

End-of-life Care in the Prison Environment (Supplement #8)



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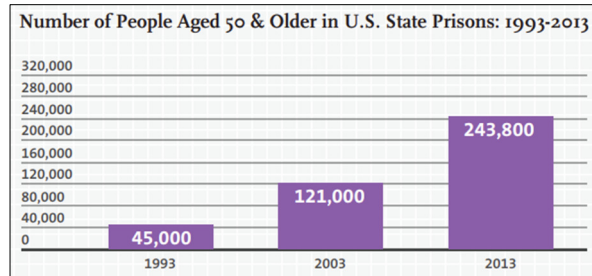
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Aging Prison Population

Webinar

The high cost of low risk: The crisis of America's aging prison population

THE OSBORNE ASSOCIATION (U.S.) | Online – 11 June 2024 – The aging prison population represents a national, human-made, systemic epidemic that has been decades in the making. Although there is no commonly agreed-upon age at which an incarcerated individual is “old” ... medical practitioners and corrections professionals agree that adverse life circumstances both during and prior to incarceration lead to accelerated aging. Given existing trends and projections, it is clear that the number of older people in prison will continue to rise unless meaningful action is taken. Most older people in prison ... have already spent decades behind bars, pose little or no risk to public safety, and often require significant age-related medical care. ¹ **Download webinar at:** <https://bit.ly/4b4YOTD>



1. 'The high cost of low risk: The crisis of America's aging prison population,' The Osborne Association, May 2018: <https://bit.ly/45o2luZ>

Related:

'Best films discussing the challenges faced by the elderly in prison: A cinematic exploration,' Factual America (U.S.) | Online – 25 June 2024 – These films provide a critical lens through which to understand the compounded difficulties elderly prisoners face, from declining physical health to the often overlooked emotional toll. Such movies contribute to broader conversations about justice, empathy, and reform within the penal system. Elderly inmates face significant difficulties... **Full text:** <https://bit.ly/3XzNfRf>

[Prison Health Services](#)

Addressing enduring health impacts of incarceration on older adults: A call for academic and policy reform

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THE JOURNALS OF GERONTOLOGY (U.S.) | Online – 29 June 2024 – The critical analysis of healthcare accessibility and quality for incarcerated individuals reveals significant deficiencies that perpetuate health inequities. Healthcare services within correctional settings frequently fail to meet community standards, a disparity that continues to affect individuals upon their re-entry into society. The systemic failure to provide continuous and adequate healthcare contributes to the complexity of managing chronic conditions post-release and underscores the urgent need for reformative actions. Ensuring the integration of comprehensive health services and continuity of care from incarceration to community settings is imperative to address these health disparities and improve overall public... **Full text:** <https://bit.ly/3XKpvK8>

Related:

'Health equity for people living in correctional facilities: Addressing bias, stigma, and dehumanization,' *Research in Nursing & Health (U.S.)* | Online – 15 June 2024 – Individuals living in carceral systems oftentimes are not prioritized in ways that ensure that their rights and dignity are protected. Many families and communities have been and continue to be separated and negatively impacted by disparities in judges' sentencing practices resulting in inequities in treatment and outcomes. **Full text:** <https://bit.ly/4b5BHbl>

'Medicaid for medical-correctional care...,' *Journal of General Internal Medicine (U.S.)* | Online – 3 June 2024 – Incarcerated persons have a constitutional guarantee to have their serious medical needs addressed, though the treatment these patients receive in both carceral and community facilities differs from that provided to free patients, with access to quality healthcare often deficient. The medical care delivered to people who are incarcerated lacks oversight from usual governing bodies. **Full text:** <https://bit.ly/3z1sdAD>

'Care or complicity? Medical personnel in prisons,' *The Hastings Center's Report, 2024;54(1):2 (U.S.)*. Medical personnel working in prisons and jails take on risky work for highly vulnerable and underserved patients. They are to be lauded for their professional commitments. Yet at the same time, prison care undercuts the ability of medical personnel to uphold their own professional standards and sometimes fails in even basic health protection. **Abstract:** <https://bit.ly/4ekwAqM>

