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Background

- Carceral facilities are historically vulnerable to airborne viral outbreaks (Hawks et al. 2020).
- Conditions of confinement overcrowding, limitations in hygienic supplies, lack of enforced protocol - increase the risk for spread of infectious disease (Akiyama et al. 2020).
- The carceral community has a disproportionate number of members at-risk. Over half have pre-existing conditions, and more than 20% of state and federal prisoners are over 50 (Carson 2020).
- Evidence has indicated Covid-19 patients has lasting cognitive complications, particularly in sustained attention (Zhou et al. 2020).
- Mental health and behavioral issues have been found to stem from more broadly living in a lockdown-type stasis (Cao et al. 2020).
- Evidence has indicated psychological complications significantly relating to incarceration, mostly regarding detriments in prosocial behavior and emotional regulation (Umbach et al. 2019).
- More recently, EEG testing have found cognitive and neurological complications resulting from incarceration (Umbach et al. 2016).

Prior Research on Epidemics in Facilities

- Extensive literature regards the epidemiological issues in facilities (Hawks et al. 2020)
- However, little research exists around the psychological effects of living in the severe conditions of incarceration during an outbreak.
- Cognitive dysfunction in patients with viral infection has been commonly reported (Zhou et al. 2020).
- Harm reduction practices are significantly associated with lower viral spread in facilities (Sequera et al. 2017).

Current Data on Covid-19 in Carceral Facilities

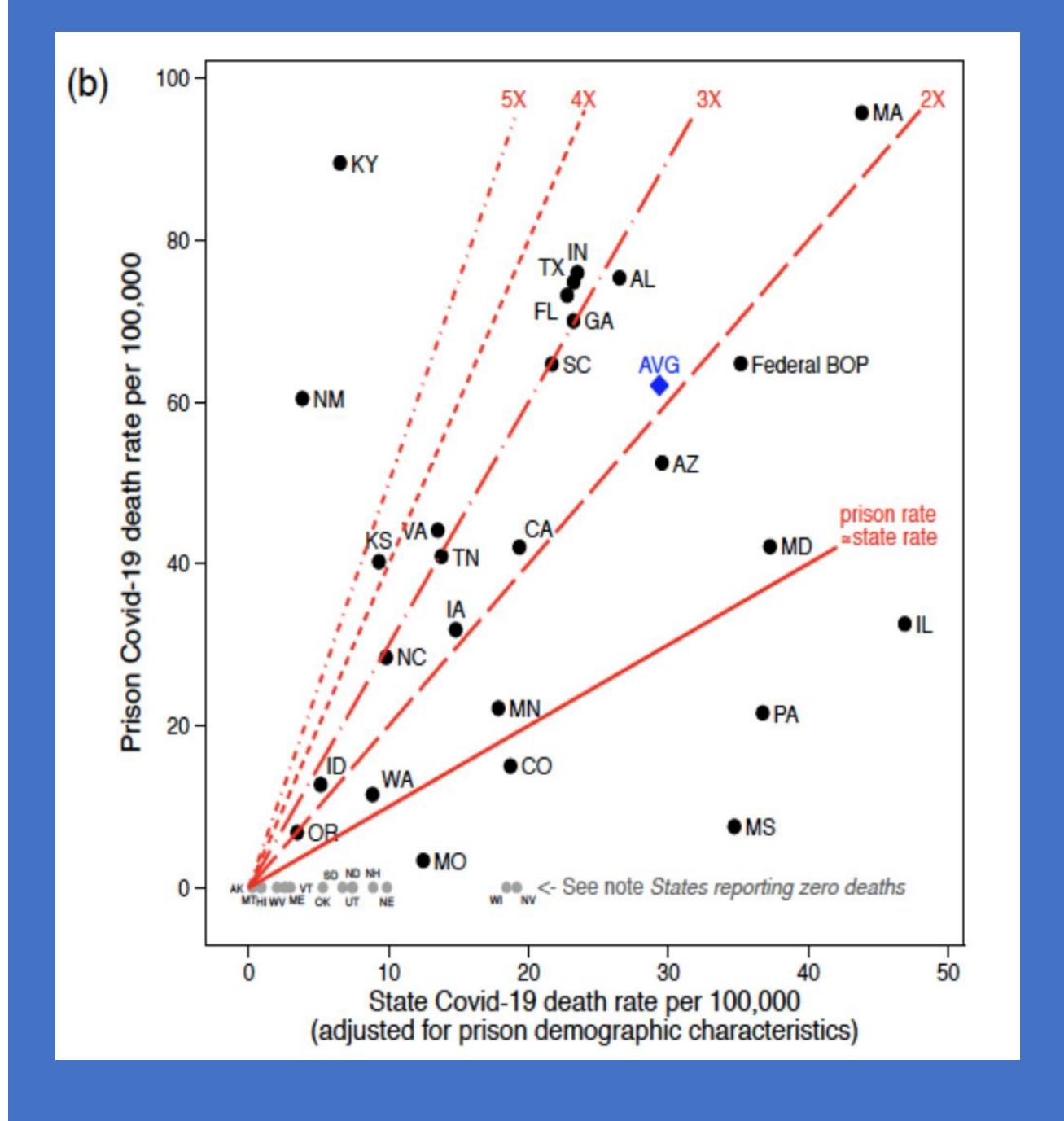
- 1 in 5 prisoners in the U.S. have contracted Covid-19 (The Marshall Project, 2021).
- At least 2,990 inmates and correctional officers have died from Covid-19 (New York Times, 2021).
- 40 of the 50 largest clustered outbreaks in the country have occurred in jails and prisons (Smith et al. 2020).
- Covid-19 mortality rate is twice within prisons as the rate of the general public, and infection is about 3.7 times the national rate (Schnepnel, 2020).
- While there were initial efforts to decrease the population (most recommended by public health experts), outbreaks outside have been directly tied back to facilities (Saloner et al. 2020)
- Incarceration rates have slowly increased back to similar rates in 2019 (BOP, 2021).
- Many prisoners have been refused compassionate release (BOP, 2020), and there still questions over what kind of reentry is even possible due to Covid-19 protocols.
- Data is flawed and underreported: Most local jails haven't disclosed data. Many have not disclosed symptoms for fear of isolation/retribution (Wallace et al. 2020). Testing and vaccinations are extremely variable (Marshall Project, 2021).

