

16-05

STATEMENT OF POLICY

Health Equity: Mass Incarceration and Structural Racism

Policy

The National Association of County and City Health Officials (NACCHO) acknowledges mass incarceration as a mental and physical public health crisis, severely impacting children, families, and whole communities, especially African American and Latinx communities. Mass incarceration refers to structural injustices that have systematically led the United States to have the highest number of people incarcerated worldwide, with seriously disproportionate numbers of African Americans, Latinx and Native American people in prisons or jails.¹ Structural racism refers to the many cumulative processes and practices in the economic and political system that socially exclude groups of people and deprive them of access to necessary resources to sustain health and well-being. Examples of such processes and practices that have had devastating effects include segregation in housing, education, and employment; denial of basic rights; discrimination in sentencing; stigmatization as criminals; neighborhood disinvestment; and siting of hazardous waste primarily in communities of color.

NACCHO encourages local health departments to support efforts to end mass incarceration and related sanctions such as loss of voting rights and ineligibility for public funds, including welfare benefits and student loans. NACCHO supports ensuring that those returning to their communities from prison and jails have supports in place to thrive, including access to housing and employment.

NACCHO also encourages local health departments to support and educate the public about the following public policies, in collaboration with their partners:

Public Policies to End Mass Incarceration

- Establish model sentencing guidelines that reduce the length of prison terms to fit the crimes and end discriminatory practices that disproportionately sentence prisoners of color to longer terms for the same crime.
- Eliminate disproportionate sentencing laws and mandatory sentencing.
- Provide effective community-based alternatives to incarceration, including for those with mental illnesses and substance use disorders, including treatment and diversion.
- End the “school-to-prison pipeline” by opposing testing policies that lead to high drop-out rates and providing greater resources for failing schools.



- End excessive school discipline, suspension, and expulsion for minor infractions, which insert police and prison practices into school systems, especially regarding very young children.
- Eliminate the criminalization of inconsequential or victimless behavior.
- Decriminalize minor drug offenses to reduce rates of incarceration and recidivism.
- End discriminatory policing and enforcement of laws, policies, programs, and practices that target communities of color.
- Eliminate the practice of prosecutorial over-charging to minimize mass incarceration.

Public Policies to Enable Successful Re-Entry of Formerly Incarcerated People into the Community

- Advance the mental and physical health of prison/jail and post-prison/jail populations.
- Remove the check box on employment applications asking individuals whether they have been convicted of a crime and remove all other barriers to employment. In addition, health departments should develop relationships and systems to recruit formerly incarcerated individuals for positions within their organizations.
- Involve criminal justice agencies in discharge planning efforts for offenders at the point of incarceration, including transitional housing and jobs.
- Initiate programs that provide stable housing for returning citizens and connect returning citizens to medical homes and primary care providers in their communities.
- Eliminate probation policies that require reentering citizens to have stable housing and jobs to avoid jail.
- Ensure rehabilitation (e.g., protecting health, real job training, and preparation for release) is a central feature of incarceration.
- Create local, state, and national measures that remove barriers and increase access to services and benefits such as food subsidies, public housing, healthcare, and employment.
- Repeal of laws that deny formerly incarcerated people the right to vote and guarantee voting rights more broadly, including opposition to burdensome court fees and other monetary requirements post-incarceration that limit the capacity to vote.
- Eliminate the use of unpaid fines for low-level offenses that can lead to incarceration.

Departmental Policies and Practices Related to The Collection and Dissemination of Data on the Causes, and Health Consequences of Mass Incarceration

- Track the number of residents in prison and jails, the rates of change in incarceration by race and ethnicity, and the number of generations represented in the prisons and jails for each resident, especially children.
- Collect data from health records of inmates and share it with public health agencies.
- Educate local leaders and the public on how mass incarceration is a public health crisis, particularly as it affects people of color and their families over the life course.
- Disseminate information on the health and trauma effects of mass incarceration on whole communities.
- Champion rehabilitation and promote community-based transformative justice.
- Develop strategies to address stigmatization and trauma of formerly incarcerated people.

- Publicize the root causes and history of mass incarceration, since Reconstruction, and particularly since the passage of the Voting Rights Act. This includes demonstrating the extraordinary increase in incarceration rates as an ongoing strategy throughout the criminal justice system to weaken the political power of communities of color.

Justification

Scope of the Public Health Crisis

The unprecedented level and rate of increase in incarceration in the United States is the highest in the world, quadrupling since 1980.²⁻⁵ Although the U.S. has about 5% of the world's population, 25% of the world's inmates are in the United States.^{2,6-7} A total of seven million U.S. citizens are in federal and state prisons, jail, probation, or on parole.^{2,7} Approximately 2.2 million are in prisons and jails. In the United States, nearly 1 out of every 100 adults is in prison or jail... "nearly 5 to 10 times higher than rates in Western Europe and other democracies."⁸

