

End-of-life Care in the Prison Environment (Supplement #14)

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Photograph: 'Grace Before Dying': <https://bit.ly/3QRHCJP>

N.B. Articles, postings, reports, etc., of particular interest are flagged with this icon:



[Aging Prison Population](#)

Challenges and support programs for aging in prisons: A literature review

TEMAS SOCIAIS (Portugal) | Online – 29 December 2024 – This study analyses the dynamics of ageing in a prison context, addressing the challenges faced by elderly prisoners and the effectiveness of social programmes aimed at improving their quality of life. The authors identify five central dimensions: insufficient infrastructure to meet the needs of this population, the impact of premature ageing on the prison environment, the limited effectiveness of social programmes, the need for palliative care, and structural and ethical barriers in the treatment of people with dementia. Ageing in prison requires urgent and integrated reforms that promote dignified ageing, health and social reintegration of older prisoners while ensuring full respect for their fundamental human rights. **Abstract:** <https://bit.ly/3Pilciz>

New Zealand's 30 prisoners over the age of 80

THE PRESS | Online – 29 December 2024 – They make up a tiny fraction of the country's prison population, but elderly prisoners require different needs to their younger counterparts, and their numbers are growing. Statistics released by [the Department of] Corrections ... show the country's total prison population fluctuates on a daily basis from about 9,600 people to 9,900. Of those, about 650 are aged 60 and over, while 30 prisoners are 80 or older. The number of prisoners aged 80 or over has tripled in the past four years. In 2022, [the Department of] Corrections surveyed old prisoners and found many were lacking appropriate care. Its Ageing Well Action Plan has seen developments made to prisons throughout the country that are continuing.¹ **Full text:** <https://bit.ly/3DAsQ6F>

1. 'Ageing Well Action Plan 2023-2026.' **Download at:** <https://bit.ly/40bFMZo>

N.B. The plan captures the Departments of Corrections' response to the Office of the Inspectorates' 2020 report, 'Older Prisoners – The lived experience of older people in New Zealand prisons,' and also the voices of older people in prison heard through a survey conducted in 2022. **Download at:** <https://bit.ly/3Pqumxi>



Higher costs and more risks for inmates aging inside of prisons

SANTA FE NEW MEXICAN (U.S.) | Online – 22 December 2024 – Dubbed a “community within a community” ... the geriatric unit [at the Central New Mexico Correctional Facility] is a place where older inmates who can still dress and feed themselves and use the toilet can live with others their age – along with a few younger inmates who help the more forgetful among them keep up with routines. Inmates who aren’t sick enough to be kept in the state’s long-term care unit ... and not fortunate enough to land a spot in the geriatric unit live in the general population, where they can be more vulnerable to the inherent health risks of prison life. Evidence shows aging inmates come with far higher costs to house because of their increased medical needs. **Full text:** <https://bit.ly/4a7XIYx>

Related:

‘Geriatric justice: Advocating for equity in healthcare for elderly populations in correctional facilities,’ *Geriatric Nursing (U.S.)* | Online – 18 December 2024 – The older incarcerated adult is a vulnerable and overlooked demographic within the U.S. healthcare system... The National Commission on Correctional Health Care’s position statement ... is a pivotal step in addressing healthcare gaps for this population.¹ **Full text:** <https://bit.ly/3VLsUGS>

1. ‘Care for Aging Patients in the Correctional Setting,’ National Commission on Correctional Health Care, March 2024. <https://bit.ly/3VF9DpN>

Ethnicity and older adults in the criminal justice system: A brief report from a nominal group

JOURNAL OF FORENSIC PSYCHIATRY & PSYCHOLOGY (U.K.) | Online – 20 December 2024 – Older adults from U.K. minority ethnic backgrounds face increased marginalisation and inequalities within prison settings compared to the general prison population. Understanding the health and social care needs of people from minority ethnic backgrounds is essential to ensure equivalency of care... Six key themes were identified: 1) barriers to communication; 2) relationships with prison staff; 3) health competence; 4) stigma; 5) importance of family and spirituality; and, 6) data collection and research. There was a consensus that the needs of older prisoners from minority ethnic backgrounds are complex and may not be adequately met in prison. **Full text:** <https://bit.ly/3DutwKG>