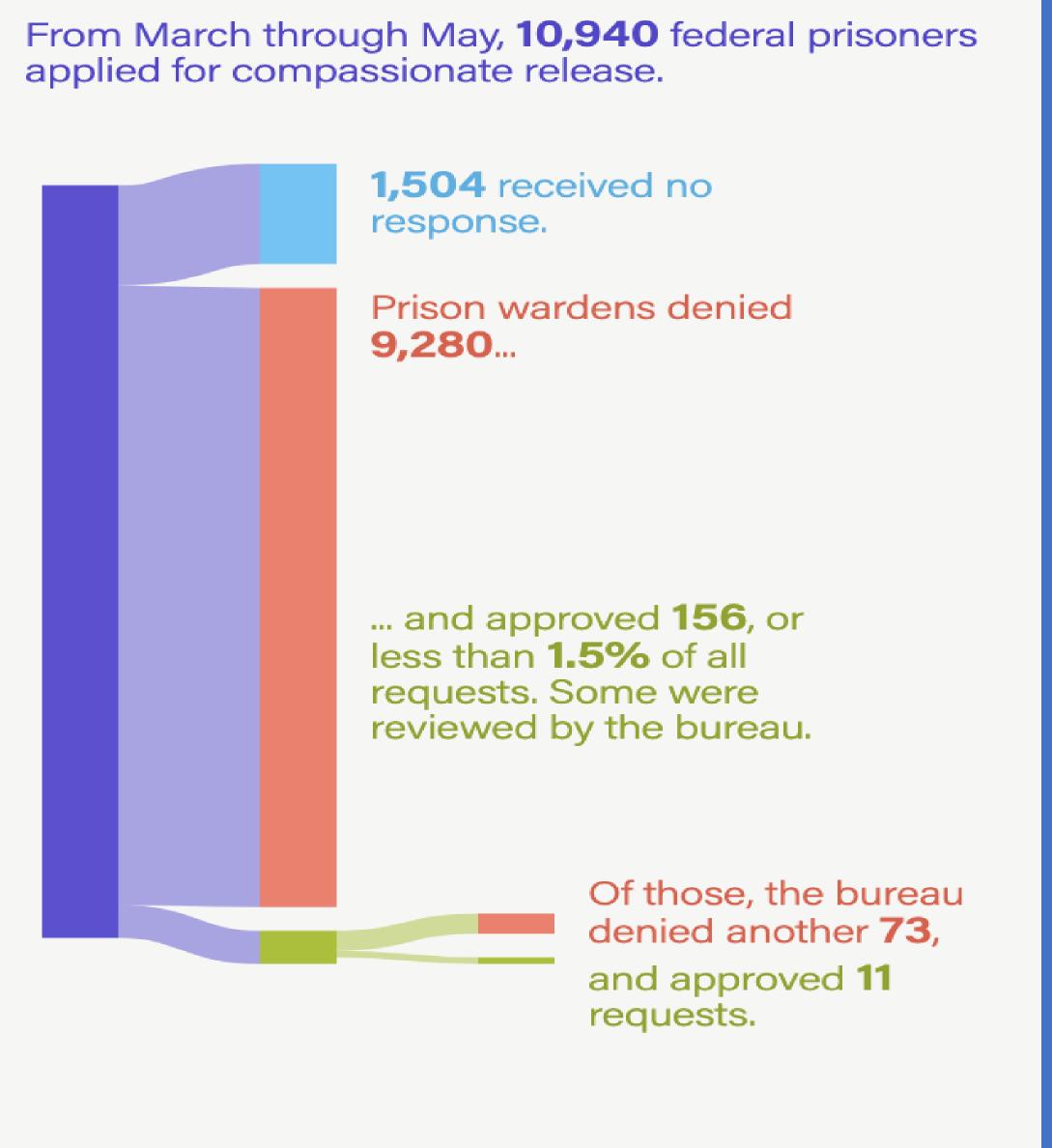
The Potential Psychological Effects of Covid-19 on Incarcerated Individuals: A Literature Review **Potential Effects Risks of Isolation**



