

# Health Harms of Incarceration: Centering Lived Experience, Healing, and Action

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# Who We Are



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# WSPHA Session Goals:

Washington State Public Health Association (WSPHA)

2025 Conference Track: Health Equity, Racism as Public Health Crisis

- Participants will have a better understanding of the health of incarcerated individuals and health impacts of incarceration in our state and recognize that incarceration is a public health crisis that should be addressed by each of us as community members and as part of our positional roles.
- At risk of re-traumatizing themselves, incarcerated individuals recognize the need for people to see their humanity and experiences through their eyes. This session will help guide people using a trauma informed and humanizing lens through audio-visual experiences and stories, motivating participants toward action.
- This session will provide ways that participants working in different parts of the health system and as individuals can actively participate in creating health equity and reducing health harm from incarceration.



"2020" by Gilberto Rivera  
Marking Time: Art in the Age of Mass Incarceration



## **Carceral Health Equity Workgroup**

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Nearly 100 individuals have been consulted to inform our understanding of priority topics related to carceral health equity.

Quality of  
Care

Dietary  
Issues/Food

Mental Health

Developing a prioritized list of health priorities and assessing against areas of DOH influence.

Air Quality &  
Environment

Community  
Oversight

Re-entry &  
Reintegration

# Today's Incarcerated Voices



Robb



Ireion



Davven



Russell



## Resolution (2022): That Racism is a Public Health Crisis in Washington State

“Campaign for governmental jurisdictions to prioritize programs dismantling systemic racism, and economic and racial inequalities and **away from imprisonment and incarceration systems**”

“Health cannot just be absence of disease, but whole person well-being. People are not whole without their stories, their culture, and their history. Racism robs them of their past, **makes them invisible, and steals their health.**”

Prisons are a public health crisis, the American Public Health Association says



## Advancing Public Health Interventions to Address the Harms of the Carceral System

October 25, 2021 • 202117



AMERICAN PUBLIC HEALTH ASSOCIATION

*For science. For action. For health.*

## Incarcerated people have a higher prevalence of acute and chronic health conditions than the general U.S. population.

Higher rates of:

- infectious diseases (e.g. COVID-19)
- mental health diagnoses and substance use disorders
- traumatic brain injuries and stroke
- Chronic disease (e.g. Hypertension, heart-related problems, diabetes, asthma)
- Cancer
- Violence (self-directed, interpersonal, by the state)
- Overall lower life expectancy

**APHA urges federal, state, tribal, territorial, and local governments and agencies to take action across 15 evidence-based action steps.**



AMERICAN PUBLIC HEALTH ASSOCIATION

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# Healthy People 2030

## Incarceration as a social determinant of health

### **An incarcerated individual's family is negatively affected by their incarceration:**

- Children of incarcerated parents may be more likely to live in poverty and be homeless, more likely to witness domestic violence or substance abuse
- Children of incarcerated parents often have higher rates of learning disabilities, developmental delays, speech/language problems, and attention disorders
- Children of incarcerated parents have been found to be up to 5 times more likely to enter the criminal justice system than children of non-incarcerated parents

**People without high school diplomas or GEDs have a greater likelihood of being incarcerated than their more educated peers.**

**Women with a history of incarceration are more likely to have experienced childhood trauma and physical and sexual abuse.**

**Many people face obstacles reintegrating into society following their release, such as problems with family, employment, housing, and health.**

- **In one study, researchers found that within the 2 weeks following release, people who were formerly incarcerated were 40 times more likely to die of an opioid overdose than someone in the general population and also at a higher risk for committing suicide.**

# **Lived Experience and Personal Impact**

# Lived Experience and Personal Impact

## Incarcerated Voice



Robb

## Responding to Question:

*What did/does access to healthcare look and feel like inside?*

# Lived Experience and Personal Impact

## Incarcerated Voice



Russell

## Responding to Question:

*What did/does access to healthcare look and feel like inside?*

# Lived Experience and Personal Impact

## Incarcerated Voice



Robb

## Responding to Question:

*Sharing About Others:*

*What did/does access to healthcare look and feel like inside?*

# HEALTH HARMS in WA

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According to WA Office of Corrections  
Ombuds (OCO):



## Health Care

Related to medical, mental health, ADA, and dental were the most frequently received type of complaint in SFY 2024. 2024 Annual Report.