Related:

‘Older adults’ trajectories through the criminal justice system: a brief report from a nominal group,’ *Journal of Forensic Psychiatry & Psychology (U.K.)* | Online – 19 December 2024 – The number of older people in prison and entering the Criminal Justice System (CJS) is increasing. This population often presents with complex needs which can be underserved. This paper aims to explore staff experiences of supporting older prisoners... **Full text:** <https://bit.ly/4gJPYHE>

‘Older women in the criminal justice system: A brief report from a nominal group,’ *Journal of Forensic Psychiatry & Psychology (U.K.)* | Online – 19 December 2024 – The needs of older women in prison ... are not adequately met. As the numbers of older women in prison increase, many more will experience poor health and social outcomes. Structures must be put in place to ensure that older women’s needs are understood and met, and their voices heard. **Full text:** <https://bit.ly/3ZG16ow>

‘Social care for older adults in the criminal justice system: A brief report from a nominal group,’ *Journal of Forensic Psychiatry & Psychology (U.K.)* | Online – 19 December 2024 – In line with increasing numbers of older prisoners, demand for social care in prisons is also on the rise. However, social care provision for prisoners appears to be of variable quality and there is minimal research on how best to meet the social care needs of older people in this environment. **Full text:** <https://bit.ly/41LHPVf>



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Factors determining ageing processes and well-being of older adults serving prison sentences in Germany

SOCIAL SCIENCES | Online – 11 December 2024 – There is evidence that ageing processes in prison are accelerated. As older adults have complex healthcare needs, regular assessments and preventative measures can not only reduce costs for this group but also increase the chances of independent living options after release. Healthcare in prison should be under the control of health authorities to ensure that sufficient geriatric expertise is available. Although Germany has best practice provisions for this group in its separate prison departments for older adults, prisons have so far been reluctant to learn from international interventions and, for example, embrace models of peer-support, which are successfully implemented in other countries.¹ **Full text:** <https://bit.ly/426ImBB>

1. “‘Helping not hurting’”: Horizontal care and learning to peer care in prison,’ *Ethics & Social Welfare*, 2022;22(16):90-105. **Full text:** <https://bit.ly/49YCqwk>

N.B. See ‘Governance of Prison Healthcare...,’ at: <https://bit.ly/3Yu8xzl>

Korea’s prison population is aging rapidly

THE KOREAN TIMES | Online – 2 December 2024 – Korea’s aging population is driving changes in many sectors of society, and its prisons are no exception. The number of inmates aged 60 or older last year was 6,504, a significant increase from 2,801 in 2014. Meanwhile, their proportion of the total incarcerated population more than doubled to 17.1% from 8.4%. This means one out of six prisoners is in their 60s or older today. This bodes ill for the nation’s prison management system, which is already struggling with many other problems... Given that the government has a legal obligation to provide adequate healthcare services, it, at least in principle, would require major reforms to more than 50 correctional facilities across the country in order to address that change... **Full text:** <https://bit.ly/3Z95jk8>

[Prison Health Services](#)

Prevalence of disability among older adults in prison

JAMA NETWORK OPEN (U.S.) | Online – 27 December 2024 – Results of this cross-sectional study suggest that adults in prison are more likely to report disability than those in community settings, with the largest differences in cognitive difficulties. These differences persisted during the COVID-19 pandemic. These findings reinforce the importance of better understanding and scaling effective models of geriatric and palliative care within prisons. This study also reveals the need for more regular and detailed data collection to enable monitoring the prevalence and intensity of care needs, as well as for additional research examining effectiveness of models of care and supports designed to meet the care needs of the prison population. **Full text:** <https://bit.ly/4iNkgSd>

Related:

‘What is the quality of healthcare in U.S. jails and prisons?’ Prison Policy Initiative | Online – 19 December 2024 – While most jails and prisons in the U.S. have privatized medical services, there’s very little research available comparing mortality outcomes between different healthcare delivery models. **Download Prison Policy Initiative’s “data wish list” for 2025 (scroll down to ‘Incarceration experience and conditions’)** at: <https://bit.ly/4gKxZHk>



‘Handbook on health and punishment tackles carceral health,’ Prison Policy Initiative (U.S.) | Online – 20 December 2024 – The American Society of Criminology’s Division on Corrections & Sentencing ... has published the ninth volume of its handbook, with a theme of contemporary issues in health and punishment. This 800-page publication is a goldmine for people interested in how the criminal legal system intersects and interacts with physical, mental and public health. **Full text:** <https://bit.ly/49QVUmo>

Cont.

