



LETTERS

HEALTHCARE IN PRISONS

Fighting covid-19 outbreaks in prisons

Hong Yang *lecturer*¹, Julian R Thompson *professor*²¹University of Reading, Reading RG6 6AB, UK; ²UCL University College London, London, UK

Poor prison healthcare has been reported by Armstrong.¹ Improving prison health services is critical for fighting epidemics such as covid-19.

On 20 February 2020, over 500 new covid-19 cases in five prisons ended 16 days of continuous decline in new cases in China (excluding Hubei province).² Over half were in Hubei, including 230 at Wuhan Women's Prison and 41 at Shayang Hanjin Prison. A total of 207 cases, including seven guards, were at Rengcheng Prison (Shandong), and a further 34 at Shilifen Prison (Zhejiang).

Prisoners are at much higher risk of infectious diseases than communities outside.³ Highly infectious prison environments are fuelled by overcrowding, poor health services, high risk behaviours, security versus public health concerns, and lack of empathy for prisoners.⁴

Over 10 million people are incarcerated worldwide.⁵ The UN Basic Principles for the Treatment of Prisoners states that prisoners "shall have access to the health services available in the country without discrimination on the grounds of their legal situation."⁶ But burgeoning prison populations and epidemics mean that healthcare services are increasingly strained. In China, there were 1.65 million prisoners in 2018, compared with only about 16 000 health workers in prisons.⁷ Infectious diseases account for around 17.5% of prison deaths. The tuberculosis infection rate in prisons of about 1250 cases per 100 000 is 3.4 times China's national average.

Eruption of covid-19 in Chinese prisons emphasises the need to improve prison healthcare.³ Although attention has been focused on hepatitis C, HIV, and tuberculosis, urgent research is required on emerging infectious diseases. Health education for inmates and prison staff must be intensified, and better treatment and prevention measures require increased funding. More non-custodial sentences would decongest prisons, reducing the potential for the outbreaks seen in China. Links between prison and national health services should be strengthened.

Competing interests: None declared.

Full response at: <https://www.bmj.com/content/368/bmj.m724/rr-0>.

- 1 Armstrong S. The prison service is still failing inmates' healthcare needs. *BMJ* 2020;368:m724. 10.1136/bmj.m724 32102792
- 2 China Central Government. Report of covid-19 on 21 February 2020. 2020. <http://www.gov.cn/xinwen/gwylflkjz25/wzsl.htm>
- 3 Fazel S, Baillargeon J. The health of prisoners. *Lancet* 2011;377:956-65. 10.1016/S0140-6736(10)61053-7 21093904
- 4 Simooya OO. Infections in prison in low and middle income countries: prevalence and prevention strategies. *Open Infect Dis* 2010;4:33-7. 10.2174/1874279301004010033
- 5 Walmsley R. *World prison population list*. 12th ed. 2018. https://www.prisonstudies.org/sites/default/files/resources/downloads/wppl_12.pdf.
- 6 United Nations. Basic principles for the treatment of prisoners, Adopted and proclaimed by General Assembly resolution 45/111 of 14 December 1990. United Nations, 1990. <https://www.ohchr.org/en/professionalinterest/pages/basicprinciplestreatmentofprisoners.aspx>
- 7 Li Y. Progress of prisoner's life and sanitation in China. *Res Crime Reforma* 2014;1:57-9.

Published by the BMJ Publishing Group Limited. For permission to use (where not already granted under a licence) please go to <http://group.bmj.com/group/rights-licensing/permissions>