



Health Humanities and Ethics Graduate Certificate Program

Course Syllabus

<u>Course Title:</u>	Reflections on Incarceration and Well-Being BEHH 5213 001
<u>Institution(s):</u>	AMC Graduate School
<u>Credit Hours:</u>	2
<u>Semester:</u>	Fall 2025
<u>Modality:</u>	Blended Asynchronous & Synchronous Learning
<u>Meeting:</u>	In-Person The UPI Conference Room in the Fulginiti Pavilion (R27-105)
<u>Prerequisites:</u>	None
<u>Grading System:</u>	A-F
<u>Course Instructor:</u>	Name: Katherine LeMasters Pronouns: she/her/hers Title: Assistant Professor University of Colorado Anschutz Medical Campus
<u>Contact Information:</u>	email: Katherine.lemasters@cuanschutz.edu Office: 8th Floor, A01
<u>Student Hours:</u>	By appointment

Course Description: This discussion-based course focuses on understanding incarceration as a structural determinant of health. Through engaging with written work from incarcerated writers, as well as critical theories and empirical texts, students will explore issues related to how the system of incarceration affects individual, community, and societal health and well-being. Weekly discussions will include topics such as health and mortality data collection and communication, healthcare access and delivery, and conditions of confinement. They also include topics along axes of identity



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including birthing and parenting and aging inside. Students will apply their learnings in-class to a final paper.

Course Objectives:

- Provide a broad understanding of mass incarceration as a structural determinant of health and axes of inequities at the individual, community, and population level.
- Apply critical theories to the study of mass incarceration and health.
- Root our understanding of data and issues related to mass incarceration and health in the lived experience of currently incarcerated individuals.
- Formulate qualitative and quantitative research questions of importance to those affected by the system of mass incarceration.

Course Format:

This course prioritizes synchronous learning but will also integrate asynchronous components. The course will include required readings, class discussions (including discussion boards on Canvas and small group sessions), writing assignments, and team-based assignments.

Readings: No textbooks are required. All reading will be provided directly.

Requirements and Grading:

Evaluation in this course will be based on the following:

- *Active participation (10%)*
- *Weekly Discussion Posts and Reflections (25%):* Please provide a one-two paragraph discussion and reflection of the readings for the week by Tuesday at 9:00 AM. Once you post your reflection, you will be able to view others'.
- *Emergent issues update (25%):* One time in the semester, you will sign up to discuss an article in the media on issues related to topics covered in class. You must identify at least one relevant article, prepare a brief summary of its content, relevance to the class, and potential critiques of the framing of the article. Prepare a *5-minute presentation* on the topic for the class and write a *2 pages, double-spaced* report.
- *Policy Letter (25%):* Prepare a brief letter to the editor or letter to a local stakeholder. Your letter should offer a compelling argument about a policy or practice related to mass incarceration and health (*4 pages, double-spaced*).
- *Prison writing lab visit and reflection (15%).* Throughout the semester, you will have an opportunity to sit in on writing labs in carceral facilities. During this time, you will follow the same writing prompt alongside incarcerated writers and will engage in mutual learning. Near the end of the semester, you will be asked to reflect on these experiences. These reflections should focus on your personal growth or insights from learning in community with



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incarcerated writers. These reflections should NOT focus on individuals, facility details, or internal program content. These reflections should be *4 pages, double-spaces*.

Deadlines

All deadlines in this course are adaptive by design. While every output, task, and assignment will include a recommended date/time for submission, these dates and times are fluid by design. I ask only that each learner stay in communication with me regarding when given products are available for assessment.

Grading Scale

A	94.00-100	B-	80.00-83.99	D+	67.00-69.99
A-	90.00-93.99	C+	77.00-79.99	D	64.00-66.99
B+	87.00-89.99	C	74.00-76.99	D-	60.00-63.99
B	84.00-86.99	C-	70.00-73.99	F	0 – 59.99

Inclusive Learning Environments

In this class, we will work together to develop a learning community that is inclusive and respectful. Our diversity may be reflected by differences in race, age, sexual orientation, gender identity and expression, religion/spirituality, ability, socioeconomic background, and myriad other social identities and life experiences. In a diverse community, the goal of inclusiveness encourages and appreciates expressions of different ideas, opinions, and beliefs so that conversations and interactions are opportunities for intellectual and personal enrichment.