Incarceration rates have been more disproportionate by race and class since 1989 than at any time in US history.⁹⁻¹⁰ In modern times, more African American men are imprisoned than were enslaved in 1850.⁸ Mass incarceration has a long history, dating back to Reconstruction and Jim Crow laws, which included all types of segregation to separate black people from public life, as well as convict leasing (work without pay as a continuation of slavery) and deprivation of voting rights, including literacy tests to inhibit voting. Many of these laws only applied to African Americans. The Vera Institute of Justice, examining the history and impact of incarceration, notes that the US "has long used...incarceration...to subordinate racial and ethnic minorities."⁶ The intensification of incarceration by race and class, historically ongoing, weakens the political power of communities of color and parallels many other policies, as noted below, since the passage of the Voting Rights Act of 1965.^{1, 11} Recognizing the political context of mass incarceration over 150 years of history is critical to setting policy priorities that address the underlying inequity.^{1, 11} Techniques that increase the likelihood of incarceration include discriminatory arrest practices for things like traffic offenses and marijuana use, referring African American children to the police more often than whites,¹² and using a bail system that punishes poor people.¹³ For example, most inmates suffer from poverty and have low incomes; few have full-time jobs at the time of arraignment. In addition, almost two-thirds come from households with an income below the federal poverty line.¹⁴

The surge in incarceration, particularly among people of color, has almost no correlation to crime rates, which have mostly declined over the past 25 years.^{1,2} Specifically, according to recent research, no discernible pattern of states with higher rates of increase in incarceration experience more significant declines in crime.¹⁵

Health Inequity Implications

The public health concern with mass incarceration is related to its devastating, systematic effects on population health and well-being over a lifetime: for those imprisoned, their families, and whole communities.^{4, 16-18} The devastation stems from the denial of basic resources and benefits, limits on participation in society, onset of mental disorders in prison/jail, lack of services subsequent to release, exposure to diseases from returning inmates, and from severe forms of

discrimination.^{3,16,18} The Vera Institute of Justice refers to mass incarceration and its effect on health as an epidemic.¹⁶

Increasing levels of mass incarceration since the early 1980s has led to a significant increase in the likelihood of health inequities among ex-prisoners, as well as their children and families. The economic and social life of many communities¹⁹ experience a threat to physical and mental health thereby negatively affecting the public's health more broadly.^{16,17,20-21} A major national health concern, the experience in poverty-stricken communities and communities of color is more severe, due to living and working conditions that make some populations more susceptible to disease and chronic illness.^{2,3} Even though mass incarceration affects poor white communities, effects are much more profound in African American and some Latinx communities.^{3,16,22} Mass incarceration's contribution to social exclusion, marginalization based on the greater threat of imprisonment, excessive police surveillance, and the lack of services after release from prison/jail are intergenerational and unprecedented.^{2,3,22}

Research shows that post-prison mortality skyrockets: Those being released from prison have a 12.7 times higher risk of death in the first two weeks after release than the general population.¹⁹ Health risks generally increase upon leaving prison, especially for chronic conditions such as infectious disease and mental illness, given negative conditions in prisons/jails and poor healthcare. Post-prison mortality from drug overdose is 129 times higher than for the general population.²⁰ Excess risk of suicide also occurs within the first few weeks of leaving prison/jail; almost 50% of inmates have a diagnosable mental disorder.²

Health Consequences for Families and Children

More than 2.7 million children have at least one parent in prison.²⁴⁻²⁶ Overall, research demonstrates that mass incarceration has led to an expanding rate of negative health outcomes and long-term trauma, starting with the reality of parental separation, particularly in communities with high rates of poverty and in communities of color.^{24,27} Yet incarceration concentrates poverty for children by leading to a significant decline in family income and disrupts their ability to receive a good education.¹⁶ Children have greater exposure to risky behavior that decrease life chances. Every aspect of their lives is affected.²⁸ For example, they have higher rates of attention deficits.²⁹ Children with an incarcerated parent are at increased risk for mental illness and are three times more likely to suffer depression or behavioral problems than adults.² In addition, they are three times more likely to become homeless than those without incarcerated parents.^{24,30} Few children of incarcerated mothers graduate from college.²⁶ More children are at risk of illness in neighborhoods with a concentration of former prisoners.³¹ Incarceration results in a significant increase in the infant mortality rate, with a higher rate of increase among African American children compared to white.⁷

Having an incarcerated parent also results in learning disabilities, developmental delays, social isolation, stigma, unstable childcare arrangements, strained parenting, and reduced income.^{2,23,24} The trauma of separation itself is even more traumatic than a death or divorce.²⁶ Its consequences have resulted in the destruction of family structures.¹⁶ Research also shows limits on educational opportunities and, more broadly, the fragmenting of whole communities.³¹ According to the Vera

Institute of Justice, if the U.S. incarceration rate remained what it was in 1973, infant mortality rate would be 7.8 times *lower* than it was in 2003 and disparity between black and white infant deaths would be nearly 15% lower.¹⁶ Among children with incarcerated parents, 45% are black, 28% are white, and 21% are Latino.⁷