'The language barriers to healthcare in prison,' Prison Journalism Project (U.S.) | Online – 19 December 2024 – As a bilingual, first-generation Mexican American, I offer language assistance to all Spanish speakers who need support. Healthcare communication is a big issue. Often, people need help writing medical request slips and describing their symptoms. This is the first step for anyone trying to access healthcare in prison. **Full text:** <https://bit.ly/3ZGZfjb>



'A public health framework for carceral health,' *The Lancet* (U.S.) | Online – 7 December 2024 – The U.S. incarcerates 614 people per 100,000 – the fourth highest rate worldwide – at a cost of more than US\$182 billion per year. Although it is not clear that incarceration reduces crime, it results in a myriad of negative health outcomes for people who are incarcerated, their families and communities, and people working in carceral facilities. **First page:** <https://bit.ly/3VsErLb>

A review of the healthcare and social care needs of the older prisoner population in England and Wales

SOCIAL SCIENCES | Online – 25 December 2024 – The establishment of specialized prison wings or dedicated facilities is critical ... to meet the complex intersection of healthcare, social care and palliative care needs, providing a more age-appropriate and compassionate environment. These facilities could incorporate age-friendly infrastructure, specialized staff training, and integrated health and social care models to improve outcomes for this vulnerable group. The challenges presented by the ageing prison population demand innovative, empathetic, and evidence-based solutions. Policymakers within the health and social care system, and in the criminal justice system, must work collaboratively to rethink the treatment and positioning of older prisoners... **Full text:** <https://bit.ly/3Dw5jUm>

Related:

'Prison healthcare: The practical and ethical consequences of the current state of prisons,' *Medicine, Science & the Law* (U.K.) | Online – 10 December 2024 – The provision of healthcare in prisons globally is inevitably linked to the state of prisons. Poor prison conditions create and exacerbate health problems and compromise the ability of healthcare workers to deliver quality healthcare. In this editorial, the authors explore how this happens and what can be done about it. **Full text:** <https://bit.ly/4iqTZZE>

Recent U.S. News Media Coverage

'When healthcare is a bludgeon,' *Current Affairs*, 16 December 2024: <https://bit.ly/41AI71h>

'Healthcare for Maryland prisoners was compromised by poor oversight, audit finds,' Associated Press, 4 December 2024: <https://bit.ly/3Vv4Ac6>

'Nevada prison warden: Inmates' medical care neglected, constitutional rights violated,' *Corrections*¹, 3 December 2024: <https://bit.ly/3DjD235>

'Connecticut's new prison ombudsman wants better medical care for incarcerated people,' WNP 14 November 2024: <https://bit.ly/3OPzgRF>

Stripped of all dignity

INSIDE TIME (U.K.) | Online – 2 January 2025 – An National Health Service watchdog has found that prisoners are turning down important hospital appointments due to embarrassment at having to be cuffed to an officer at all times.¹ Patients of both sexes said the thought of being seen cuffed, in prison clothing, in waiting rooms made them think twice about attending hospital. The watchdog was told of prisoners “being made to wait in broom cupboards to avoid interaction with, or being seen by, other patients.” When prisoners saw doctors, escorting officers sat in on their confidential medical discussions. **Full text:** <https://bit.ly/4h0Yysc>

1. 'Healthcare provision in prisons: Continuity of care,' Health Services Safety Investigations Body, 2024. **Download report at:** <https://bit.ly/3W5w88m>



Your feedback would be appreciated: <https://bit.ly/4cdWVFD>

Toward equitable healthcare: Bridging the gap in the health of incarcerated individuals in Africa