## Overdoses and Suicides

Of the 26 unexpected fatalities in SFY 2024, the most common cause of **unexpected** deaths in WA-DIC was overdose (also in 2023):

- 7 people died of overdose
- 5 people died of suicide
- 4 people died of cancer
- 3 people died of vascular disease
- 3 people died of infection/sepsis
- 3 people died of respiratory complications
- 1 person died because of diabetes.

# **Systemic Racism & Cultural Harm**

# Systemic Racism & Cultural Harm

## Incarcerated Voice



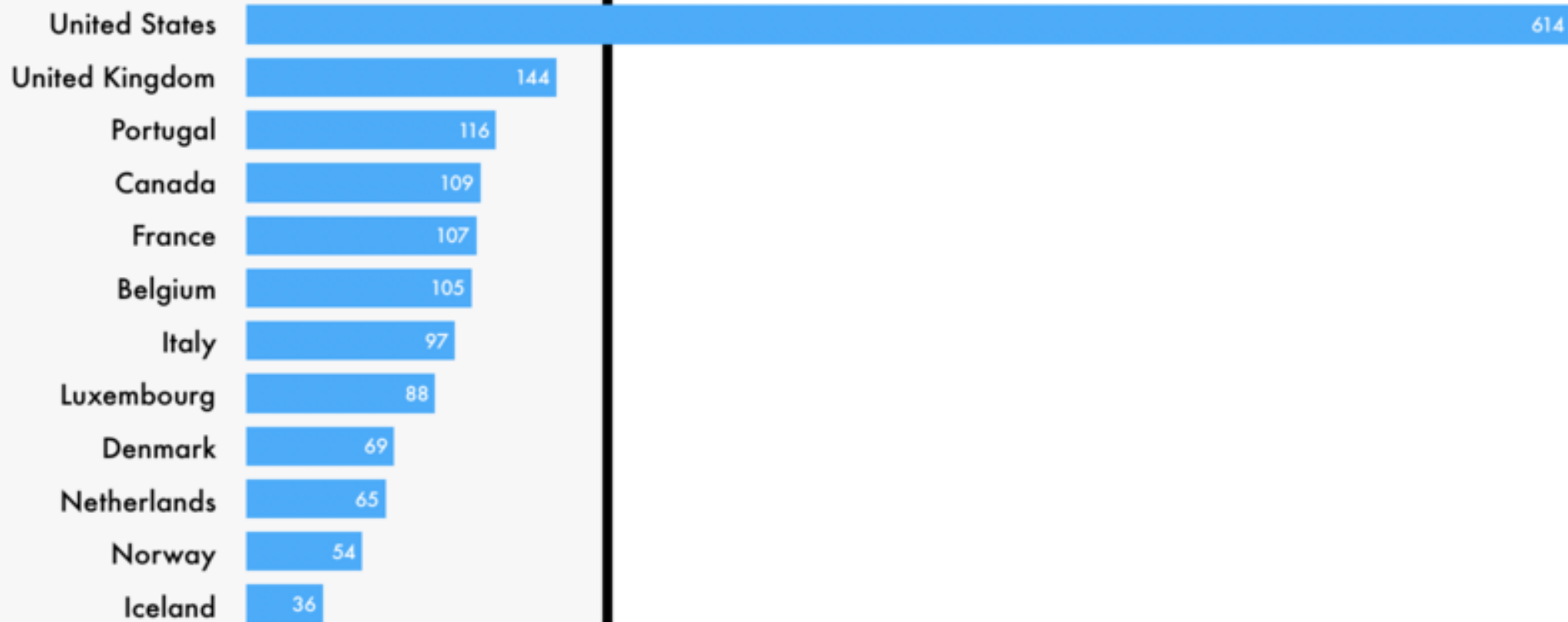
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## Responding to Question:

*How do you see racism show up in the way healthcare is provided- or denied- inside carceral settings?*