A dedication to inclusiveness requires respecting what others say, their right to say it, and the thoughtful consideration of others' communication. Both speaking up and listening are valuable tools for furthering thoughtful and enlightening dialogue. Respecting one another's individual differences is critical in transforming a collection of diverse individuals into an inclusive and collaborative learning community. We will hold ourselves and one another accountable, which includes bringing attention to times when microaggressions or macroaggressions happen in a classroom. Our core commitment shapes our core expectations for behavior inside and outside of the classroom.

Title IX: Non-Discrimination and Sexual Misconduct, Intimate Partner Violence, and Stalking

Non-Discrimination



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The [University of Colorado Non-Discrimination Policy](#) prohibits discrimination on the basis of race, color, national origin, sex, age, disability, pregnancy, creed, religion, sexual orientation, veteran status, gender identity, gender expression, political philosophy or political affiliation in admission and access to, and treatment and employment in, its educational programs and activities.

Sexual Misconduct, Intimate Partner Violence, and Stalking

The [University of Colorado Sexual Misconduct, Intimate Partner Violence, and Stalking Policy](#) prohibits conduct including sexual assault, dating violence, domestic violence, Title IX stalking, sexual exploitation, Title IX harassment, hostile environment, Title IX quid pro quo sexual harassment, and quid pro quo sexual harassment.

Campus Title IX Offices and Contact Information

Incidents of discrimination, sexual misconduct, intimate partner violence, and stalking should be reported to the Title IX office of the university where the incident occurred. Incidents involving microaggressions or incidents that may not otherwise rise to the level of a policy violation, may also be reported to the appropriate university Title IX office listed below. Please refer to the CU Anschutz campus Office of Equity website for a self-learning guide about [microaggressions](#).

CU Anschutz Campus: On the CU Anschutz campus, please contact the [Office of Equity](#). The Office of Equity staff, including the University's Title IX Coordinator, may be reached at (303) 315-2567 or equity@ucdenver.edu

Academic Conduct Policy

All students are expected to abide the Honor Code of the [Anschutz Medical Campus](#). Unless otherwise instructed, all your work in this course should represent completely independent work.

AI Policy

According to the Graduate School, the Guidelines for Graduate Students pertaining to generative AI are as [follows](#):

We, as members of the CU Anschutz Community, strive to be innovative and curious in our approach to the use of new technology. Especially, given our commitment to improving health and biomedical research, we are responsible to approach the use of these tools with integrity and professionalism.

1. Never enter identifiable patient information, unpublished data, grants, or unpublished manuscripts into third party tools.
2. Familiarize yourself with the pitfalls of various tools such as bias, incorrect information and others.
3. Be vigilant about the presence of biases in work generated by AI/ML and strive to prevent dissemination of these biases.
4. Avoid use of AI/ML to replace successful, evidence-based study strategies, given concern these tools may negatively impact learning.



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5. Critically evaluate any AI/ML generated responses with knowledge from course work and other resources.
6. Be honest and transparent about the use of AI and ML tools in curricular work such as studying and assignments. Citation of use should include name of the specific tool (and version) used and how it was used (outline generation, first draft, final draft). Ex: ChatGPT, v4 was used to generate an outline for this paper.
7. Failure to cite use of outside tools may be considered plagiarism and will be addressed in the same way other academic professionalism lapses would be.

To elaborate on these guidelines, here are the class-specific guidelines and policies for generative AI use:

Within this class, you are welcome to use foundation models (ChatGPT, GPT, DALL-E, Stable Diffusion, Midjourney, GitHub Copilot, Bard, Gemini, and anything else) in a totally unrestricted fashion for any purpose at no penalty. However, you should note that all large language models still tend to make up incorrect facts and fake citations, code generation models tend to produce inaccurate outputs, and image generation models can occasionally come up with highly offensive products.

You will be responsible for any inaccurate, biased, offensive, or otherwise unethical content you submit, regardless of whether it originally comes from you or a foundation model. If you use a foundation model, its contribution must be acknowledged; failure to do so is plagiarism.

These tools should be used as supplementary resources rather than replacements for your individual thought and effort. You are allowed to use AI as a collaborator in the learning process. AI-generated content may be used as a starting point for further research, brainstorming, or discussion. However, you are responsible for building upon this content with your unique perspectives, insights, and critical thinking skills.

Sharing AI Experiences

I encourage you to share how you use AI tools in your learning process, as this will help your peers discover new and effective ways to incorporate AI into their academic pursuits.

