



Forum on Rural Population Health

May 19-21, 2025
Seaside, Oregon
ohsu.edu/orhforum



From Incarceration to Integration: Bridging Healthcare Gaps for Justice-Involved Individuals in Rural Oregon

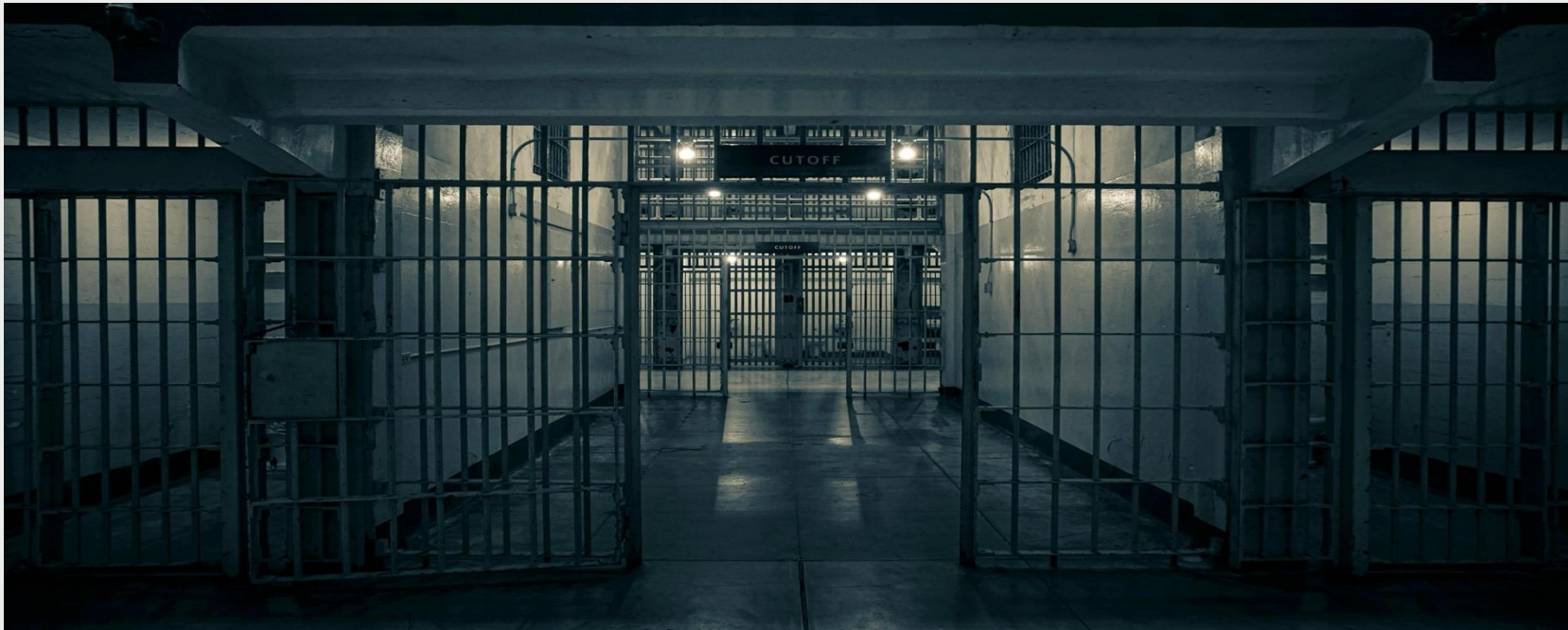
Julia Yoshimoto, Angela Kim and Kyle Hedquist
Oregon Justice Resource Center

Genentech
A Member of the Roche Group



From Incarceration to Integration: Bridging Healthcare Gaps for Justice- Involved Individuals in Rural Oregon

