Prison Conditions During the COVID-19 Pandemic: A Follow-Up Survey of People in Pennsylvania State Custody

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Executive Summary

Prisons, nursing homes, and other congregate settings are at the epicenter of the coronavirus pandemic. Once the virus enters a prison, it can easily spread among people confined in close quarters and travel back into the community, fueling the spread of the virus outside prison walls. That means protecting against COVID-19 in prisons is not just a matter of caring about people who live and work in those facilities—it’s a matter of community safety.

In September, the Pennsylvania Prison Society published our findings from a survey of people in state prison custody conducted from April 15 to September 8, 2020. As part of our ongoing work to understand the impact of COVID-19 on incarcerated people, we conducted a second survey of people confined in Pennsylvania state prisons that began as the pandemic entered an even more virulent phase. This report presents findings from this new survey.

We found:

- **As the pandemic worsened across Pennsylvania, concern for personal safety grew among people in prison custody.** Less than a third (31%) of survey respondents reported feeling safe, down from 44% in the first survey.

- **Communication matters.** The more often and effectively prison officials communicate with people in custody the more they report feeling safe. Only 12% of respondents who were “very dissatisfied” with prison communication felt safe, while 100% who were “very satisfied” felt safe.

- **Mask wearing by staff is inconsistent at best.** Less than half of respondents (49%) reported that staff wear masks “often” or “always.”

- **People in custody continue to report good compliance overall by prisons on hygiene measures**, and an improvement in having the ability to clean their cells.

- **Access to medical care continues to be a problem.** A majority of respondents (58%) report being dissatisfied with their ability to access medical care, while only 16% report being satisfied with it. Some also reported that prisons were not following a DOC policy eliminating medical co-pays for those with flu-like symptoms, discouraging people from reporting potential infections.

We are heartened that the Department of Corrections is committing to address many of these concerns. We shared our findings with the Department and note their responses in the discussion that follows.
We continue to urge the Department of Corrections to:

- **Strengthen communication with incarcerated people to foster a greater sense of safety during this crisis.**
- **Redouble efforts to make sure that staff wear masks at all times.**
- **Ensure that everyone can access essential medical care in a timely manner by eliminating barriers to access like the medical co-pay and increasing investment in care.**

This report documents the experience and perspective of people in state custody. It focuses on the Department of Corrections’ mitigation efforts that people in prison are able to observe. But there are many other key initiatives that the state could and should undertake to stem the spread of COVID-19 behind bars, and by extension, the community. These steps include:

- **Expand efforts to safely reduce the number of people in custody.** The governor’s temporary reprieve program has led to the release of 104 people out of a population of more than 40,000. Providing reprieves to more incarcerated people who are medically vulnerable and not a threat to public safety would get vulnerable people out of harm’s way, permit greater social distancing behind bars, and ultimately promote public health.

- **Administer COVID-19 vaccinations to all people in custody and staff as soon as they become available.**

- **Implement weekly, rapid testing of all staff that come into contact with people in custody until they are vaccinated.** When prisons are in lockdown, corrections staff are the only people coming and going from the facility who could potentially introduce the virus. While the Department screens staff for symptoms before entering, that is not sufficient to stop a virus known for asymptomatic spread. We call on the Department once again to adopt the mandatory staff testing protocols currently required for all nursing homes. These protocols require monthly, weekly, or bi-weekly rapid testing of all staff in contact with residents, based on the level of community spread.

**Background**

Some 309 people in Pennsylvania state custody filled out the Prison Society survey between September 9 and December 31, 2020. They completed an updated version of the form used in our first round of surveys that modified some of the earlier questions and added several new ones. The Prison Society distributed the surveys in responses to letters from incarcerated people and via its Graterfriends newsletter.
The second COVID wave explodes in Pennsylvania state facilities

The toll of COVID-19 in Pennsylvania prisons has worsened dramatically since our initial report in September 2020. At that time, 11 people in custody and one DOC staff member had died from the disease. To date, 103 people in state custody and four DOC staff have died from COVID-19.¹

These fatalities were driven by the fall's second wave of coronavirus, which brought record rates of infection to communities across Pennsylvania and nationwide. On October 25, Pennsylvania surpassed its April peak of 1,673 average daily infections. The infection rate did not begin to go down until after December 16th, at which time Pennsylvania had an average of 10,578 daily infections.²