Accommodations for Disabilities: Virtual and In-Class

The University of Colorado Anschutz Medical Campus is committed to providing equitable access to our programs for students with disabilities (e.g., psychological, attentional, learning, chronic health, sensory, and physical). To engage in a confidential conversation about the process for requesting reasonable accommodations in the classroom and clinical settings please contact The Office of Disability, Access, and Inclusion at: disabilityaccess@cuanschutz.edu or begin the process via the [website](#). Accommodations are not provided retroactively; therefore, students are encouraged to begin this process early.

Mental Health Services



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Please visit the [Office of Student Affairs – Student Health Promotion website](#) OR the [Department of Psychiatry](#) website for information on mental health services.

Religious Observances

The University of Colorado Anschutz Medical Campus has a legal obligation to accommodate students who must be absent from an educational activity to observe religious holidays or other observances. Students should speak to the faculty member to request accommodations for religious observances in advance during the first week of class. Requests received by faculty must be kept confidential and should be considered unless they create an undue hardship. If the student and faculty member cannot agree on an accommodation, the matter should be referred to the Associate Dean for Academic and Student Affairs for resolution.

CU Systemwide Lands Recognition Statement:

As we gather, we honor and acknowledge that the University of Colorado’s four campuses are on the traditional territories and ancestral homelands of the Cheyenne, Arapaho, Ute, Apache, Comanche, Kiowa, Lakota, Pueblo, and Shoshone Nations. Further, we acknowledge the 48 contemporary tribal nations historically tied to the lands that comprise what is now called Colorado.

Acknowledging that we live in the homelands of Indigenous peoples recognizes the original stewards of these lands and their legacies. With this land acknowledgment, we celebrate the many contributions of Native peoples to the fields of medicine, mathematics, government and military service, arts, literature, engineering and more. We also recognize the sophisticated and intricate knowledge systems Indigenous peoples have developed in relationship to their lands.

We recognize and affirm the ties these nations have to their traditional homelands and the many Indigenous people who thrive in this place, alive and strong. We also acknowledge the painful history of ill treatment and forced removal that has had a profoundly negative impact on Native nations.

We respect the many diverse Indigenous peoples still connected to this land. We honor them and thank the indigenous ancestors of this place. The University of Colorado pledges to provide educational opportunities for Native students, faculty and staff and advance our mission to understand the history and contemporary lives of Native peoples.

Topics & Assignments

Dates/times	Module	Readings/ Other Content
Week 1 (8/26)	No Class	
Week 2 (9/2)	No Class	



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<p>Week 3 (9/9)</p>	<p>Mass Incarceration as a Public Health Issue <i>Class Online:</i> https://ucdenver.zoom.us/j/5556769720</p>	<ol style="list-style-type: none"> 1. Mass Incarceration: The Whole Pie 2025. Prison Policy Initiative. 2. Brinkley-Rubinstein, L. Incarceration as a catalyst for worsening health. <i>Health Justice</i> 1, 3 (2013). 3. (<i>skim</i>) Cloud, D. H., Garcia-Grossman, I. R., Armstrong, A., & Williams, B. (2023). Public health and prisons: priorities in the age of mass incarceration. <i>Annual review of public health</i>, 44(1), 407-428. <p><u>Optional Additional Reading:</u></p> <ol style="list-style-type: none"> 1. Mass Incarceration 101: Resources to help students and teachers understand the carceral system. Prison Policy Initiative. 2. Wildeman, C., & Wang, E. A. (2017). Mass incarceration, public health, and widening inequality in the USA. <i>The Lancet</i>, 389(10077), 1464-1474. 3. LeMasters, K., Brinkley-Rubinstein, L., Maner, M., Peterson, M., Nowotny, K., & Bailey, Z. (2022). Carceral epidemiology: mass incarceration and structural racism during the COVID-19 pandemic. <i>The Lancet Public Health</i>, 7(3), e287-e290. 4. Maruschak, L. M., Bronson, J., Alper, M. (2021). Medical Problems Reported by Prisoners, Survey of Prison Inmates, 2016. 5. The United Nations Standard Minimum Rules for the Treatment of Prisoners (The Nelson Mandela Rules) 6. <i>Emergent Issue Example: LA's Wildfires Threaten Almost 40 Prisons and Jails. Here's How They're Responding.</i> The Appeal.
<p>Week 4 (9/16)</p>	<p>Juvenile Incarceration <i>Guest Expert: Trevor Jones & Eric Davis</i></p>	<ol style="list-style-type: none"> 1. Barnert, E. S., Perry, R., & Morris, R. E. (2016). Juvenile incarceration and health. <i>Academic Pediatrics</i>, 16(2), 99-109. 2. Braverman, P. K., & Murray, P. J. (2011). Health care for youth in the juvenile justice system. <i>Pediatrics</i>, 128(6), 1219-1235. 3. Lartey, J. While Youth Detention Numbers Rise, States Begin to Roll Back Reforms. The Marshall Project. 4. Brown, J. Colorado's youth corrections system wants to grow, which is the opposite of what lawmakers want. The Colorado Sun.
<p>Week 5 (9/23)</p>	<p>Immigration Detention <i>Guest Expert: Allison Carroll</i></p>	<ol style="list-style-type: none"> 1. (Read Summary & Recommendations) Human Rights Watch. 2018. Code Red: The Fatal Consequences of Dangerously Substandard Medical Care in Immigration Detention. 2018. 2. (Read Summary) Human Rights Watch. In the Freezer: Abusive Conditions for Women and Girls in US Immigration Holding Cells. 2018.