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PUBLIC HEALTH CHALLENGES | Online – 21 December 2024 – Addressing the health disparities faced by incarcerated individuals in African correctional facilities is essential for achieving equitable health coverage. The severe overcrowding, inadequate healthcare, and poor living conditions create a breeding ground for many infectious diseases and mental health issues. Adopting the WHO prison health framework, enhancing judicial efficiency, and ensuring health ministries oversee correctional centers' healthcare are critical steps.¹ Establishing dedicated rehabilitation centers will facilitate the rein-

tegration of formerly incarcerated individuals. Implementing these recommendations will help reduce health inequities, promote public health, and help equitable health coverage in Africa. Full text: <https://bit.ly/3VSsdf2>

Although lessons from other countries provide valuable insights, several factors limit their applicability to African contexts. Resource constraints, overcrowded correctional facilities, and underfunded systems hinder the implementation of comprehensive programs.

1. 'The WHO prison health framework a framework for assessment of prison health system performance,' World Health Organization, January 2023. **Download at:** <https://bit.ly/4ilG1CJ>



The National Review of First Nations Health Care in Prisons...

DEPARTMENT OF HEALTH & AGED CARE (Australia) | Online – 6 December 2024 – There are universal challenges within places of detention that impact on prisoners' and people on remand's ability to access quality healthcare services to meet their needs. For First Nations people, these challenges are compounded by additional barriers resulting from the systemic racism and harmful attitudes that work to further restrict access to healthcare. Informants to this review reported that First Nations people in places of detention feel that requests for help are more likely to receive a punitive rather than therapeutic response. As the world's oldest continuous living culture, First Nations people also have deep cultural obligations, connections and ways of knowing and being. **Download report at:** <https://bit.ly/4ggz7Qk>



State of transition to Ministry of Health governance of prison healthcare in the Council of Europe region

RESEARCH GATE (Germany) | Online – 5 December 2024 – Addressing the complex health needs of incarcerated individuals is crucial to reduce health inequalities. Studies to date highlight challenges e.g., workforce issues, financial constraints, tensions between prison and public health systems. Transferring governance to the Ministry of Health, therefore, can take up to 10 years. Some states use a gradual approach across different administrative areas, with long-term preparation, monitoring and evaluation. Governance recommendations are adapted to domestic and cultural contexts when sharing responsibilities between Ministries. Further research and evaluation are needed to assess the benefits of transferring governance of prison healthcare to the Ministry of Health. **Access infographic at:** <https://bit.ly/41GXHsm>

N.B. See 'Governance of Prison Healthcare: "People in prison exist in a twilight zone between criminal justice and health systems" at: <https://bit.ly/3Yu8xzl>

Improving access to specialist care in correctional facilities through Ontario eConsult

PLOS ONE (Canada) | Online – 3 December 2024 – Ontario eConsult has a positive impact in correctional facilities and reduces the need for face-to-face referrals. This valuable tool is cost-effective, improves access to specialist care for people who are incarcerated, and eliminates unnecessary transportation with potential security concerns. Results of this study serve as a template for broader implementation, thereby supporting its uptake by additional correctional facilities in Ontario and across Canada. The results of this study will also aid in the implementation of eConsult in similar institutionalized settings, such as psychiatric hospitals and long-term care homes, where access to care and transportation of patients remains a challenge. **Full text:** <https://bit.ly/4ioxgNK>

[End-of-Life Care in Prisons](#)

Australia’s prison population is ageing. But should inmates spend their final days shackled to a bed?

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ABC NEWS | Online – 30 December 2024 – Before Mark Boughey can see his patients, he has to pass through several security measures... But once he’s inside the 40-bed hospital ward at Victoria’s Port Phillip Prison, Dr. Boughey’s focus is on those preparing to die. “As a person going there for the first time, you might find it a little bit stark, and you’ve just got to accept that is the space, but that’s the space for many people that’s become very familiar,” he says. “They’ve got their relationships with other prisoners and guards, and so it is their home and their environment, and so you treat it as such.” In his experience, most prisoners in palliative care would prefer to be here, inside the walls of the jail, rather than being transferred to a hospital – largely because of that familiarity. **Full text:** <https://bit.ly/40fO1Uo>



