

Going to Jail is One Way to Ensure Free Access to Health Care

At a time when many American politicians want to abandon health care reform because it supposedly is too expensive and others are determined to ensure that illegal immigrants are denied access to health care, it is ironic that spending on prisons and prison inmates - the *only* Americans with a constitutional right to health care - continues to be a huge and growing proportion of government budgets.

The US incarcerates people at nearly five times the world average. The Pew Center on the States reports (http://www.pewcenteronthestates.org/report_detail.aspx?id=49382) that one in every 31 adults, or 7.3 million Americans, is in prison, on parole or probation, at an annual cost of around \$60 billion. Criminal correction spending is outpacing budget growth in education, transportation and public assistance. For the states, struggling in the wake of the economic crisis, only Medicaid spending grew faster than state corrections spending, which has quadrupled in the past two decades.

California, a state in serious debt, spends 11% of its operating budget on prisons and prison services; that's more to care for 167,000 incarcerated adults than to educate 226,000 students in the 10-campus University of California system. Between 2000 and 2008, the state's corrections budget doubled to \$10.8 billion. In the last 25 years California has built 24 prisons and one research university.

By 2011, there will be 1.7 million prison inmates in the US, and this will cost taxpayers an additional \$27.5 billion over the next five years. The majority of this money will go to the construction of new prisons to hold the ever-increasing number of inmates. Currently the states spend an average of \$29,000 a years on every prisoner. The biggest operational cost is inmate health care. Every inmate is guaranteed access to health care when they need it, and last year prison health care services cost \$3.3 billion, or almost \$4,000 a person.

The prison population is rapidly ageing, and increasingly likely to suffer from chronic illnesses. Largely as a result of health care expenses, the average cost of housing an inmate aged over 60 is \$70,000 a year. In 2007, cancer, coronary artery disease and end-stage liver disease primarily due to infectious hepatitis were responsible for almost 70% of inmate deaths.

Prisoners get a full range of health care services, including cancer treatments and dialysis. They are entitled to, and often receive organ transplants. This does not mean that health care services are ideal – far from it – and in relaying these facts there is no intimation on

Menzies Centre ^{for} Health Policy



The University of Sydney

my part that health care should be withheld from prisoners in any way. But it does seem that American priorities around the big budget issues like the penal system and health care are too often back-to-front.

Take this example from California: a man arrested for stealing a pair of socks worth \$2.50 was found to have two previous convictions for abetting robbery (I don't know if a gun was involved), and so, under the "three strikes" law, received life imprisonment. His incarceration will cost the state \$49,000 a year, maybe twice that as he gets older.

Opponents of universal health care say the US can't afford it. Granted, prison reform is difficult, won't come close to fully financing health care reform, and garners no votes. Still, to paraphrase Nicholas Kristoff in a recent opinion piece (<http://www.fresnobee.com/opinion/wo/story/1612757.html>), isn't it better to use scarce resources to educate children and heal the sick rather than to imprison people for the rest of their life because they stole a pair of socks?