



ANNUAL REPORT

2022 - 2023

The SEICHE Center for Health and Justice is committed to achieving health equity by ending mass incarceration. We use research to identify legal, policy and practice levers to improve the health of individuals, families and communities impacted by mass incarceration. This annual report summarizes the Center's research, education, advocacy, and clinical care activities, September 2022 through August 2023.



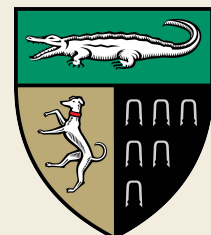
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Our Commitment



Founded in 2020, the SEICHE Center for Health and Justice is a collaborative partnership between the Yale School of Medicine and the Yale Law School, committed to ending mass incarceration by bringing together the disparate fields of health care, law, and criminal justice. Current efforts in criminal justice reform do little to address the health of individuals, families and communities impacted by mass incarceration. Further, these reform efforts largely ignore the power and responsibility of the health system to reduce our nation's reliance on incarceration.

Health systems can provide employment and career paths as the top source of new jobs in our country and offer treatment of physical and mental health conditions and substance use disorders for those communities disproportionately impacted by mass incarceration. Current reforms also underestimate the power and potential that formerly incarcerated individuals have. In asking the right questions, conducting the research, and identifying solutions to improve the health of their communities, those directly impacted by mass incarceration are agents of change.

The Center is uniquely situated in recognizing that the health system must play a leading role in criminal justice reform and individuals and communities most impacted by incarceration are key leaders in this change. Engaging individuals with a history of incarceration as partners in research, relevant clinical care, legal scholarship, and advocacy will drive wide scale transformation.

The Lab at 60 Temple St.

In the spring of 2023, the SEICHE Center moved into its new home at 60 Temple Street in New Haven. The 4,000 square foot space contains faculty and staff offices dedicated to data collection, including a lab for the collection of biologic specimens.





Our Team

Yale has been a natural home for this transformative work, with collaboration across the Yale School of Medicine, Yale Law School's Solomon Center, Justice Collaboratory, and the Liman Center and their collective networks. Currently, the SEICHE Center has 18 core and affiliated faculty, including 7 junior faculty pursuing career development awards on mass incarceration and community-based research, and 10 staff members, the majority of whom have either been incarcerated or have had immediate family members incarcerated. Further, since 2020, we have trained 50 students and trainees from schools across Yale and the country, with special focus on incarcerated students or those directly impacted by the carceral system.

Research

SEICHE is leading research to build the evidence base about the health harms of incarceration and community based approaches to mitigating these harms. Studies are focused on mass incarceration's effect on cardiovascular disease, cancer, opioid use disorder, gun violence, and COVID-19. Two community-engaged projects are co-led by investigators who have been impacted by incarceration. We have received supplementary funding to our research grants to support the career development of underrepresented researchers. Active projects, and those completed in the last year, are highlighted below.

JUSTICE: JUSTice involved Individuals study of Cardiovascular disease Epidemiology

Principal Investigator: Emily Wang, Funded by the National Heart, Lung & Blood Institute

JUSTICE is the first longitudinal observational study of individuals released from a correctional facility to understand the epidemiology of cardiovascular disease risk factors. We seek to identify population-specific risk factors that exacerbate cardiovascular disease risk and which contribute to increased morbidity and mortality upon release. Despite challenges of the pandemic, we have enrolled 450 participants in New Haven and are beginning to analyze baseline data. We recently received pilot funding from the Program for the Promotion of Interdisciplinary Team Science at the Yale School of Medicine to expand the JUSTICE Study to include 50 family members. We are collecting biologic specimens of both the person recently released from incarceration and their family member, to understand how a family member's incarceration contributes to accelerated cellular aging, biologic measures of stress, and cardiovascular disease risk.