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		<ol style="list-style-type: none"> 3. Dekker, A. M., Zeidan, A., Nwadiuko, J., Jordan, E., & Parmar, P. (2024). A call for increased transparency and accountability of health care outcomes in US Immigration and Customs Enforcement detention centers. <i>The Lancet Regional Health–Americas</i>, 36. 4. <i>Optional:</i> Kang-Brown, J. Hiding in Plain Sight: How local jails obscure and facilitate mass deportation under Trump. Prison Policy Initiative. 2025.
Week 6 (9/30)	<p>Conditions of Confinement <i>Guest Expert: Michael Clifton</i></p>	<ol style="list-style-type: none"> 1. Wildeman, C., Fitzpatrick, M. D., & Goldman, A. W. (2018). Conditions of confinement in American prisons and jails. <i>Annual Review of Law and Social Science</i>, 14(1), 29-47. 2. Eisenman, B. The Real Cost of Heat Waves in Prison. The Prison Journalism Project. 3. McDonald, D. What Happened When a Hurricane Flooded My Prison. The Marshall Project.
Week 7 (10/7)	<p>Healthcare Delivery & Continuums of Care <i>Guest Expert: Megan Robins</i></p>	<ol style="list-style-type: none"> 1. Section 1115 Waiver Watch: Medicaid Pre-Release Services for People Who Are Incarcerated. KFF. 2. McCann, S. Health Care Behind Bars: Missed Appointments, No Standards, and High Costs. Vera Institute. 3. <i>(pick 1!)</i> 7 Stories on Health Care in Prisons. Prison Journalism Project. 4. WORTH Website <p><u>Optional Additional Readings:</u></p> <ol style="list-style-type: none"> 1. Allen, E. Cheap Jail and Prison Food Is Making People Sick. It Doesn't Have To. Vera Institute. 2. Friedmann, P. D., Hoskinson Jr, R., Gordon, M., Schwartz, R., Kinlock, T., Knight, K., ... & Mat Working Group of CJ-Dats. (2012). Medication-assisted treatment in criminal justice agencies affiliated with the criminal justice-drug abuse treatment studies (CJ-DATS): availability, barriers, and intentions. <i>Substance Abuse</i>, 33(1), 9-18. 3. Correctional health care guidelines for the management of an adequate delivery system (p. 157-171)
Week 8 (10/14)	<p>Solitary Confinement <i>Guest Expert: Craig Waleed</i></p>	<ol style="list-style-type: none"> 1. Solitary Confinement in the United States: The Facts. Solitary Watch. 2. Kielly, S. How New York's Maximum Security Women's Prison Has Failed to HALT Solitary Confinement. Prison Journalism Project. 2024. 3. Unlock the Box Website 4. Amend. Solitary Confinement vs. Medical Isolation. <p><u>Optional Additional Reading:</u></p>