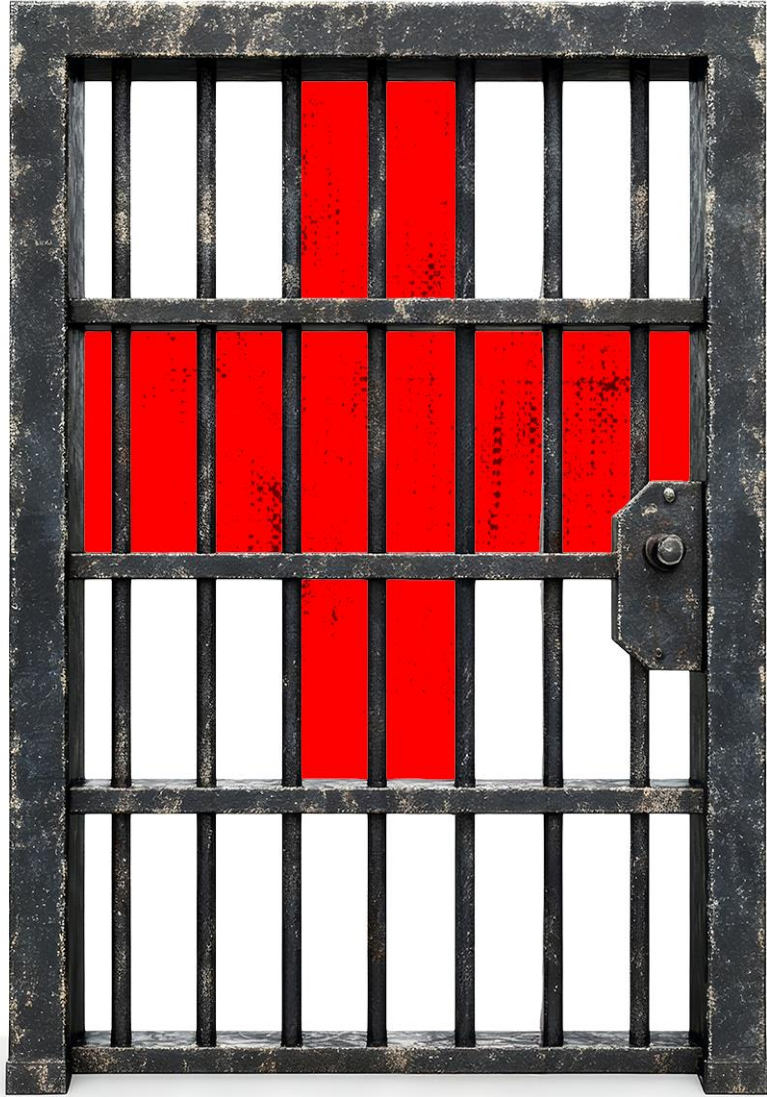
May 20, 2025 Speakers: Julia Yoshimoto, Angela Kim, Kyle Hedquist



OJC Oregon Justice
Resource Center
Advocate. Educate. Engage.

“Mass incarceration is one of the most significant drivers of public health in our time.”