Peer caregiving in prisons: A humane response to a growing healthcare crisis

FORBES (U.S.) | Online – 24 December 2024 – As the demographics of the carceral system, and the country, change, institutions will be forced to adapt to meet the unique needs of their aging populations. While some prisons have taken steps to provide hospice and palliative care to a limited number of residents, many facilities are not equipped to care for a high volume of older adults, an Office of the Inspector General report confirms.¹ Compassionate release and medical parole are an option for the select few who qualify, but these programs are often underutilized and difficult to navigate. In response to these challenges, some non-profit organizations have stepped up to fill the gaps in care for incarcerated people, while state and federal governments work to create long-term change. **Full text:** <https://bit.ly/4iP5fiF>

1. ‘The Impact of an Aging Inmate Population on the Federal Bureau of Prisons,’ Office of the Inspector General, February 2016: <https://bit.ly/4fBQEEz>



Ageing and dying in prison: An investigation into the experiences of older individuals in federal custody



| Online – Modified 23 December 2024 – Prisons were never intended to be nursing homes, hospices or long-term care facilities. Yet increasingly in Canada, they are being required to fulfill those functions. Rising correctional healthcare costs, palliative care, and higher incidence of chronic disease reflect, at least in part, the impacts of a population that is aging behind bars. In some cases, keeping them behind bars is neither necessary, appropriate nor cost-effective. Yet there are currently few community alternatives for this vulnerable segment of the prison population. Many older individuals in federal custody seem to be languishing behind bars. Their sentences are no longer being actively managed, and there are little or no interventions to assist in their rehabilitation and return to the community. **Full text:** <https://bit.ly/4iQk4By>

Prison is no place for offenders who require end-of-life care

Sick, palliative and terminally ill individuals continue to live out their single greatest and expressed fear – dying in prison. Prison is an unsuitable place for an individual who requires end-of-life care (EoLC). Correctional Service of Canada should not be in the business of providing palliative or EoLC, nor should it facilitate or enable medically assisted death to take place in federal correctional facilities. Coordinated and accelerated case management of seriously or terminally ill individuals is required between correctional and parole authorities.

N.B. Download French-language edition of the Commission’s report at: <https://bit.ly/4iJFm3T>.

End-of-life care for older adults in the criminal justice system: A brief report from a nominal group

JOURNAL OF FORENSIC PSYCHIATRY & PSYCHOLOGY (U.K.) | Online – 16 December 2024 – As a result of the ageing prison population, it is anticipated that there will be a steady increase in individuals living in prison requiring access to end-of-life care in coming years. Research in this area is limited, despite it being a concern of policy makers for several years. Four themes were identified: 1) consistent family input; 2) staffing; 3) ensuring best practice; and, 4) person-centred assessment. There was consensus that care pathways are currently in place for older prisoners diagnosed with a life-limiting disease; however, the consistency of services is variable. Policy makers should consider the development of a national prison end-of-life strategy... **Full text:** <https://bit.ly/3ZCVKud>

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Engaging the hospice community in end-of-life care in prisons (Part 1)

ehospice | Online – 6 December 2024 – Community hospices can be an invaluable resource for prison healthcare services. As has been demonstrated, notably in the U.K., community hospices “bring to the table” experience and expertise in the education, training and support of custodial staff and also inmates. The challenges, however, are formidable. Prisons and correctional facilities are caught between the proverbial “rock and a hard place,” between issues of security and public safety, and the civil rights of the incarcerated to healthcare comparable to what is available to the populace-at-large. As has been clearly demonstrated, there’s a real opportunity for community hospices to engage with prisons and correctional services to affect a seismic shift on the quality of end-of-life care for one of Society’s most underserved and most vulnerable populations. **Full text:** <https://bit.ly/41k6lqU>

N.B. Part 2 focuses on specific initiatives. **Download at:** <https://bit.ly/3Yu8xzL>



A caged death: Efforts to improve quality of life and death for aging incarcerated women