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		<ol style="list-style-type: none"> 1. LeMasters, K., Maner, M., Behne, M. F., Kaplowitz, E., Evancho, P., & Brinkley-Rubinstein, L. (2023). Solitary confinement under the guise of public health: lessons learned from covid-19 and HIV. <i>Health Affairs Forefront</i>. 2. Jallow, A. A Man Alone. Scalawag Magazine.
Week 9 (10/21)	<p>How are deaths counted?</p> <p><i>Class Online:</i> https://ucdenver.zoom.us/j/5556769720</p> <p><i>Guest Expert: Zaire Cullins</i></p>	<ol style="list-style-type: none"> 1. Behne, M., Waleed, C., Peterson, M., Brinkley-Rubinstein, L.. When It Comes to Reporting Deaths of Incarcerated People, Most States Break the Law. The Appeal. 2. (5-minute listen) Uncounted Deaths in America's Prisons & Jails: Andrea Armstrong's Opening Remarks 3. Journalists: How to Report on Deaths in Jails and Prisons. The Marshall Project. 4. Koskovich, T. Anatomy of a Prison Death. The Marshall Project. <p><u>Optional Additional Reading</u></p> <ol style="list-style-type: none"> 1. Shapiro, N., Bhatia, N., LeMasters, K., Smith, R., & Armstrong, A. (2023). The Complexity of “Natural” Deaths Behind Bars. <i>Academic Forensic Pathology</i>, 13(3-4), 90. 2. LeMasters, K. & Brinkley-Rubinstein, L. Opinion: The Abysmal State of Reporting Suicides from U.S. Prisons. Undark. 3. Websites: <ol style="list-style-type: none"> a. Permanent Subcommittee on Investigations: Uncounted Deaths in America’s Prisons and Jails: How the Department of Justice Failed to Implement the Death in Custody Reporting Act b. Incarceration Transparency c. Third City Project
Week 10 (10/28)	<p>Diverse Populations: Birthing, Parenting, & Women’s Health</p> <p><i>Class Online:</i> https://ucdenver.zoom.us/j/5556769720</p> <p><i>Guest Expert: JoyBelle Phelan</i></p>	<ol style="list-style-type: none"> 1. Trammell, T. I Survived Pregnancy and Postpartum Depression in Jail. Now I Guide Others Like Me. Marshall Project. 2. Jinda, S. Belly of the Beast: California's dark history of forced sterilizations. The Guardian. 3. Phelan, J. When I Left the Women’s Prison, Health Issues Followed Me. Prison Journalism Project. <p><u>Optional Additional Reading:</u></p> <ol style="list-style-type: none"> 1. Tutwiler documentary (33 min)
Week 11 (11/4)	<p>Diverse Populations: Disability Justice & Aging</p> <p><i>Guest Expert: Terrina Flora-Alexander</i></p>	<ol style="list-style-type: none"> 1. Bixby, L., Bevan, S., & Boen, C. (2022). The Links Between Disability, Incarceration, And Social Exclusion: Study examines the links between disability, incarceration, and social exclusion. <i>Health Affairs</i>, 41(10), 1460-1469.



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		<ol style="list-style-type: none"> 2. Williams B, DiTomas M, Pachynski A. The growing geriatric prison population: A dire public health consequence of mass incarceration. <i>J Am Geriatr Soc.</i> 2021 Dec;69(12):3407-3409. 3. Thompson, C. The Never-Ending Murder Case: How Mental Competency Laws Can Trap People With Dementia. The Marshall Project. <p><u>Optional Additional Reading:</u></p> <ol style="list-style-type: none"> 1. Williams, B. A., Stern, M. F., Mellow, J., Safer, M., & Greifinger, R. B. (2012). Aging in correctional custody: Setting a policy agenda for older prisoner health care. <i>American journal of public health</i>, 102(8), 1475-1481. 2. 5 Stories on Compassionate Release. Prison Journalism Project. 3. Living with Disabilities. Prison Journalism Project.
Week 12 (11/11)	<p>Re-Entry</p> <p><i>Guest Expert: Bob Eisenman & Jeff Wise</i></p>	<ol style="list-style-type: none"> 1. Shavit, S., Aminawung, J. A., Birnbaum, N., Greenberg, S., Berthold, T., Fishman, A., ... & Wang, E. A. (2017). Transitions clinic network: challenges and lessons in primary care for people released from prison. <i>Health Affairs</i>, 36(6), 1006-1015. 2. (pick 1!) Life After Prison. Prison Journalism Project. 3. View Websites: <ol style="list-style-type: none"> a. Remerg b. FreeWorld <p><u>Optional Additional Reading</u></p> <ol style="list-style-type: none"> 1. Ranapurwala, S. I., Shanahan, M. E., Alexandridis, A. A., Proescholdbell, S. K., Naumann, R. B., Edwards Jr, D., & Marshall, S. W. (2018). Opioid overdose mortality among former North Carolina inmates: 2000–2015. <i>American journal of public health</i>, 108(9), 1207-1213.
Week 13 (11/18)	<p>Consequences for Families & Communities</p> <p><i>Guest Expert: Taylor Doucet</i></p>	<ol style="list-style-type: none"> 1. Turney, K. (2014). Stress proliferation across generations? Examining the relationship between parental incarceration and childhood health. <i>Journal of Health and Social Behavior</i>, 55(3), 302-319. 2. Lee, R. D., Fang, X., & Luo, F. (2013). The impact of parental incarceration on the physical and mental health of young adults. <i>Pediatrics</i>, 131(4), e1188-e1195. 3. Lee, H., Wildeman, C., Wang, E. A., Matusko, N., & Jackson, J. S. (2014). A heavy burden: the cardiovascular health consequences of having a family member incarcerated. <i>American Journal of Public Health</i>, 104(3), 421427. <p><u>Optional Additional Reading</u></p> <ol style="list-style-type: none"> 1. Vanden Bosch, M. D. (2020). Rural Prison Siting: Problems and Promises. <i>The Mid-Southern Journal of Criminal Justice</i>, 19(1), 5.