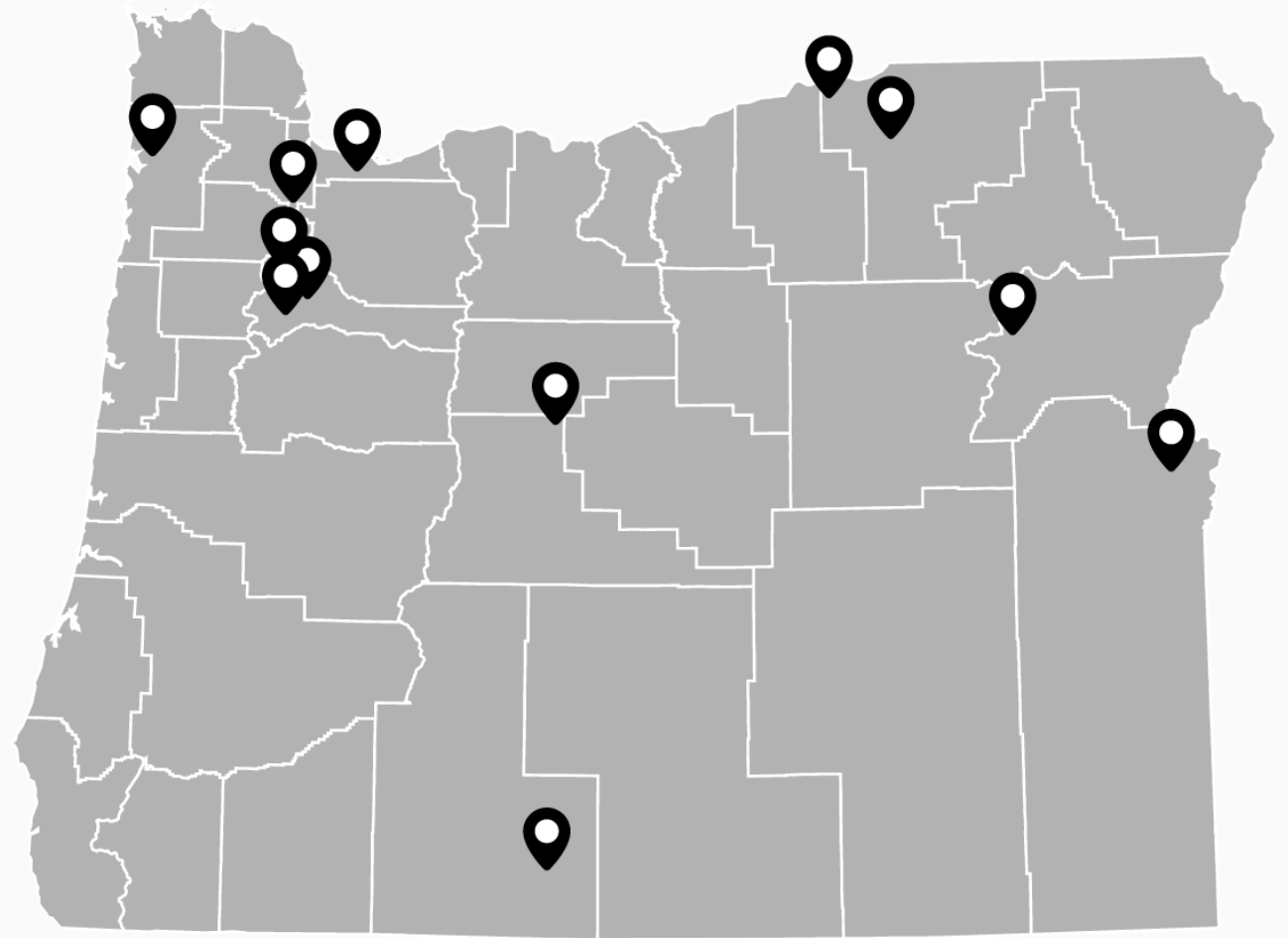
- **Jim Parsons, V.P. and research director, Vera Institute of Justice (2020)** at a convening of the National Academies of Sciences, Engineering, and Medicine on *The effects of incarceration and reentry on community health and well-being*.



“Ultimately, we find that ‘correctional healthcare’ is not really healthcare in the traditional sense when one looks at the business model and who it serves. Correctional healthcare systems are designed in such a way that incarcerated people’s health needs are treated more like a nuisance than their ostensible mission. Instead, this walled-off healthcare system functions like a cost control service for corrections departments, organized around limiting spending and fending off lawsuits rather than actually caring for anyone’s health. In this business, *prisons are the customer*, not incarcerated people, and a department’s needs take center stage.”

- Prison Policy Initiative, *Cut-rate care: The systemic problems shaping 'healthcare' behind bars* (2025)

What about Oregon?



12,005 people in Oregon's prisons

- Male: 11,095
- Female: 910

According to ODOC population data, as of 4/1/25

Where are Oregon adults in custody from?

