



Advocating for Healthcare Access and Equity for Justice-Involved Individuals

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OBJECTIVES

- Discuss the healthcare challenges faced by justice-involved individuals.
- Explore advocacy for justice-involved individuals through community engagement and service-learning activities, including inviting speakers and reading investigative reports.
- Learn how to advocate for policies at the state level across three interactive, content expert-led workshops.
- Advocate for at least three policies that improve healthcare access and equity for justice-involved individuals.

BACKGROUND

- The Healthcare Advocacy and Policy Interest Group (HCAP IG) within the Urban Service Track/AHEC Scholars Program focuses on health policy and advocacy training for interdisciplinary healthcare professions students.
- This year we concentrated on the specific needs of justice-involved individuals, addressing healthcare disparities and promoting policy changes surrounding this population.

Why is this important?

- With incentives to cut costs and little accountability, the U.S. prison system has perpetuated widespread healthcare inequity among the over two million individuals in its purview.
- Although the incarcerated population is more likely than the general public to suffer from psychiatric disorders, substance abuse, and chronic and infectious diseases, their ability to obtain adequate care for these conditions is limited by both poor resources and punitive rules. (Binswanger, Douglas, Zaitzow).
- For example, 23% of the state prison population suffers from bipolar disorder, compared to only 2% of all U.S. adults.
- Similarly, 49% of the state prison population reports having a substance use disorder, compared to only 7.5% of all U.S. adults, but only 10% of prisoners have received treatment.
- Disability is also significantly more common among the incarcerated compared to the non-incarcerated (40% vs. 15%), with disabled inmates highly vulnerable to a lack of specialized support and punishment such as solitary confinement. (Wang)

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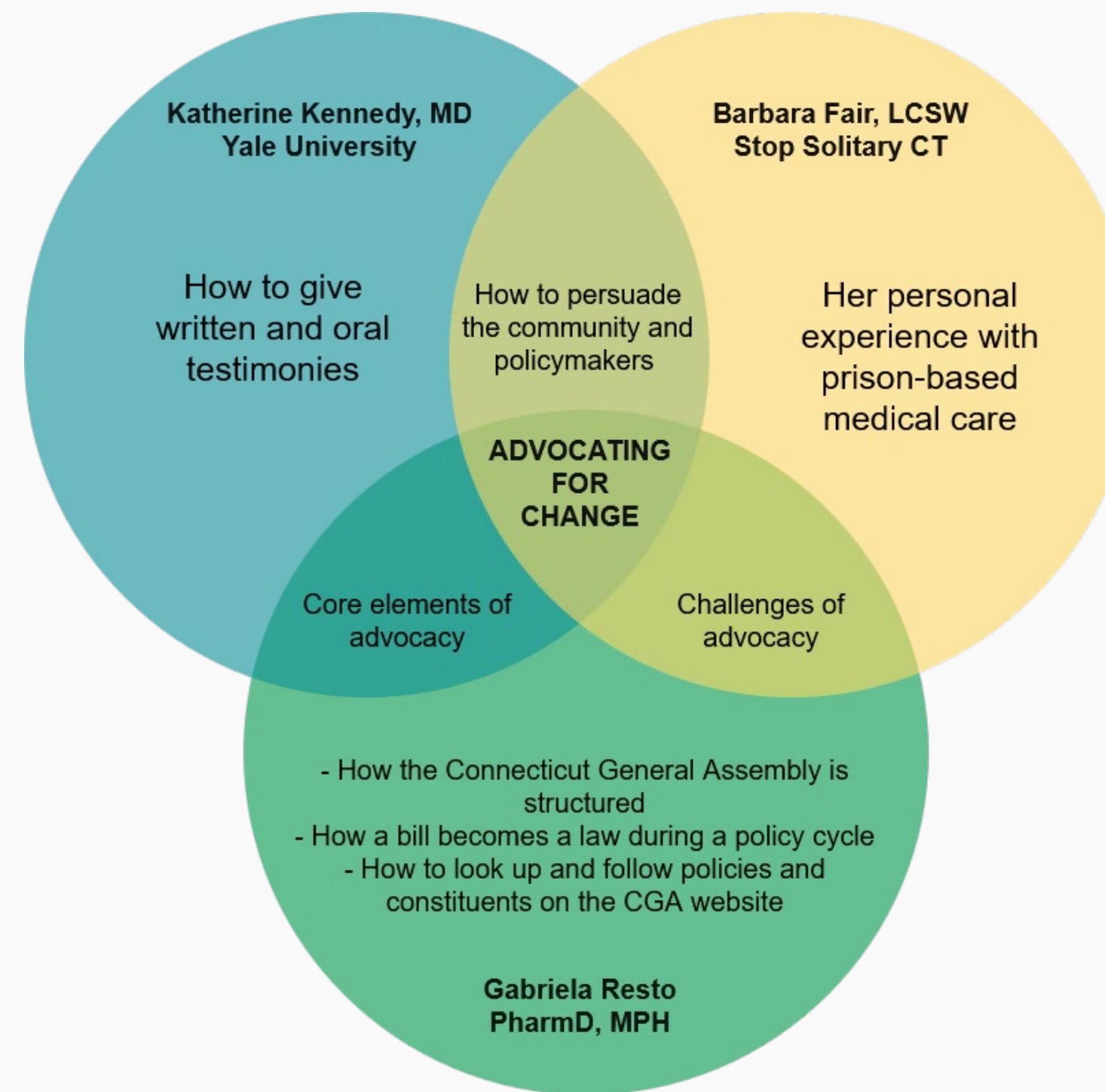
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METHODS

