

# SOCIAL INEQUITIES

## GENERAL INEQUITIES

Those in prison are more likely to develop chronic illnesses and mental health disparities

Prisoners are excluded from national health surveys, so their needs don't get properly addressed

There is not much clinical data on prisoners, so not much research is done on their conditions

Prison system does not provide for a smooth transition back into society, nor does it provide healthcare resources for the release of prisoners

**10X**  
greater  
infection rate of  
HIV and risk of  
Hepatitis C

## LOSS OF INSURANCE COVERAGE

If inmate had Medicare before arrest, they will remain eligible for the program while incarcerated but Medicare generally will not pay for the medical care

Community involvement in transplant process can make or break a patient's bid to be a recipient  
essentially, incarcerated people need direct donations

Organ transplant and follow up care can cost prison system up to one million dollars



## EXTRA PRISON RESTRICTIONS

Complicated organ donation selection process and high initial cost for operation bars most incarcerated individuals from getting kidney transplants (even from family)

In order for an inmate to get a transplant, they first have to qualify and they need to pay the full cost of the operation

2013 Study contacted all 242 transplant centers on UNOS (got 146 responses)

19/146 have performed a transplant on an inmate at some point.

7/19 who transplanted an inmate before are currently accepting inmates and transplant candidates



## ADDITIONAL SECURITY COSTS

Inmates may pay copayments and other fees for medical services in at least 35 states

Medical services including emergency treatment, hospitalization, and routine care (relevant to CKD treatment)

Most inmates cannot afford treatment, causing them to become hesitant when pursuing medical services which may prevent inmates with CKD from getting correctly diagnosed and treated

When inmates are released, receiving medical services may be difficult due to the lack of insurance and available funds



# HEALTH STATISTICS

## REMOTE DIALYSIS PRISON

Many states have specially trained transportation units within the corrections department, supplemented by state or local police during staffing shortages.

Security personnel at the prison and the hospital must be notified of the planned trip and the person's custody level—minimum, medium, or maximum.

At least two officers usually accompany an individual when he or she is being taken to a hospital.

Due to the potential to incur substantial and unpredictable expenses, healthcare services can be apprehensive about assuming financial responsibility for patient hospitalizations



## RATE OF KIDNEY DISEASE

2011-2012, half of state and federal prisoners and local jail inmates have had a chronic condition of some sort

These chronic conditions include cancer, high blood pressure, stroke-related problems, diabetes, heart-related problems, kidney-related problems, arthritis, asthma, and cirrhosis of the liver

The "kidney disease" referred to those with frequent kidney stones, renal failure, and/or dialysis

Males had a higher prevalence of kidney diseases than females

6.1%

of incarcerated people have kidney-related problems

## NUTRITION AND COVID

Incarcerated people in Washington do not receive minimum requirements for fruits, vegetables, whole grains, lean protein, or milk

Incarcerated people are fed more than the recommended amounts of refined starches, added sugars and sodium. The DOC is fully aware of the nutritional shortcomings of its menu, so it supplements meals with fortified drink powders

The Centers for Disease Control and Prevention reports that sodium is off the charts in U.S. prisons



## IMPROVEMENTS

Portable ultrasounds are being suggested to help nephrologists better monitor inmates with end-stage kidney disease help detect fluid in the lungs more effectively than stethoscopes, and earlier detection of fluid can prevent more serious problems

Dr. Elizabeth Chu, second-year internal medicine resident, suggests creating a Comprehensive Disease Management Program

This program would offer inmates with kidney problems to receive guidance from a navigator with background knowledge in social work and case management