Baker: 49	Douglas: 408	Lincoln: 288	Union: 81
Benton: 134	Grant: 21	Linn: 567	Wallowa: Not Avail.
Clackamas: 1,030	Harney: 24	Malheur: 152	Wheeler: Not Avail.
Clatsop: 175	Jackson: 746	Marion: 2,007	Washington: 1,507
Columbia: 143	Jefferson: 121	Morrow: 43	Yamhill: 335
Coos: 323	Josephine: 513	Multnomah: 2,412	Gilliam, Hood River, Sherman, and Wasco: 124
Crook: 99	Klamath: 389	Polk: 240	
Curry: 70	Lake: 29	Tillamook: 65	
Deschutes: 453	Lane: 1,503	Umatilla: 352	

Vera Institute of Justice, <https://trends.vera.org/state/OR>, Oct. 16, 2024

Average Adults in Custody Released Per Month–Statewide: 313 (10/2021 - 9/2022)

Have you developed any illnesses or medical problems after entering CCCF?

(66 participants, 2018)

Yes: 64%

No: 36%



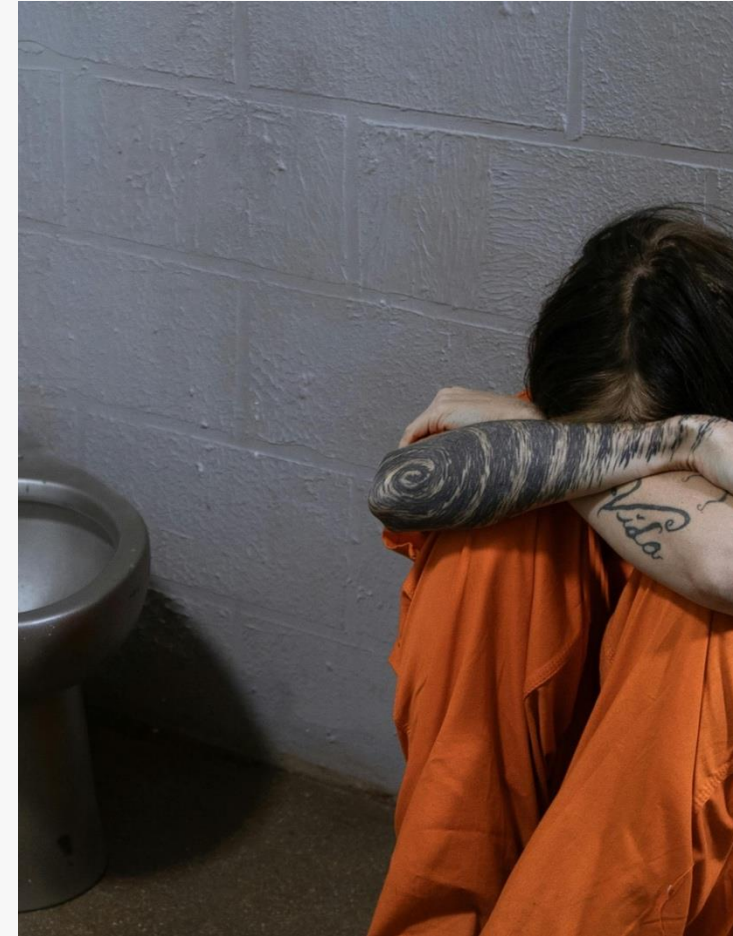
When asked to describe the illnesses or medical problem, women wrote:

- *Ankle shows Bone on Bone articulation it is painful to walk or stand.*
- *Anxiety, Depression*
- *Back surgery...-injury fall. Thyroid-masses...*
- *Back surgery. Stomache problems*
- *Bled for 42 days last month; still no clue why. Constant stomach problems*
- *Blood pressure consistent with pain but they still haven't diagnosed what's wrong nor tried; plus they found a cyst on my heart & haven't' done anything about it*
- *Blood sugars are out of control*
- *Can't get rid of skin problem*
- *Cervical cancer bone spur rectal hernia*
- *Chronic migraines*
- *Currently having thyroid issues*
- *Depression, anxiety, thyroid neck/back/arm issues (undiagnosed)*
- *Diabetes, asthma, back pain*
- *Food is not healthy. Digestive system in not working properly.*
- *Found out I have HPV after 7 yrs here. My bones & joints now swell*