# INCARCERATION RATES

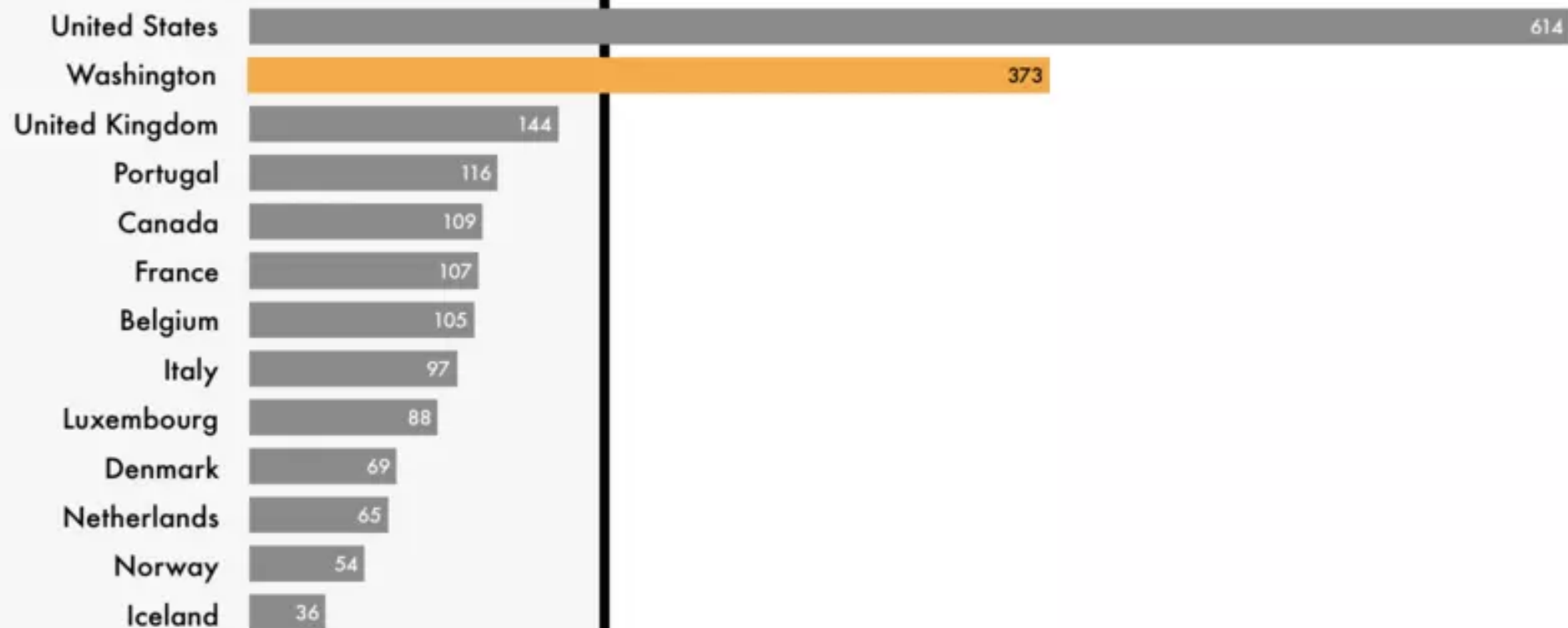
AMONG FOUNDING NATO COUNTRIES



Incarceration rates per 100,000 population

# INCARCERATION RATES

COMPARING WASHINGTON  
AND FOUNDING NATO COUNTRIES



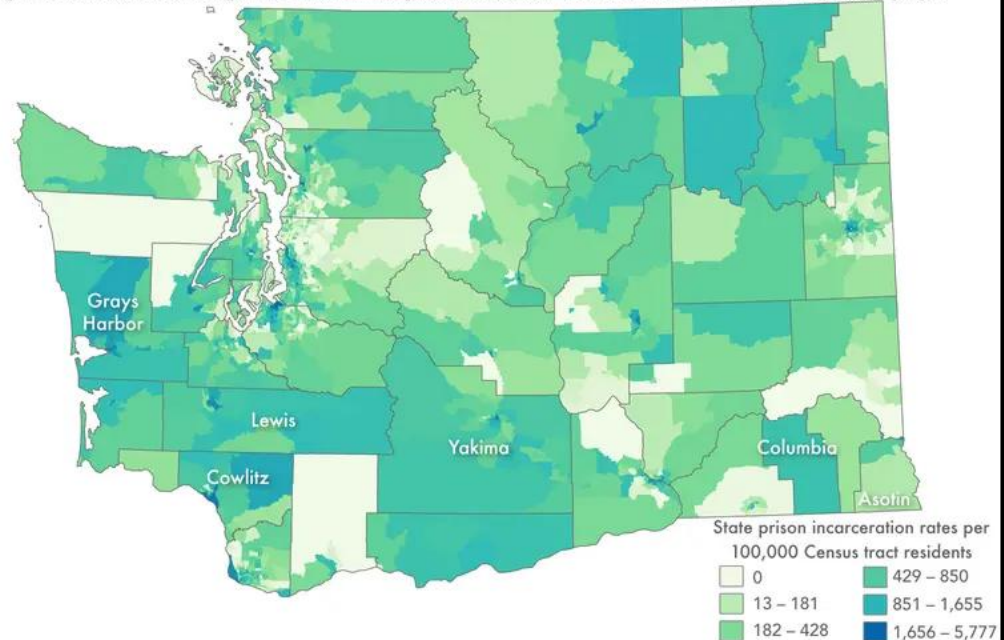
Incarceration rates per 100,000 population

