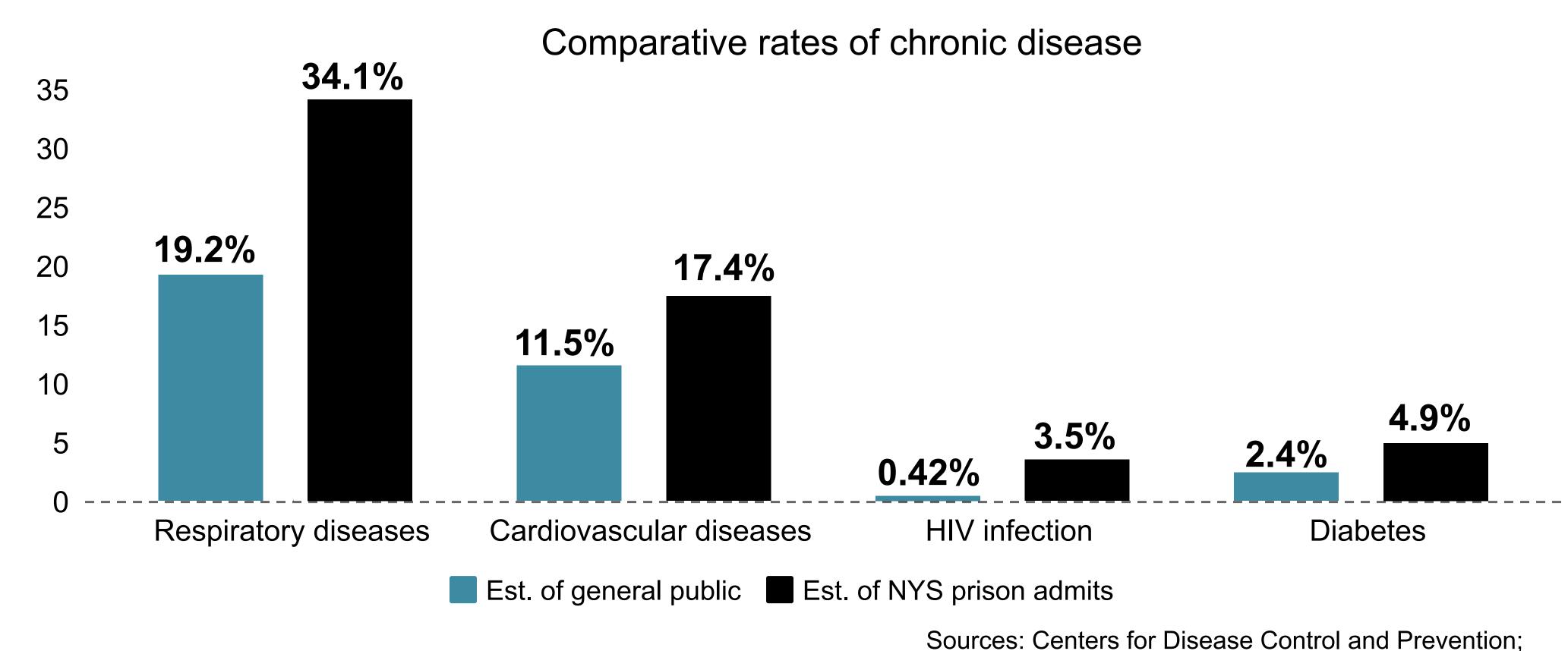
Many incarcerated individuals have had historically poor access to health care prior
to incarceration. And once incarcerated, many can wait for significant periods before
symptoms are detected and health conditions diagnosed: as of January 2018, medical
staffing shortages had reached a crisis level across state prisons, with a 23% vacancy
rate for providers (including physicians, physicians assistants and nurse practitioners).
Similarly, there were high rates for nurse administrators (10%), nurses (21%),
pharmacists (13%), and dentists (17%).



Source: CANY's analysis of information gathered directly from 25 correctional facilities visited between 2012 and 2018

### HIGH INCIDENCE OF CHRONIC HEALTH CONDITIONS

- People in prison are much more likely to suffer from chronic health conditions than people in the general population, and on average are sicker when entering prison than those in the general population.
- And the experience of incarceration can compound these health disparities and accelerate aging. Research comparing people in and out of custody suggests that incarcerated people over age 50 are more likely to have the health problems of people 10 to 15 years older



Prevalence and Predictors of Chronic Health Conditions of Inmates Newly Admitted to Maximum Security Prisons

### INFREQUENT USE OF MEDICAL PAROLE

- Under New York state law, the Parole Board is able to grant parole release to certain terminally ill incarcerated individuals prior to the expiration of the minimum term of their sentence.
- According to the most recent data available from New York State's Department of Corrections and Community Supervision, only 13 people were released on medical parole in 2016 while 100 people died of natural causes in state prisons.
- Release on medical parole is determined not by doctors but by parole board commissioners, and involves non-medical information such as the nature of the crime.

Source: DOCCS