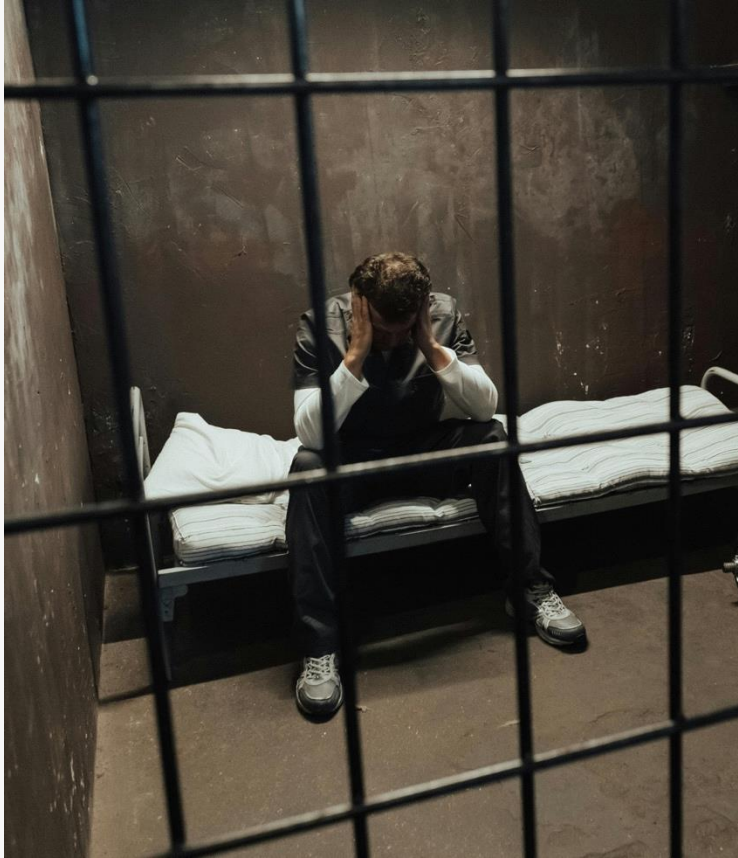
- *Gallbladder problems. I'm one of the few who gets to keep them. It's one thing you don't get to leave with here.*
- *Gaul bladder was removed, cou[ld]n't digest foods here.*
- *Had to have my gall bladder removed*
- *Heart condition*
- *Heart issues and high blood pressure*
- *Heart problems and joint problems in my knees*
- *Heart, strokes*
- *Hight blood pressure & difficulties with heavy bleeding due to menopause*
- *Hyatial hernia-shoulder injury-leg problems*
- *I had to have my gallbladder taken out*
- *Lung problems*
- *Migraines very often. Neck pain*
- *My thyroid issues began in [jail] an I have had low white blood count and platelets for several years, going back to my first blood tests 14 years ago*
- *Neck and left hip.*
- *Panic attacks, headaches, lumps in my neck/skull, untreated torn tendon*
- *PTSD*
- *Shoulder pain, radiates down my arms/hands cant lift blankets off of me!*
- *Sleep anxiety*
- *Stiffness in my hands*
- *Things that still cannot be explained w/ my stomach*
- *I have bad allergies from the recycled air. Nosebleeds. My feet are always in pain from being on concrete floors. I have gained weight here.*

Poor Medical Care Results in More Severe Medical Conditions at Release

- Medical care is regularly delayed by weeks, months, and even years.
- AIC's medical complaints are regularly ignored, minimized, and dismissed by medical staff.
- DOC regularly misdiagnoses medical problems.
- DOC regularly ignores orders and recommendations from outside specialists.
- DOC fails to care for pre-existing conditions.
- DOC makes decisions about medical care based on length of time remaining on AICs' sentences.
- DOC's medication formularies are incredibly outdated.
- Cost drives decisions about medical care.