# Washington's Carceral System

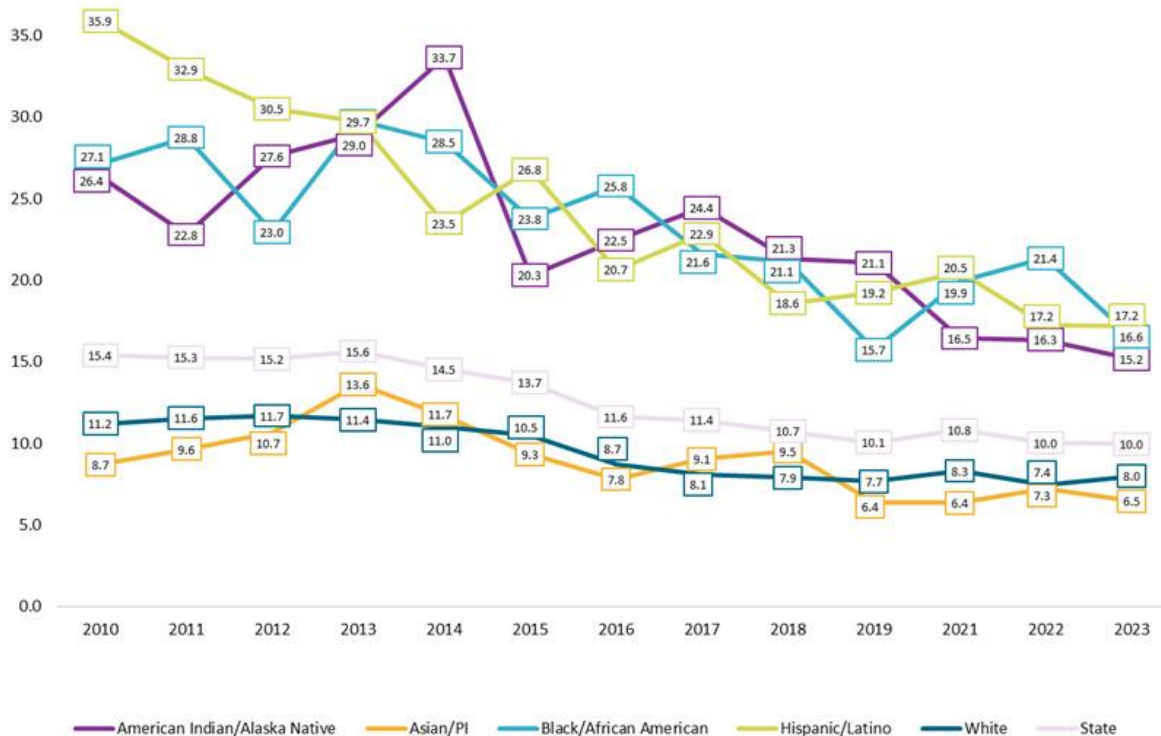
- State Department of Corrections
- State Department of Children, Youth, and Families
- Local jails (city, county, regional)
- Private immigrant detention
- U.S. Bureau of Prisons

Every county in Washington state is imprisoning people, with the highest imprisonment rates in some of the less populated counties

The six counties with the highest imprisonment rates have populations ranging from 3,900 to 257,000, but these counties are far less populous than counties like King, Pierce, Snohomish, Spokane, and Clark, which are each home to more than 500,000 people.