Prison nursing: The challenges and legal implications

CLINICAL WITNESS REPORTS (U.K.) | Online – 14 June 2024 – The environment in which prison nurses operate is fundamentally different from other healthcare settings. The security-first approach often overrides medical priorities, impacting the quality and accessibility of healthcare services. Nurses must balance security requirements with patient care, which can complicate even routine medical tasks. Additionally, the prison population has unique demographics, including a higher prevalence of chronic diseases. These factors necessitate a broad skill set and an adaptable approach to care... **Full text:** <https://bit.ly/45sLU0i>

Resources for secure environments

ROYAL COLLEGE OF GENERAL PRACTITIONERS (U.K.) | Online – 18 June 2024 – Providing healthcare in secure environments (SE), such as prisons, presents unique challenges for GPs and primary care professionals. The College's Healthcare in Secure Environments Project team has drawn up a comprehensive set of weblinks to provide sources of information to support healthcare professionals working in SE. **Full text:** <https://bit.ly/4c7EMZW>



TO KEEP ABREAST OF CURRENT THINKING in hospice and palliative care check out 'Literature Search' posted each month on the website of the International Association for Hospice & Palliative Care: <https://bit.ly/3WWxUYC>

The unmet healthcare needs of indigenous people incarcerated in tribal jails

JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION (U.S.) | Online – 12 June 2024 – It is imperative that effective and long-lasting healthcare-related policies, programs, structures, and practices are implemented. All solutions must uphold justice, promote health, respect the rights and well-being of people incarcerated on tribal lands, strengthen Native Nations' sovereignty, and incorporate tribal perspectives throughout every step of development. In addition, all possible interventions need to be made with the support of the federal government, financial and otherwise. The federal government, which has suppressed the sovereignty and growth of Native Nations, cannot only provide resources that mirror current structures and systems. **Full text:** <https://bit.ly/3z8vuy1>

Related:

'**The health and wellbeing of First Nations people in Australia's prisons 2022,**' Australian Institute of Health & Welfare in Australia | Online – May 2024 – There has been increasing recognition that improving cultural safety for First Nations people using healthcare services can improve access to and the quality of healthcare. This means a health system where First Nations cultural values, strengths and differences are respected, and racism and inequity are addressed. **Full text:** <https://bit.ly/3Xoovvd>

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

Just Care: Usability testing of e-learning modules for peer caregivers living in prison

JOURNAL OF OFFENDER REHABILITATION (U.S.) | Online – 2 July 2024 – Training men and women who live in prison to assist corrections staff with the care of growing numbers of older, sicker, cognitively impaired, and dying people in prison is an innovative and viable option to help meet pressing care demands. The purpose of this paper is to report findings from the usability testing of the fully developed *Just Care* electronic learning program for training carefully vetted people living in prison to assist staff with geriatric and end-of-life care. Overall, both the incarcerated and staff participants found the program easy to navigate and the interactive content was useful, engaging, and relevant to caring for aging and dying people who are incarcerated. **Abstract:** <https://bit.ly/45UGQIF>

Subjective and inter-subjective meanings associated with peer caregiving amongst male and female peer support workers in two U.S. state prisons

RESEARCH SQUARE (U.K.) | Online – 23 May 2024 – With the increasing number of older, frail, disabled and dying persons in U.S. prisons and other Western nations, awareness of the need and value of high-quality peer care is growing. Three thematic areas emerged in this study: 1) "motivation and benefits"; 2) "challenges and costs"; and, 3) "learning" associated with caregiving. The findings reveal there are several differences and similarities between male and female caregiver experiences. However, both groups enjoyed intrinsic and extrinsic rewards associated with their roles. Male peer caregivers appear to be motivated by issues related to identity, masculinity, and religious beliefs, while women were driven by the value of meaningful relationships. **Download article at:** <https://bit.ly/4ccYzH0>

Extract:

Most scholarship surrounding peer caregivers in the U.S. relates to hospice and end-of-life care, whereas researchers from the European Union, Israel and the Philippines focus on the lived experience of ageing in prison.