INNOVATION IN AGING, 2024;8(Supplement): 992-993 (U.S.). Health outcomes, including disruption to physical, cognitive and psychosocial development, are exacerbated among older women. Further, women’s prisons lack peer caregiving programs available in some men’s prisons, highlighting gender inequities. Results underscore the critical role of adequate healthcare access to improve quality of life and death during incarceration... There is also a dire need for gender-specific care, preventative healthcare, and early intervention strategies to address the unique health needs of incarcerated women as they age and die in prison. Few examples of programs/policies providing equitable access to comprehensive healthcare services are available. **Abstract:** <https://bit.ly/3BQT4kR>

New fellowship will help imprisoned women plan for end of life

WASHINGTON STATE UNIVERSITY INSIDER (U.S.) | Online – 9 December 2024 – Incarcerated individuals have few personal rights, but one they do retain is the ability to create advance directive plans for their healthcare. Unfortunately, few know that this is the case. A new project led by a Washington State University graduate student will educate more incarcerated people about their options as they approach the end of their lives. **Full text:** <https://bit.ly/407qWDu>



Talk living to me: Experiencing life-limiting illness behind bars

BC Centre for Palliative Care (Canada) | Online – 13 November 2024 – Despite international recognition of the importance of palliative care (PC) as a shared universal right, a health equity gap exists between the general and carceral populations in Canada. With growing numbers of aging people in custody, and their disproportionate risk of adverse health outcomes, it is crucial to understand what care services are available to those diagnosed with life-limiting illnesses and, for those who are dying, to understand how their PC needs are met. Currently, little is known from a Canadian perspective about how individuals in custody or under supervision in the community receive care... **Download YouTube presentation at:** <https://bit.ly/3OPRQZM>

[Grief & Bereavement](#)

Bereavement help for the correctional community

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NATIONAL PRISON HOSPICE ASSOCIATION (U.S.) | Online – Accessed 21 December 2024 – Grief is a universal experience that can be overwhelming for everyone it touches. This profound human emotion can be compounded when the grievers are inmates, their families, victim families, and correctional staff. For inmates grief is often cumulative. In grief counseling within the correctional setting, it is not uncommon to work with persons who have had multiple losses. The reality of prison and jail life makes it very difficult for individuals to do the kind of grief work that leads to healing. Providing basic grief counseling, offering appropriate written materials, and making referrals for further support and assistance can make a difference. **Full text:** <https://bit.ly/3VSLA7z>

N.B. Grief and bereavement support is discussed in ‘End-of-life care behind bars: Engaging the hospice community...’ (Part 2). **Download at:** <https://bit.ly/3Yu8xzL>

[Compassionate Release](#)

“Huge problems” for seniors in state’s prisons

SENIOR VOICE (U.S.) | Online – 2 January 2025 – [The State of Alaska’s] prisons are not built to be hospitals. They’re not built to be senior centers, they’re not built to really be therapeutic or a humane space for anybody, but especially seniors, and the result ... is really devastating. [The State has] medical parole ... [and] ... geriatric parole, but very few people apply for them, and the people who do apply for them are not granted. “In one case, a couple years ago, they finally did grant somebody medical parole, but they wouldn’t let him get out for I think it was close to seven months, and he actually died before he was able to get out. Prisons are not built to support people that have a lot of the complicated health issues that seniors tend to develop.” **Full text:** <https://bit.ly/3BRLWol>

Related:

‘Why Maryland needs geriatric and medical parole reform,’ *News From the States* (U.S.) | Online – 26 December 2024 – Maryland’s current parole practices often deny release to individuals who are elderly, severely ill and pose no threat to public safety – at immense human and financial cost. The Maryland Equitable Justice Collaborative ... recently adopted a policy recommendation to expand medical and geriatric parole eligibility.¹ **Full text:** <https://bit.ly/3BPmj7z>

1. ‘Recommendations to address mass incarceration of Black Marylanders in state prisons and jails,’ Maryland Equitable Justice Collaborative, December 2024: <https://bit.ly/41S0pLD>

Ensure effective implementation of advisory for terminally ill prisoners High Court tells Maharashtra government