TRUE HAVEN: TRUsted rEsidents and Housing Assistance to decrease Violence Exposure in New Haven

Co-Principal Investigators: Emily Wang, Brita Roy, and Virginia Spell (Urban League of Southern Connecticut)
Funded by the National Institute on Minority Health and Health Disparities



The infographic is titled "TRUsted rEsidents and Housing Assistance to decrease Violence Exposure in New Haven". It features a red background with white and blue text and icons. At the top left is a logo with a house icon and the text "TRUE HAVEN". Below the title, it asks "What is the Program?". A central diagram shows a flow from "Secure Housing" (with icons for housing assistance and financial education) to "New Haven families affected by incarceration" (with icons for families of those recently incarcerated and people returning home from prison). Below this, it asks "How Can I Participate?". At the bottom, it provides contact information: Website: <https://www.ulsc.org/truhaven-reentryservices>, Email: truehaven@ulsc.org, Phone: (203) 577-8498. It also includes a QR code and a note: "Yale University is partnering with the Urban League of Southern Connecticut to conduct a research study to help those formerly involved in the justice system and their families secure and maintain stable housing. We are looking for 1400 families to join the program."

TRUE HAVEN was born out of a ten-year partnership between New York University, The Urban League of Southern Connecticut, and SEICHE. It is designed to study whether a multilevel intervention that increases neighborhood stability, wealth, and wellbeing affects neighborhood gun violence exposure. At the family level, the project is enrolling families affected by incarceration in a program that couples comprehensive financial education with housing assistance. At the community level, the project is training trusted community members, such as barbers, educators, faith leaders, and youth mentors, in trauma-informed counseling techniques to recognize and support those affected by gun violence. At the city level, a steering committee of community stakeholders is identifying strategies to address structural racism preventing housing equity.

Wang EA, Riley C, Wood G, Greene A, Horton N, Williams M, Violano P, Brase RM, Brinkley-Rubinstein L, Papachristos AV, Roy B. Building community resilience to prevent and mitigate community impact of gun violence: conceptual framework and intervention design. *BMJ open*. 2020 Oct 1;10(10):e040277.

TCN PATHS: Transitions Clinic Network-- Post incarceration Addiction Treatment, Healthcare, and Social support

Principal Investigator: Emily Wang
Funded by the National Institute on Drug Abuse

Does the Transitions Clinic Network (TCN) model of providing enhanced primary care for people released from incarceration improve key measures in opioid treatment? TCN programs are unique in that primary care is provided in partnership with a community health worker with a history of incarceration. The community health worker addresses social needs such as housing, food insecurity and criminal legal system contact in addition to medical needs. We are actively enrolling participants in study sites in Connecticut, Minnesota, Puerto Rico, New York and North Carolina. A diversity supplement, intended to improve the diversity of the research workforce, was awarded for Coralee Pérez-Pedrogo at the University of Puerto Rico.

The Role of Sleep in Treatment Retention Among People Recently Released from Jail

Dr. Johanna Elumn received a supplement to TCN to study how sleep deficiency and the sleep environment after release from jail affects the health of people with opioid use disorder and their treatment outcomes. Participants keep track of their sleep through sleep logs and by wearing Smartwatches.



ADVANCE: Addressing Vaccine Acceptance in Carceral settings through Community Engagement

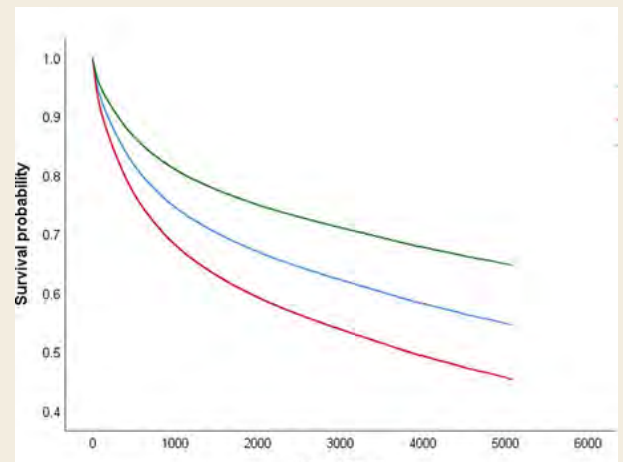
Co-Principal Investigators: Lisa Puglisi, DeAnna Hoskins (JustLeadership USA), and Saad Omer
Funded by the National Institute on Minority Health and Health Disparities