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<p>Week 14 (11/25)</p>	<p>Clinical & Public Health Ethics</p> <p><i>Guest Expert: Gianna Morales</i></p> <p><i>Optional Zoom Link:</i> https://ucdenver.zoom.us/j/5556769720</p>	<ol style="list-style-type: none"> 1. Trestman RL. Ethics, the law, and prisoners: protecting society, changing human behavior, and protecting human rights. <i>J Bioeth Inq.</i> 2014 Sep;11(3):311-8. 2. Testimony on Medical Experimentation in Holmsburg Prison 3. Wang, E. A., Zenilman, J., & Brinkley-Rubinstein, L. (2020). Ethical considerations for COVID-19 vaccine trials in correctional facilities. <i>Jama</i>, 324(11), 1031-1032.
<p>Week 15 (12/2)</p>	<p>What is our role?</p> <p><i>Guest Expert: Betsy Craft</i></p>	<ol style="list-style-type: none"> 1. Advancing Public Health Interventions to Address the Harms of the Carceral System. American Public Health Association. 2. Clayton-Johnson, M. A., Samra, S., & Levenson, J. (2021). Allying public health and abolition: Lessons from the campaign against jail construction in Los Angeles. <i>American Journal of Public Health</i>, 111(4), 574-576. <p><u>Optional Additional Reading</u></p> <ol style="list-style-type: none"> 1. Abolition Is a Collective Vision: An Interview With Mariame Kaba. The Nation.

More Resources:

5. Reporting from Inside:

- a. [Ear Hustle](#) Podcast
- b. [Colorado Radio for Justice](#)
- c. [Colorado Prisons: Inside Report Newspaper](#)

6. Shared Language:

- a. [The Language Project](#). The Marshall Project.
- b. Thomas, R. [How I Convinced My Incarcerated Peers to Make Language a Priority](#). The Marshall Project.

7. Global Incarceration:

- a. [Incarceration Rates in an International Perspective](#). The Sentencing Project.
- b. International Committee of the Red Cross. [Malnutrition can turn a prison sentence into a death sentence](#). 2016.

8. Care for Transgender Individuals:

- a. [Advancing Transgender Justice: Illuminating Trans Lives Behind and Beyond Bars](#). Vera Institute.

9. Specific Health Conditions:

- a. [Research Roundup: Incarceration can cause lasting damage to mental health](#). Prison Policy Initiative.



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b. COVID-19

- [‘Something Is Going to Explode’: When Coronavirus Strikes a Prison.](#) New York Times.
 - Barnert, E., Kwan, A., & Williams, B. (2021). Ten urgent priorities based on lessons learned from more than a half million known COVID-19 cases in US prisons. *American Journal of Public Health*, 111(6), 1099-1105.
 - [COVID-19 in Prisons and Jails.](#) Prison Policy Initiative.
- c. Wang, E. A., & Green, J. (2010). Incarceration as a key variable in racial disparities of asthma prevalence. *BMC Public Health*, 10(1), 290.
- d. [How Incarceration Raises Risk of Cancer Diagnosis and Death—Even After Release](#)
- e. [How poor dental care in prison makes reentry harder for formerly incarcerated people.](#) PBS.
- f. Brinkley-Rubinstein, L., Cloud, D., Drucker, E., & Zaller, N. (2018). Opioid use among those who have criminal justice experience: Harm reduction strategies to lessen HIV risk. *Current HIV/AIDS Reports*, 15(3), 255-258.
- g. Spaulding, A. C., Anderson, E. J., Khan, M. A., Taborda-Vidarte, C. A., & Phillips, J. A. (2017). HIV and HCV in US prisons and jails: the correctional facility as a bellwether over time for the community’s infections. *AIDS Rev*, 19(3), 134-147