Despite the Department of Corrections’ efforts to mitigate viral spread through testing and quarantining new admissions, masking, cleaning, and limiting social contacts, prisons are large congregate care settings where social distancing is impossible and where staff go back and forth to the community. Not surprisingly, the second wave hit Pennsylvania’s prisons especially hard. In late September, there were a little over 1,000 cases in state prisons. By the end of the year, the Department of Corrections had counted about 9,000 COVID-19 infections.³ A report by the Marshall Project found that 1 in 7 people in Pennsylvania state prisons had tested positive for COVID-19, an infection rate more than three times greater than that of the state as a whole.

The rampant outbreaks forced prisons to reinstate lockdowns that have kept many people in custody confined to their cells 23 hours a day or more. Some have had so little time outside of their cells that they had to choose between taking a shower or making a phone call. On top of the virus’ threat to their physical health, these conditions continue to strain the mental health of people in custody.

Detailed Findings

As the virus spread in Pennsylvania, fear for safety increased in state prisons

People in custody reported feeling less safe during this period compared to the initial round of surveys completed from April to September 2020. In the first survey, 44% of people responded “yes” to the question, “Do you feel safe?” In the second survey, this figure dropped to 31%.

The graph above shows responses to this question by month during both survey periods. It shows that, over time, the perception of safety among people in custody waned as COVID-19 infections increased. The percent feeling safe fell by 17 percentage points between October, when the state broke its earlier record for infections, and December, when cases climbed to a new peak. This trend is also reflected in written comments:

“What I fear the most is getting COVID-19 through community spread... more than 100 staff members and 3 units have tested positive for the coronavirus... I'm fearful of this contagious virus.” (SCI Mahanoy, December 1, 2020)

**Communication matters for making people feel safe**

The prevalence of COVID-19 wasn’t the only factor that appeared to influence whether respondents felt safe. In our first survey, we observed a connection between the sense of safety and comments about the quality of communication within the prison. To expand upon this finding, the new version of our survey investigated this factor directly, asking participants to rank how satisfied they were with prison communication on a scale of 1 (“very dissatisfied”) to 5 (“very satisfied”).
Among the 129 survey respondents who reported being “very dissatisfied” with prison communication, only 12% felt safe. Conversely, among the 27 who were “satisfied”, 78% felt safe.

<table>
<thead>
<tr>
<th>Satisfaction with prison communication</th>
<th>Percent who feel safe</th>
<th>Number of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>VERY DISSATISFIED</td>
<td>12%</td>
<td>129</td>
</tr>
<tr>
<td>DISSATISFIED</td>
<td>28%</td>
<td>80</td>
</tr>
<tr>
<td>NEUTRAL</td>
<td>46%</td>
<td>58</td>
</tr>
<tr>
<td>SATISFIED</td>
<td>78%</td>
<td>27</td>
</tr>
<tr>
<td>VERY SATISFIED</td>
<td>100%</td>
<td>8</td>
</tr>
</tbody>
</table>

We also asked survey-takers to indicate how they received information about COVID-19 from a set of multiple options.

![Bar Chart]

Only shows options that were selected by more than 3% of people
Generally, the more sources of information people in custody selected (facility info channel on TV, paper bulletin on unit, verbal communication by staff, town halls run by prison administrators), the more satisfied they were with facility COVID-19 communication.

<table>
<thead>
<tr>
<th>Number of Channels of Communication</th>
<th>Percent who feel safe</th>
<th>Number of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>14%</td>
<td>73</td>
</tr>
<tr>
<td>1</td>
<td>29%</td>
<td>108</td>
</tr>
<tr>
<td>2</td>
<td>27%</td>
<td>69</td>
</tr>
<tr>
<td>3</td>
<td>60%</td>
<td>45</td>
</tr>
<tr>
<td>4</td>
<td>62%</td>
<td>14</td>
</tr>
</tbody>
</table>

Together, the findings about prison communication suggest that when prisons use more channels of communication, people in custody are more satisfied with efforts to keep them informed, which in turn fosters a greater sense of safety in the prison.