ADVANCE is identifying feasible and effective interventions to improve vaccine uptake in prisons. The study uses a community based participatory research approach to identify and adapt promising correctional system-based strategies to improve vaccine acceptance. The effectiveness of these strategies will be studied through rapid cycle, cluster-randomized trials in the Pennsylvania correctional system. Currently and previously incarcerated people and correctional staff will provide input during each study phase, increasing the likelihood that interventions will be successful.

ICRO: Incarceration and Cancer-Related Outcomes

Co-Principal Investigators Emily Wang and Cary Gross, Funded by the National Cancer Institute

Through a unique partnership with the Connecticut Department of Public Health and Connecticut Department of Corrections, we are assessing association between incarceration and disparities in cancer detection, quality of treatment, and survival. We use a mixed-methods approach by linking a tumor registry, correctional system data, and state vital statistics, supplemented with in-depth interviews of individuals diagnosed with cancer. We have found 1) there is a higher risk of cancer mortality among individuals diagnosed with cancer during incarceration and in the year post-release, not fully explained by stage of cancer, and 2) incarcerated people have a lower cancer incidence and recently released people have a higher cancer incidence compared to those never incarcerated.



Kaplan Meier curves of cancer-related mortality by place of diagnosis. Green = Never incarcerated, Blue = Incarcerated, Red = Post release.

COVID-19 Testing and Prevention in Correctional Settings

Co-Principal Investigators: Emily Wang, Lauren Brinkley-Rubinstein, and Rosemarie Martin
Funded by the National Institute on Drug Abuse

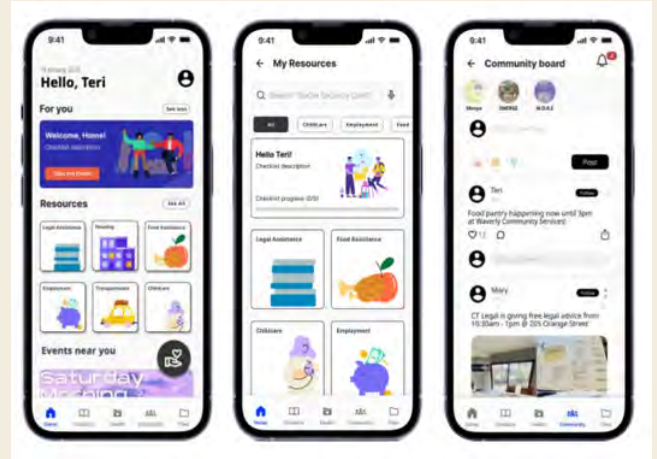


We sought to identify ethical concerns and potential solutions for COVID-19 testing and vaccine strategies in correctional facilities through qualitative work; and characterize baseline COVID-19 incidence, disease progression and related-outcomes among incarcerated individuals and correctional staff. At the core of this work was a multidisciplinary team of people with histories of incarceration, correctional policymakers, public health scientists, historians, legal scholars, and ethicists. With data obtained directly from jails and prisons in diverse locations throughout the country, and 100 interviews with incarcerated people and staff during the pandemic, this study provided unique analyses of the pandemic's impact on people in carceral systems. Interview findings were published in the American Journal of Public Health and disseminated in an animated video posted on our YouTube channel.