Community Health and Social Consequences

More broadly, mass incarceration is socially corrosive and can devastate whole communities in some regions, creating financial instability, homelessness, income inequality, and lack of access to benefits.^{31,32} Residents in neighborhoods with high incarceration rates have higher levels of stress, crime, and infectious diseases, in part because their communities experience disruptions to their social and family networks. Some of these disruptions might affect community well-being in ways that are not directly detectable.¹⁷ Labor market opportunities, for example, may decline because of the difficulties formerly incarcerated people have in finding employment at a living wage. Mass incarceration exacerbates negative socio-economic conditions, creating greater urban decay.³³ Many families remain fractured after decades of incarceration, resulting in an increase in single-parent families.¹⁶

Racism, Class, and Mass Incarceration

Understanding the history, causes, and sustaining influences is essential for determining strategy and identifying partners to support ending mass incarceration. In modern times it begins during the civil rights movement, especially after passage of the 1965 Voting Rights Act, the rise of the prison-industrial complex and increasing funds for prison construction, and draconian sentencing policies and policing procedures. The so-called War on Drugs and War on Crime rime played a significant role. In the current moment in 2019, mass incarceration parallels voter suppression practices and gerrymandering. All of these policies are tied to racism. The contextual focus is especially critical, given the connection to structural racism rooted in public policies and practices throughout the criminal justice system since Reconstruction.^{3,34-35} Those populations that find themselves most deeply enmeshed in the prison system are also those more likely to be living in poverty and lacking political power.³⁶ Life expectancy resulting from these experiences tend to be 12-15 years lower than the rest of the population.

The system of mass incarceration is also highly associated with racial and class stratification, prominent throughout the criminal justice system.^{5,10,37-40} In addition, the “extreme disproportion, by a factor of six among men, of black-white differences in incarceration represents a level of systematic... concentration of adversities faced by minority communities... [It is]one of the biggest threats to the production of health...”⁴¹ Most of the incarcerated represent populations experiencing economic and social disadvantage, particularly from communities of color, linking the results to questions of inequitable social and economic conditions requiring a major transformation in political power.^{3,42}

Disenfranchisement and Denial of Social Services

The acceleration of incarceration in the 1980s can be directly tied to the period after the Voting Rights Act and a backlash against the civil rights movement.³⁵ The U.S. is the only country that disenfranchises formerly incarcerated people.⁴³ Today, parallels can be found in voter ID laws,

designed to suppress voting by African Americans. Over 4.5 million African American men are denied the vote; this figure represents one in seven black males.⁴³⁻⁴⁴ As a consequence, they are less likely to believe that they can influence politics and thereby become less engaged in politics and participation. Overall, ex-inmates have experienced a loss in political power.⁴⁵⁻⁴⁷ To be full members of society, ex-inmates must be able to participate effectively in community social and political life.^{43,48}

On returning from prison/jail, hardly any social services exist or are prescribed for formerly incarcerated people.^{2,22,37} This loss of basic life necessities and social services essential for wellbeing (for about 4 to 5 million ex-inmates), disrupts lives in many ways, including less time and energy available for participation in civic and community life.⁴⁹⁻⁵⁰ Returning offenders have limited access to benefits. Equally serious is the denial of rights to Section 8 public housing, food stamps, and access to federal student loan programs.^{2,15,49} Many states have withdrawn or otherwise restricted rights of ex-inmates to work in a licensed profession, such as teacher, barber, or therapist, as well as restricted Medicaid reimbursement to inmates of a public institution.^{2,51}

The Link between Mass Incarceration and Economic Restructuring

Mass incarceration correlates clearly with urban economic restructuring that has dispossessed millions since the 1980s, and with perceived threats to the economic order and racial hierarchies that have created what amounts to permanent social insecurity and inequities.^{1,11} While the increases in incarceration can be traced to many kinds of sentencing laws—redefinition and enforcement of minor crimes that make it more likely to target certain populations and facilitate the huge numbers incarcerated—the entire effort is also strongly related to demands for cheap labor and flexible labor markets and the need to stigmatize groups to blame for economic failures.³⁶

Mass incarceration serves as a means of social control. Its coordination with police, courts, and social welfare strategy functions within a larger process primarily targeted at people of color, tied to parallel surveillance and punishment mechanisms for those receiving government benefits. It coincides with the deterioration of under-resourced communities and the potential disruptions to an economic order, in which seemingly minor shifts in earnings and productivity can unravel financial stability, creating enormous risks for health and well-being.^{8,11}

Linking criminal justice policy to social welfare policies has been part of a much broader agenda than punishment for crimes: It has become a method for maintaining control of large, already marginalized populations that may disrupt the economy and for distracting attention from broad economic and social processes that regulate the labor market and people made poor.³⁷ It is also likely having profound effects on weakening democracy.⁵²⁻⁵⁵

The result has been the isolation, geographic dispersal, and stigmatization of groups now less able to organize politically and build power, limiting political equality. In turn, this has led to the creation of a sustained public health crisis for communities, determining the life chances of African American and Latinx populations and people forced into poverty, along with their entire families.⁵⁵⁻⁵⁷ People returning from prison and jail require even greater opportunities for health and well-being than before their incarceration. Returning them to their previous conditions often means returning to the same life conditions that may have led to their incarceration.

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Record of Action

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