N.B. This is a preprint; it has not been peer reviewed by a journal.



Share this resource with a colleague.

End of life in hospitalised prisoners: A group comparison of palliative medicine and hospital use

BMJ SUPPORTIVE & PALLIATIVE CARE (Australia) | Online – 30 April 2024 – Providing optimal palliative and end-of-life care (P&EoLC) for people in prison with advanced progressive disease is a growing challenge. This study aimed to examine hospital and palliative care utilisation for people in prison who are hospitalised during the final three months of life and to compare with a disease-matched non-incarcerated patient cohort. People in prison have prolonged acute care public hospital stays and are more likely to experience escalation of care at the end of life. Future opportunity may exist for increased access to formal subacute care settings for people in prison with life-limiting illness to receive optimal P&EoLC. **Abstract:** <https://bit.ly/4eodRuf>

[Grief & Bereavement](#)

A confined encounter: The lived experience of bereavement in prison

CRUSE BEREAVEMENT CARE SCOTLAND (U.K.) | Online – Accessed 12 June 2024 – The author explores the experience of bereavement in prison through drawing on the author's counselling work with bereaved male inmates of a Scottish prison and focussing on the bereavement experience as lived and described by one client in his own words. The paper depicts the experience of bereavement behind bars as deeply distressing and despairing. It portrays how the powerful sociocultural prescriptions of the prison environment can cause the grief of prison inmates to be profoundly disenfranchised... The author of the article calls for the development of support systems to ensure a level of bereavement care more attuned to the

needs of imprisoned persons. **Full text (click on pdf icon):** <https://bit.ly/3KG6Nvz>

How I grieved my father's death from prison

PRISON JOURNALISM PROJECT (U.S.) | Online – 21 June 2024 – My father's funeral was to be held on the third Saturday in June... My environment doesn't allow me the proper space to grieve, so I had to find moments in which I could grab some solitude and process my thoughts and feelings in the days leading up to the funeral. I found myself staying up until the wee hours of the night to be alone with my pain. **Full text:** <https://bit.ly/4eHNXSJ>

[Care Planning & Serious Illness Conversations](#)

End-of-life care planning: Perspectives of returning citizens

JOURNAL OF HOSPICE & PALLIATIVE NURSING, 2024;26(2):82-90 (U.S.). Demographic shifts toward an older and sicker prison population present challenges for corrections leaders and incarcerated people. The priority of custody and control over care in prisons can deprive people of a modicum of autonomy even about expressing their end-of-life wishes. This study was undertaken to inform best practices and identify essential components of end-of-life care planning (EoLCP) for people who will likely die incarcerated. EoLCP themes included: understanding of and experience with advanced directives/care planning (AD/ACP); defining AD/ACP; timing of AD/ACP accessibility to healthcare resources; how to approach EoLCP in prison; advantages of EoLCP; and, barriers to EoLCP. **Abstract:** <https://bit.ly/3KQk7xn>



PAST ISSUES OF 'END-OF-LIFE CARE IN THE PRISON ENVIRONMENT' can be download from the Palliative Care Network website – #1, #2 & #3 (July, September, November 2023) at <https://bit.ly/3QGRyXC>; #4 & #5 (January, March 2024) at: <https://bit.ly/2RdegnL>

Position Statement (Extract)

Correctional health care administrators can support “what matters” to aging patients

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NATIONAL COMMISSION ON CORRECTIONAL HEALTH CARE (U.S.) | Online – Accessed 20 June 2024 – Administrators can support “what matters” to aging patients by: a) training healthcare workforce to identify patient preferences and goals as well as carry out advance care planning discussions; b) training healthcare teams to provide evidence-based palliative care; and, c) providing oversight to maximize efficiencies in the evaluation/review of medical/compassionate release requests. Further: a) discussing advance care preferences with their patients upon incarceration ... and documenting these preferences in the patient’s medical record; b) providing palliative and compassionate end-of-life care that values patient preferences... **Download position statement at:** <https://bit.ly/3VF9DpN>