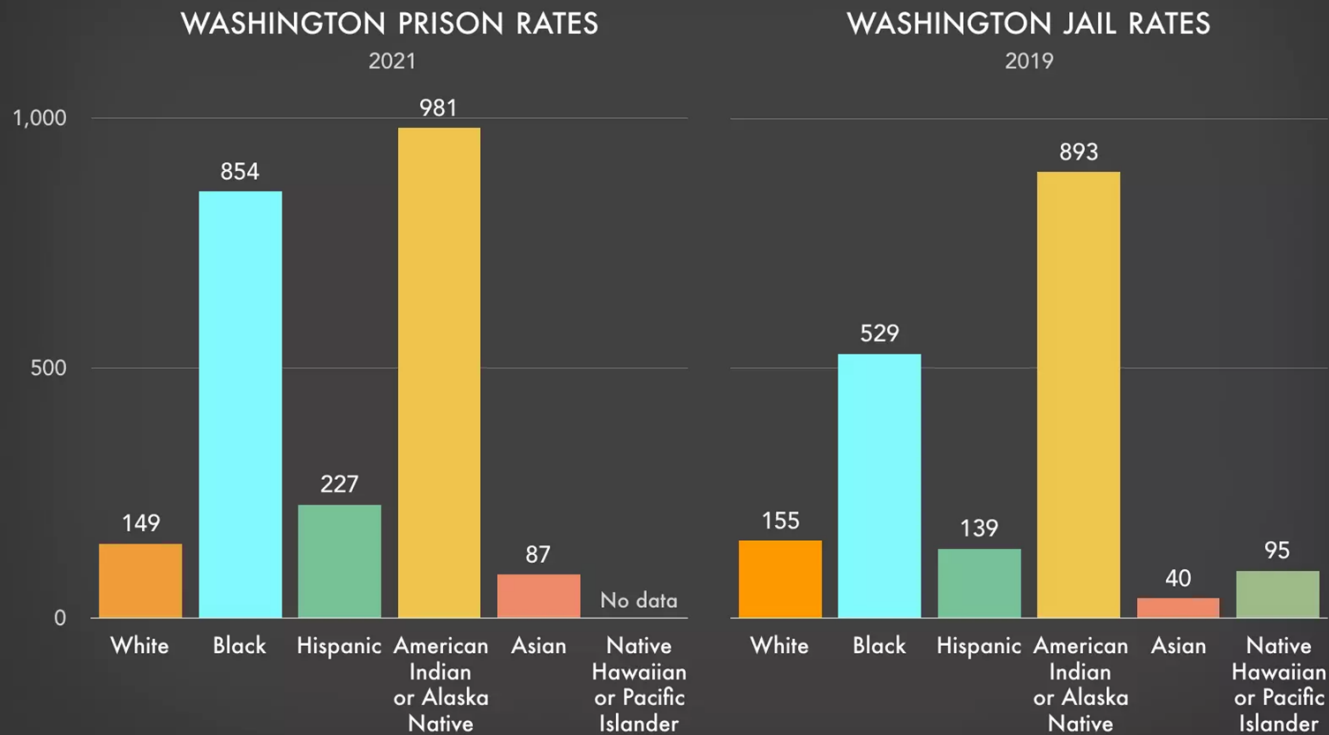


# Percent of Washington State Families with Children, Living Below Poverty Level, by Race/Ethnicity, 2010-2023



# Racial disparities in Washington prison and jail incarceration rates

People in state prisons and local jails, per 100,000 state residents in each race or ethnicity category



Source: Bureau of Justice Statistics and U.S. Census Bureau data. For sourcing details and dataset, including race definitions and categories not displayed above, see: [www.prisonpolicy.org/data/race\\_bystate\\_2021.xlsx](http://www.prisonpolicy.org/data/race_bystate_2021.xlsx).

**PRISON**  
POLICY INITIATIVE

# **Healing, Humanity & Reintegration**

# Healing, Humanity & Reintegration

## Incarcerated Voice



Davven

## Responding to Question:

*What role do love, connection, and community play in your recovery and wellness journey?*

# Interested to Connect / Learn more?

Visit our web page on WA Portal:

<https://waportal.org/partners/community-collaborative/workgroups/carceral-health-equity>

**Come to an informational session to learn more about  
the Carceral Health Equity Workgroup**

Please email us at:

[Community.Collaborative@DOH.Wa.gov](mailto:Community.Collaborative@DOH.Wa.gov)



"Voices from the Heartland" By Jesse Krimes

**"If you have come here to help me, you are wasting our time. But if you have come because your liberation is bound up with mine, then let us work together."**

**- Lilla Watson, Gangulu activist**

**Thank you**

***The materials presented by the Carceral Health Equity Workgroup of the Community Collaborative are those of the authors/presenters and do not necessarily represent the official position of or endorsement by the US Centers for Disease Control and Prevention and the Washington State Department of Health.***

***If you have questions please email  
[Community.Collaborative@doh.wa.gov](mailto:Community.Collaborative@doh.wa.gov).***