Inside Action

Do imprisoned black men get better health care than those on the outside?

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When a recent study reported that black males living outside of prison are 50 percent more likely to die at any given time than incarcerated black men, it shocked many.

Researchers from the University of North Carolina at Chapel Hill found death rates among black men in prison were especially low for a wide range of mankillers, such as accidents, homicide, suicide, drugs, alcohol and diabetes—all especially troublesome problems in impoverished and primarily black communities.

“I think some people misinterpreted our results as saying that prison is ‘good’ for black men. That is an offensive sentiment, and it really takes the study findings out of context,” says David Rosen, MD, PhD, one of the study’s authors.

What’s more, other people complained that the findings didn’t paint a true picture of prisoners’ experiences in jail.

“The prison [where I was incarcerated] was always cost-conscious and wanted to save money,” says former prisoner William Spratley about his time served at a Deerfield, Virginia, prison from 1989 to 2005. “And there were allegations in the past that people who had terminal illnesses got improper or insufficient medical help or treatment.”

Still, Spratley says that as a former prisoner he can understand why people might easily misinterpret the study’s finding. “From a logical standpoint, prisoners are pretty much guaranteed some type of treatment [while in jail], unlike in the real world,” he observes. “When I was in prison, I had medical [coverage]. In Deerfield, they made sure you took your medications.”

But while this might make it seem like institutions care about inmates’ health, Spratley begs to differ. The guys on the inside may seem to fare better than the guys on the outside, he says, especially if prisons offer consistent care. But the reality Spratley observed was the care was shabby and failed to meet prisoners’ unique needs—in fact, the facility often failed to provide inmates with the meds they needed.

“I’m not naming doctors, but many of them [at Deerfield] had this idea you could just give every

HIV-positive inmate the same pill regardless of their treatment level," Spratley recalls of his experience.

Despite their differences, both Spratley and Rosen agree on one thing: The research sheds light on wide racial health disparities.

As Rosen says, "The study findings are a striking reminder that we still have work to do in improving community health."

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