Compassionate Release

Compassionate release: A call to social workers

JOURNAL OF CORRECTIONAL HEALTH CARE (U.S.) | Online – 11 June 2024 – An increase in the number of older people incarcerated in prisons has given rise to increased costs of correctional healthcare. Despite the many benefits of compassionate release, it is rarely used. Citing barriers at the micro, mezzo, and macro levels, the authors contend that social workers are uniquely suited to increase the number of people released through this mechanism owing to a unique knowledge and skill set. They offer eight specific strategies for how social workers can increase the use of compassionate release by working with individuals, conducting and disseminating research, and engaging in advocacy as shaped by core professional principles and values and related curricula. **Abstract:** <https://bit.ly/4aZdZNW>

Michigan House committee passes bill that would allow terminally ill inmates out of prison

KION 46 NEWS (U.S.) | Online – 19 June 2024 – A bill that would allow medically fragile inmates out of prison in Michigan is in the home stretch before being sent to Gov. Gretchen Whitmer for approval. The new law would allow medically fragile inmates to live out the final days of their sentence and their lives in hospice care at home. “It’s about recognizing that prison isn’t going to be the right setting for certain people who are at end of life,” said Kyle Kaminski, the acting spokesperson for the Michigan Department of Corrections. **Full text:** <https://bit.ly/4etrPeB>

Related:

‘Prisoner dies 12 days after Pennsylvania judge granted compassionate release for health reasons,’ The Associated Press (U.S.) | Online – 5 June 2024 – A Pennsylvania man who had been serving life for second-degree murder died over the weekend, 12 days after being granted a medical transfer from prison to a facility that could better treat his condition... Pennsylvania’s compassionate release law covers incarcerated people who are seriously ill and expected to die within a year. **Full text:** <https://bit.ly/3VwXkgk>

[Assisted Dying Practices](#)

Prison MAiD safe: Correctional Service of Canada

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THE CATHOLIC REGISTER | Online – 27 June 2024 – Despite concerns surrounding the implementation of Medical Assistance in Dying (MAiD) for Canadian federal prisoners, the Correctional Service of Canada (CSC) is confident the process is fool proof. The *Register* published a story that outlined the multiple weaknesses in the system as detailed by Correctional Investigator Ivan Zinger. ¹ “There is no requirement for CSC to convene an investigation or mortality review process following death. There is no requirement to inform this office of a MAiD procedure. Though the guidelines assume that MAiD will be completed in the community, they still provide, in exceptional circumstances, for the

procedure to be performed in a CSC treatment centre or regional hospital,” Zinger told the *Register*. **Full text:** <https://bit.ly/45GHEug>

Assisted dying practices: Resources

The International Association for Hospice & Palliative Care recently published a special issue of its newsletter on assisted dying practices: <https://bit.ly/3n3LwE4>. In addition, an annotated, representative listing of journal articles on the topic published in the past year, primarily in medical journals, can be download at the Association’s website: <https://bit.ly/4cKsqLh>

1. ‘Concerns surround MAiD for prisoners,’ *The Catholic Register*, 18 June 2024: <https://bit.ly/45sbxyB>

Related:

‘**Prisoner rights,**’ *The Catholic Register* | Online – 27 June 2024 – One of the Correctional Service of Canada’s (CSC) top priorities is ensuring those who are incarcerated in Canada’s federal institutions have access to quality, safe, patient-centred and culturally-responsive care. This is underscored by CSC’s legislative mandate and the Corrections & Conditional Release Act ... As part of this, CSC is responsive to the needs of offenders, including quality and compassionate palliative and end-of-life care. <https://bit.ly/4ciZGW9>

Euthanasia in detention and the ethics of caring solidarity: A case study of the ‘Tarragona Gunman’