- The group consists of ten members from various healthcare disciplines.
- Monthly meetings included speakers, workshops, and group readings/discussions.
- Feedback from our alumni partners and IG consultants was regularly discussed, with decisions made through group consensus.

Shared themes across speakers and workshops



RESULTS

100% of IG members reported learning a moderate or significant amount about the healthcare challenges facing justice-involved individuals during IG meetings

90% of IG members reported learning a moderate or significant amount about healthcare advocacy and policy during IG meetings

100% of IG members feel moderately or significantly more confident in their HCAP skills, compared to before the IG

100% of IG members feel moderately or significantly more confident in advocating for justice-involved individuals, compared to before the IG

RESULTS (CONT.)

- The HCAP IG produced ten mock testimonials on three bills (S.B. 826, 248, 249) currently being debated by the Connecticut General Assembly.
- These testimonials allowed us to synthesize and showcase our deepened understanding of the incarcerated population's healthcare challenges, as well as the concrete ways in which we can advocate for better healthcare access and equity among justice-involved individuals.

Reflections from IG members:

- “I enjoyed the passion shared by everyone on the committee for making a difference in the lives of the different vulnerable groups we learned about. It was a neat experience to be part of a group dedicated to advocating for positive change.”
- “Prior to this interest group I didn’t know the inner-workings of how change is enacted in healthcare. I still have a lot to learn but this interest group taught me a lot, and I’ll take what I learned and apply it to advocating for my future patients!”
- “I’ve really enjoyed the collaborative and passionate environment of HCAP this year, especially with speakers [...] who have been able to bring some needed light onto specific issues facing incarcerated patient populations!”
- “Now I feel that I have the steppingstones to jump into advocacy when I feel called to.”

Challenges faced and lessons learned:

- Challenges included low attendance and participation during meetings.
- This was addressed by reaching out to members, reinforcing expectations during meetings, and encouraging open and non-judgmental discussion.

Thoughts on the future of the UST HCAP IG:

- “It would be cool to hear more stories from healthcare providers who are currently involved in policy and advocacy [...] their individual experiences, what they would do differently, what they've learned, how it has shaped their career/practice, etc.”
- “[I would like] to only spend 1-2 meetings learning about advocacy then [use] the rest of the meetings to hear from or engage with local speakers or advocacy organizations!”

Although this year's focus was incarcerated individuals, our newly equipped advocacy and policy toolboxes have empowered us to tackle other healthcare injustices in the future

Final Deliverable

6 mock testimonials in support of Senate Bills proposing the following changes for incarcerated individuals:

Immediate mental health interventions

Local breast cancer screenings

Mobile health clinics