PerHL: Personal Health Libraries for Formerly Incarcerated Individuals

Principal Investigator Karen Wang, Funded by the National Library of Medicine

PerHL is developing and testing a personal health library mobile app designed for and in partnership with formerly incarcerated people. This study brings together the expertise and infrastructure of TCN and a multidisciplinary team of informaticists, clinical providers, formerly incarcerated individuals, and criminal justice leaders. A participatory health informatics approach and a pilot randomized trial are key components of this mixed method design. Findings from 20 interviews conducted with individuals with a history of incarceration highlight the need for an app that allows users to easily access resources for employment, housing, healthcare and medical needs, formal and informal support, and legal counsel. Diversity supplements support the work of Terika McCall at the Yale School of Public Health and summer intern Amelea Lowery.



The app home, resources, and community board screens

McCall T, Levi A, Peng ML, Zhou K, Swaminath M, Harikrishnan V, Workman TE, Fooladi H, Saunders M, Foumakoye M, Campbell Britton M, Teng S, Zeng-Treitler Q, Ying Y, Wang EA, Puglisi L, Shavit S, Brandt C, Wang KH. Design of Personal Health Libraries for People Returning from Incarceration in the United States. Proceedings of the 57th Hawaii International Conference on System Sciences 2024. (In Press)

Post-Release Mental Health and Substance Use Treatment in Connecticut

Principal Investigator Benjamin A. Howell, Funded by State of Connecticut, Connecticut Sentencing Commission

In partnership with the University of Connecticut Institute for Municipal and Regional Policy, we have been contracted by the Connecticut Sentencing Commission to evaluate the use of community-based mental health and substance use treatment in people released from incarceration or on community supervision. We are approaching this question by interviewing people returning to the community about mental health treatment services accessibility, and by creating a research platform linking statewide administrative data with data from the correctional systems. We anticipate that our findings will inform how treatment access impacts post-release health trajectory and the policies and practices in Connecticut.

New Research Initiatives

We continue to submit research applications to significantly expand the work of the Center. A major goal is to examine the family effects of incarceration and structural interventions which mitigate health harms.



- We have started applying natural language processing to the electronic health record for emergency department visits to identify people with histories of incarceration.
- Dr. Johanna Elumn was awarded a career development award by the National Heart, Lung and Blood Institute (NHLBI) focused on sleep and incarceration.
- Dr. Ben Howell is piloting an unconditional cash transfer project, in partnership with 4-CT, to study the impact of such transfers on the health of people recently released from incarceration.
- We have submitted grants to study the impact of incarceration on biologic measures of stress and accelerated aging on previously incarcerated people and their families as well as correctional workers.

Clinical Care

The SEICHE Center's clinical care program is part of the Transitions Clinic Network (TCN), a national network of primary care programs focused on addressing the health needs of people returning to the community after incarceration. With support from the Tow Foundation, we have dedicated efforts to expanding this model in CT, with current sites in New Haven, Bridgeport, Hartford, and the network continues to grow.



Awards and Promotions



Dr. Emily Wang was named a 2022 Macarthur Fellow for her work partnering with people recently released from prison to address the ways that incarceration influences chronic health conditions.

Ms. Dylan Balter, a Yale Medical student, received a competitive student scholarship to attend the 16th Annual Academic and Health Policy Conference on Correctional Health to present findings from her SEICHE mentored secondary analysis of X:BOT data. Her research demonstrated that for those with criminal legal involvement, naltrexone and buprenorphine had similar effects on preventing overdose compared to those without criminal legal involvement.

Dr. Lisa Puglisi was promoted to associate professor of medicine (general medicine) in the clinician-educator track at the Yale School of Medicine. In 2022, she was also awarded the YSM's Leonard Tow Humanism in Medicine Award.

Dr. Johanna Elumn was promoted to assistant professor at the Yale School of Medicine. She received a scholarship from the American Academy Sleep Medicine Foundation to participate in their Young Investigators Research Forum.

Ms. Monya Saunders, community health worker and research assistant, was inducted into the Connecticut Hall of Change, an annual recognition of the community impact of formerly incarcerated individuals in CT. Ms. Saunders has also been recognized across the state for her women's Healing Hearts support group for women returning from incarceration.