Can the conditions of Covid-19 in incarceration be increasing psychological complications, or even creating novel ones?

What does prior literature, along with early evidence, suggest could be occurring?





Source: The Marshall Project analysis of Bureau of Prisons data.

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- Most common mitigation effort utilized in incarceration is medical isolation, akin to solitary confinement or keeplock (Wallace et al. 2020).
- Complications following solitary: Folks are 6.7 times more likely to commit acts of self-harm (Kaba et al. 2016), 5 times higher mortality rate following reentry (Wildeman & Anderson 2020), while persistent social and cognitive difficulties have been identified (Haney, 2018). Many facilities have resorted to limiting most activity, and time outside of cells can be as little as an hour a week (Prison Policy Initiative).
- Loneliness and social isolation relate to higher rates of depression, anxiety, and PTSD (Zhou et al. 2019), and detriments in attentional performance and emotional regulation (Gardiner et al. 2018).

Risks in Psychosocial Behavior

- Most social and community programs have been rescinded in order to combat outbreaks and 100% of states have reported completely suspending in-person visits (Daillaire et al. 2021).
 - Social support and visitations are correlated to lower recidivism (Duwe & Clarke 2013).
 - Lack of social support can lead to difficulty adjusting to incarceration (Jiang & Winfree Jr., 2006), as well as suicidal ideation and self-harm behavior (Marzano et al. 2011).

Risks in Development

- Public health emergencies are likely to cause adverse effects to neuropsychological development (Cao et al. 2020).
- Isolated confinement has been found especially detrimental towards cognitive develop, emt Particularly important is the continuing development of the frontal lobe.
- Parental incarceration is tied to detriments in child development, and there are direct correlations between outcomes and parental communication (Ituri et al. 2021).

Discussion

- There is a disproportionate mortality and infection of Covid-19 among incarcerated communities. However, it is likely that acute neuropsychological effects are occurring.
- It's important to note that this is a continuation of racial disparities. Black and Latinx folks are far more likely to be incarcerated and contract/die from Covid-19, and these disparities are significant and exacerbated through the conditions of facilities. Far more research is needed to discern whether conditions of this nature cause novel effects, and the psychological impacts that the community may be facing due to the conditions of Covid-19.

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