BIOETHICS (Spain) | Online – 14 June 2024 – Although there are very few cases in the world where prisoners have received euthanasia, the one discussed is the only known case where both the public prosecutor’s office and the private prosecutors judicially opposed the defendant’s euthanasia. This article aims to offer a new perspective on the ethical legitimacy of detainees’ access to euthanasia: the ethics of caring solidarity. The authors address the two main arguments proposed in the literature to justify euthanasia in detention: respect for the autonomy of the detainee and the principle of equivalence of care. Having identified serious shortcomings in both arguments, they argue the perspective of caring solidarity offers a better ethical basis for people in detention’s access to euthanasia. **Full text:** <https://bit.ly/4c0M8OY>

[From the Archives](#)

Prison inmates deserve access to high-quality palliative care: A call to action to support terminally ill incarcerated people

CANADIAN NURSE (Canada) | Online – 18 July 2022 – Currently, palliative care for inmates in Canada is largely left to Correctional Service Canada, which was never designed or equipped to provide such care. Within prison walls, inmates’ end of life is fraught with fears for personal safety, increased suffering due to unmanaged pain, and feelings of isolation. Just as the number of aging and dying individuals in correctional settings is on the rise ... so is the need to address their health concerns and protect the sanctity of dignifying death. At the same time, a lack of qualified personnel who are trained to provide specialized care within the correctional setting acts as a compounding barrier to the delivery of palliative services and the recognition of holistic needs of terminally ill inmates. **Full text:** <http://bit.ly/3G4LUYU>

Preparing to die behind bars: The journey of male inmates with terminal health conditions

JOURNAL OF CORRECTIONAL HEALTH CARE, 2018;24(3):232-242 (U.S.). The prison population is graying as more individuals are receiving longer sentences without opportunities for parole or release for health-related reasons. While research has expanded on end-of-life care in and out of prison settings, to date there has been little research conducted on how inmates experience dying behind bars. This qualitative study revealed four main themes: 1) Losing a piece of everything; 2) Not sure what to feel; 3) Where will I die; and, 4) Finding purpose in the midst of purposelessness. These themes characterize the central issues discussed by inmates as they considered death behind bars. This study provides insight into how inmates view their dying process. **Abstract (w. references):** <http://bit.ly/2JqhKUI>

Palliative and end-of-life care in prisons: A mixed-methods rapid review of the literature from 2014-2018

BMJ OPEN (U.K.) | Online – 21 December 2018 – Many of the key findings of this review reinforce points made in the Wion and Loeb review,¹ such as the value of inmate hospice volunteers and the physical barriers presented by the prison environment. Other findings which were relatively minor in the previous review have become major themes in the literature published since 2014, such as the importance of maintaining family relationships, and the potential grief burden of inmate hospice volunteers. Finally, this review adds the main finding that relationships both inside and outside of prison are of importance to prisoners at the end of life, and recommends that those involved in their care should support prisoners to maintain these relationships. **Full text:** <https://bit.ly/2PTCRR2>

1. 'End-of-life care behind bars: A systematic review,' *American Journal of Nursing*, 2016;116(3):24-36. **Full text:** <https://bit.ly/4bzMon8>

The impact of prison hospice: Collaboration among social workers and other professionals in a criminal justice setting that promotes care for the dying

JOURNAL OF SOCIAL WORK IN END-OF-LIFE & PALLIATIVE CARE, 2007;2(4):85-102 (U.S.). In addition to learning that all [14] prison hospices in the study operate using an interdisciplinary team model and that most report high quality collaboration on the hospice team, the following additional five themes emerged: 1) Administrators and wardens are very supportive while correctional staff provides mixed support to team and program; 2) Greater collaboration with those outside prison hospice is critical; 3) Collaboration through prison hospice has a positive impact on dying prisoners; 4) Collaboration through prison hospice has a positive impact on prisoner volunteers; and, 5) Collaboration through prison hospice has a positive impact on the entire culture of the prison. **Abstract:** <https://bit.ly/4c8alSR>

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