Harsh Prison Environment Results in the Deterioration of Physical and Mental Health



Concrete and metal furniture and fixtures

Extreme temperatures

Infrastructure in disrepair

Inadequate diet and nutrition

Lockdowns and solitary confinement

Environmental sensory trauma

Surveillance, abuse, and psychological stress

Stigma and isolation

Difficulties Transitioning to Rural Communities

Medication access and continuity

Insurance coverage

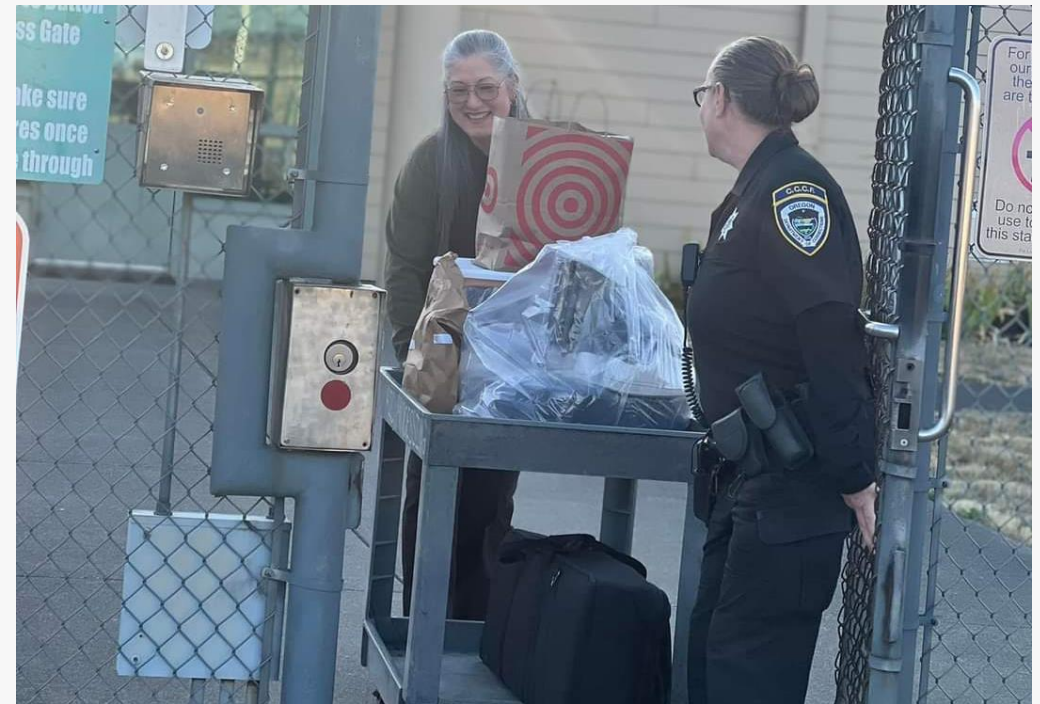
Digital disconnection

Care coordination

Health records

Limited access to providers

Stigma



What can you do?



- **Engage in efforts to improve conditions in Oregon's prisons!**
 - Contact your legislators.
 - Support legislation, i.e., SB 293, SB 1120.
 - Contact ODOC.
 - Contact OJRC's Policy Director, Zach Winston at zwinston@ojrc.info.
- **Check in on your patients in ODOC custody.**
- **Prepare for the Medicare/Medicaid 1115 Waiver.**
- **Learn about current community initiatives.**

Spotlight on Community Initiatives

HEAL-R Program (Health Equity and Leadership at Richmond) is a community-based program at the OHSU Richmond clinic, that centers carceral lived experience, peer support, and trauma-informed care to address the social drivers of health. It brings together patients and community members in safe, inclusive spaces to share stories, build common ground, and work collaboratively to influence policies and practices that support health equity.

RELATE Lab brings together healthcare workers, trainees, patients, and community members to develop relational leaders, foster community, and build the evidence to co-create a more humanizing, equitable health system.

Transitions Clinic Network (TCN) is a national organization committed to reversing the harms of mass incarceration by eliminating racial health and economic disparities. They train and utilize Community Health Workers with carceral lived experience.

Phoenix Rising Reach-in Programs ensures pre-release connections to community health resources.

THANK YOU



Contact:

Julia Yoshimoto, MSW, JD
Women's Justice Project Director
Oregon Justice Resource Center
jyoshimoto@ojrc.info
503-563-3355



Thank you to the 2025 Forum partners!

Forum on Rural
Population Health