In response to these survey findings, the DOC said:

"It is very important to us that individuals in our custody feel safe. If they feel safe, then the system is much better off from a mental health and a physical safety perspective [. . .] We talk about communication every single week with all institutions. We see its value and importance and your report reflects that."
**Mask wearing by staff is inconsistent at best**

Though we did not ask directly about masks in the first round of surveys, many respondents shared concerns that staff were not consistently wearing them. In our latest survey, we included a specific question about mask wearing.

According to their responses, the use of masks by DOC staff is inconsistent. Less than half reported that staff wear masks “often” or “always.” Nearly 40 percent said staff wore masks only “sometimes,” while 12 percent said they were worn “rarely” or “never.”

In response to this finding, the Department of Corrections said it was “continuing to send the message” to its prisons that corrections officers must wear masks and can expect disciplinary action for failing to do so.

**Good compliance overall on hygiene measures, and an improvement on cell cleaning**

Overall, people in custody continued to report overall good hygiene practices in prisons during the pandemic. Though the numbers dropped slightly from the first survey, the
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The majority of respondents reported that common areas are regularly disinfected (78% in the prior survey, 70% in this survey) and that they are able to wash their hands regularly (91% in the prior survey, 84% in this survey).

There has been improvement in the one area the prior analysis found to be lacking. Previously, only 55% of respondents reported that they were able to clean their cells regularly. That figure increased to 75% in the current survey indicating that the Department has made a concerted effort to improve based on the Prison Society’s initial report recommendations.

![Survey Results Chart]

**Majority dissatisfied with access to medical care, with co-pays creating a barrier for some**

In our initial survey, about one in six respondents said they were unable to access medical care in prison. We probed this issue further in the current survey, which asked respondents how satisfied they were with the accessibility of medical care. A majority of respondents (58%) reported being dissatisfied with their ability to access medical care, while only 16% reported being satisfied with it.
How satisfied are you with the accessibility of medical care during the COVID-19 pandemic?

- **Very Satisfied**: 35%
- **Satisfied**: 23%
- **Neutral**: 26%
- **Dissatisfied**: 12%
- **Very Dissatisfied**: 4%

In addition, the current survey elicited comments from some respondents that prisons were ignoring a DOC policy eliminating medical co-pays for those with flu-like symptoms. One respondent wrote:

“If you report these problems and test negative or they find out some other way that you have not contracted the virus, then inmates end up paying the co-pay and more. This makes inmates uneasy about reporting symptoms and causes them to ‘hide’ when sick.” (SCI Mercer, November 29, 2020)

Upon learning of these issues surrounding co-pays, the DOC adopted a new policy on February 4th of this year temporarily suspending co-pays for all medical care, noting that Corrections Secretary John Wetzel “felt strongly that there should be absolutely no barriers to seeking treatment.”

These words from the secretary are encouraging, and we call on the DOC to eliminate medical co-pays permanently. Even before the COVID crisis, lack of access to health care was a serious problem in prisons and jails. Charging incarcerated people for health services impedes access to important sick and preventative care, as they have essentially no income and limited financial resources. They should be encouraged, not discouraged from seeking care. Avoiding medical care for minor issues can lead to serious consequences for incarcerated individuals and their prison community, as their health further deteriorates or leads to the infection of others.
Looking Forward

While the distribution of the COVID-19 vaccine offers hope that the pandemic can be brought to an end, outbreaks are likely to continue to afflict prisons for some time. Once again, we asked the DOC if it would assist us with distributing future surveys to incarcerated people. The Department declined, saying it wasn’t possible at the moment because it was engaged in an effort to survey people in custody about their interest in COVID-19 vaccines. Nevertheless, we will continue to survey people in custody and will continue to update our findings, sharing them with the public and with the Department of Corrections.

We firmly believe that we can’t understand or begin to address the problems facing incarcerated people without listening to their experiences first-hand.

ABOUT THE PRISON SOCIETY

*Founded in 1787 by Benjamin Rush and Benjamin Franklin, the Pennsylvania Prison Society is the nation’s oldest human rights organization. For 233 years we have worked to ensure humane prison conditions and advocate for restorative criminal justice policies.*

For media inquiries, please contact Executive Director, Claire Shubik-Richards at cshubik@prisonsociety.org and 215-910-4573.