Our education arm works to expand training on the health impacts of incarceration to health professionals and students, residents, and previously and currently incarcerated learners.

We have partnered with Dr. Carmen Black at the Yale School of Medicine and Women Against Mass Incarceration on a grant from the Association of American Medical Colleges to undertake the Depart Initiative: Detained Patients Advocacy and Rights throughout Treatment.

The goal is to produce an interdisciplinary curriculum and clinical care pathway including a Patient Bill of Rights that would minimize police involvement for hospitalized people who are accompanied by law enforcement.

We have partnered with the World Health Organization and the United Kingdom Health Security Agency to develop two mini courses available to correctional healthcare workers in over 30 countries, educating on both infectious disease and non-communicable disease care in carceral facilities.

We regularly host public access webinars and seminars with topic experts and people impacted by mass incarceration:

- “What’s Cash Got to Do with It? Guaranteed Income and the Health of People Returning from Incarceration” discussed approaches to providing cash assistance to people returning from incarceration and studying the health impacts of such assistance.
- “The Intersection of Addiction and the Criminal Legal System: Drug Screening for People on Probation and Parole” explored the role of urine drug screening in the treatment of addiction, and ways of improving current practices to reduce punishment for people who use drugs.



Unique to the TCN program in New Haven is a Medical Legal Partnership (MLP) overseen by Mr. James Bhandary-Alexander at YLS and Dr. Lisa Puglisi at YSM. This program assesses the civil legal needs of patients and assists them in regaining rights denied due to a criminal record. Dr. Puglisi and Mr. Bhandary-Alexander mentor law students each year as part of the MLP. We recently created a webinar where law students educate medical providers on their rights when caring for criminalized patients.

We advocate for legislation that positively impacts those currently and formerly incarcerated.

- We led statewide efforts to pass House Bill 6875 to ensure that a person has the ability to obtain a state identification card or driver’s license, essential for accessing employment, housing and services, by the time of discharge from a correctional facility.
- We supported efforts led by Health Equity Solutions to mandate Medicaid reimbursement for community health workers. The passage of CT Senate Bill 989, will allow for expansion of the community health worker workforce in CT.

Dissemination & Publications

This year, we have published over 20 peer-reviewed journal articles, with several under review and in press. We also find creative ways to disseminate our findings to the public, through videos, reports, and community forums. Some recent publication highlights are detailed below.

For Health Equity, We Must End Mass Incarceration

In this editorial published in the Journal of the American Medical Association, Dr. Emily Wang and Dr. Shira Shavit hold to account the entire medical community to undo the health harms of mass incarceration. They name the Transitions Clinic Network as the largest example of the medical community's capacity to address mass incarceration and call on the healthcare system to catalyze decarceration through intentional partnerships with individuals directly affected.¹

Cancer incidence among incarcerated and formerly incarcerated individuals: A statewide retrospective cohort study

Dr. Jenerius Aminawung and co-authors linked data from two Connecticut systems, the state tumor registry and the correctional system, to investigate cancer rates among those with an incarceration experience. While incarcerated persons had a lower cancer incidence compared to the general population, those recently released had a higher incidence of cancer. The paper explores potential reasons for these differences and implications for initiatives for the early detection and treatment of cancer.²

"We know what is going on in our community": A qualitative analysis identifying community assets that deter gun violence

45 New Haven residents were asked to describe social structures that may deter local gun violence. Dr. Allison Parsons and co-authors report emergent themes to prevent gun violence across role models (interpersonal), social cohesion and home ownership (neighborhood) and community-based organizations (organizational). Findings suggest that investment in stable housing, efforts to build social cohesion, community-based mental health services, and youth activities are needed to curb local gun violence.³

"The medical community must tackle mass incarceration as a health crisis and not assume that the criminal justice system will reform itself. This requires interrogating current practices in health systems."¹

Paths to Improving Pandemic Preparedness in Jails and Prisons: Perspectives of Incarcerated People and Correctional Staff