THE WEEK (India) | Online – 17 December 2024 – The Bombay High Court has asked the Maharashtra government to ensure the effective implementation of a 2010 advisory concerning the treatment of terminally ill prisoners which recommends medical bail or house arrest for inmates suffering from such diseases.¹ The bench referred to an advisory issued by the Union Ministry of Home Affairs – any prisoner who is identified as suffering from any terminal illness shall be either granted bail on medical grounds, parole, furlough, or placed in house arrest or the custody of family members. The advisory also says that in such cases, special medical care could be given to such persons in the prison itself. The court directed the Maharashtra government to file a detailed affidavit on the issue.... **Full text:** <https://bit.ly/4gN9yJl>

1. ‘Advisory on the policy for the treatment of terminally ill prisoners/inmates,’ Ministry of Home Affairs, Government of India, August 2010: <https://bit.ly/49OhCYc>

N.B. See ‘Compassionate Release: Call for humility and more leniency’ at: <https://bit.ly/3Yu8xzL>

[Interesting Reads You Might Have Missed](#)



A systematic literature review exploring the psychosocial aspects of palliative care provision for incarcerated persons: A human rights perspective

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INTERNATIONAL JOURNAL OF PRISONER HEALTH (Australia) Online – 15 December 2021 – A review of 26 articles revealed multiple models of care, with the U.S. prison hospice program depicted as optimal, because of the use of trained incarcerated caregivers, working as aides to the interprofessional team. The bereavement needs of caregivers were highlighted. The barriers to adequate psychosocial care were negative public discourse, prison processes and resources, provider attitudes and the incarcerated person's level of knowledge and trust. Identified facilitators were related to incarcerated persons' caregiving programs, a sense of purpose and visitation leniency. Human rights principles were identified in studies that featured compassionate release... **Access full text at:** <https://bit.ly/3B6pSWB>

Establishing hospice care for prison populations: An integrative review assessing the U.K. and USA perspective

PALLIATIVE MEDICINE, 2012;26(8):969-978. This review examines the evidence from the U.K. and the U.S. on the promotion of palliative care (PC) in the prison sector, summarizing examples of good practice and identifying barriers for the provision of end-of-life care within the prison environment both in the U.S. and the U.K. The results highlight a number of issues surrounding the implementation of PC services within the prison setting and emphasize the disparity between the U.S. model of care (which emphasizes the in-prison hospice) and the U.K. model of care (which emphasizes PC in-reach) for dying prisoners. The provision of PC for the increasing prison population remains under-researched globally, with a notable lack of evidence from the U.K. **Access full text at (click on pdf icon):** <https://bit.ly/3Z09PSf>

WE SAT WITH HIM IN HIS CELL when we could and helped him to move and the nurse kept popping in to see him – she was upset that he had to stay there. He wasn't allowed any morphine to kill his pain and died a few days later in agony in his cell and alone.

Characteristics of prison hospice programs in the United States

AMERICAN JOURNAL OF HOSPICE & PALLIATIVE MEDICINE, 2011;28(4):245-252. Hospice programs have emerged over the last 40 years as both an effective and humane practice for responding to terminal illnesses in the free society. More recently, hospice has diffused throughout state, federal, and municipal correctional systems. Via a survey of the 69 known prison hospice programs in the U.S. the authors sought to determine how prison hospice programs were similar or dissimilar to those in the free society. Prison hospices have a more stringent screening process for volunteers and require more volunteer training prior to interacting with a hospice patient. Prison hospice programs tend to follow the National Prison Hospice Association and GRACE Project guidelines.^{1,2} **Abstract (w. references):** <https://bit.ly/4fs5bmV>

1. 'Prison Hospice Guidelines,' National Prison Hospice Association. **Download at:** <https://bit.ly/3V2pFKG>
2. GRACE (Guiding Responsive Action for Corrections at End of Life) Project: <https://bit.ly/3YVtF0R>



To keep abreast of current thinking on palliative and end-of-life care check out 'Literature Search' posted each month on the website of the International Association for Hospice & Palliative Care: <https://bit.ly/3WWxUYC>

Barry R. Ashpole, Ontario, CANADA

Biosketch: <https://bit.ly/3XMTRs4>