Dr. Lisa Puglisi and colleagues highlight lessons learned from 100 interviews conducted with incarcerated people, correctional workers, and medical staff at three carceral settings during the pandemic. They discuss the importance of collaborative decision making; the innate tension between the fiscal priorities of carceral systems and COVID mitigation; the interconnected health risks of all people connected to the carceral facility; the lack of parity between COVID responses in facilities and the community; and the potential for those most affected to be involved in decision making. These insights can help shape responses to future pandemics and better align carceral governance with the goals of public health.⁴

Health Insurance and Mental Health Treatment Use Among Adults With Criminal Legal Involvement After Medicaid Expansion

Dr. Benjamin Howell and colleagues analyzed national data and found that although Medicaid expansion led to a large increase in health insurance coverage it did not lead to an increase in mental health or substance use treatment use. These findings demonstrate that health insurance coverage is likely necessary but not sufficient to improve health outcomes in this population.⁵

1. Wang, E. A., & Shavit, S. (2023). For Health Equity, We Must End Mass Incarceration. JAMA. 2. Aminawung JA, Soulos PR, Oladeru OT, Lin HJ, Gonsalves L, Puglisi LB, Hassan S, Richman IB, Wang EA, Gross CP. Cancer incidence among incarcerated and formerly incarcerated individuals: A statewide retrospective cohort study. Cancer Medicine. 2023 May 29. 3. Parsons A, Harvey TD, Andrade SD, Horton N, Brinkley-Rubenstein L, Wood G, Holaday LW, Riley C, Spell VT, Papachristos AV, Wang EA. "We know what's going on in our community": A qualitative analysis identifying community assets that deter gun violence. SSM-Qualitative Research in Health. 2023 Jun 1;3:100258. 4. Puglisi LB, Rosenberg A, Credle M, Negron T, Martin RA, Maner M, Brinkley-Rubenstein L, Wang EA. Paths to improving pandemic preparedness in jails and prisons: perspectives of incarcerated people and correctional staff. American Journal of Public Health. 2022 Nov;112(S9):S869-73. 5. Howell BA, Hawks LC, Balasuriya L, Chang VW, Wang EA, Winkelman TN. Health Insurance and Mental Health Treatment Use Among Adults With Criminal Legal Involvement After Medicaid Expansion. Psychiatric Services. 2023 Apr 5:appi-ps.

Future Opportunities

The next few years present tremendous policy and practice opportunities to achieve our goals.

- The Centers for Medicare & Medicaid Services recently provided guidance on submitting 1115 Waivers which for the first time would enable incarcerated people to receive Medicaid benefits 90 days prior to their release. In partnership with the Transitions Clinic Network and the Hennepin Healthcare Research Institute, we have been a leading voice in this conversation through research and advocacy at both national and state levels. We have published work on the effect of Medicaid expansion on the health of justice involved populations and have advocated for incarcerated people to be eligible for Medicaid with US legislators, the National Governors Association, the Council for Criminal Justice, and other organizations.
- The Accreditation Council for Graduate Medical Education (ACGME) will accredit a new fellowship in correctional medicine such that academic health centers will begin training a new generation of physicians in caring for the large and vast population of individuals who have been incarcerated or affected by the carceral state. Dr. Wang served on the ACGME committee convened to design the new fellowship program, The Education arm of SEICHE plans to submit an application to start the first interdisciplinary fellowship at Yale that would train healthcare providers and lawyers together in correctional medicine.

Funding



The SEICHE Center has an annual operational budget of approximately \$7 million dollars and receives infrastructure support from the Yale School of Medicine.

The SEICHE Center is funded through the National Institutes of Health, including the National Institute on Drug Abuse, National Heart, Lung, and Blood Institute, National Cancer Institute, National Institute on Minority Health and Health Disparities and the National Library of Medicine.



We receive funding from the Tow Foundation for providing clinical care to those returning from incarceration through our Transitions Clinic program. We have also received funding through the Association of American Medical Colleges and the State of Connecticut.