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**SPEAKERS**

Meghan Novisky, Jenn Tostlebe, Jose Sanchez

**Jenn Tostlebe** 00:14

Hi everyone welcome back to The Criminology Academy, where we are criminally academic. My name is Jenn Tostlebe

**Jose Sanchez** 00:21

and i'm Jose Sanchez

**Jenn Tostlebe** 00:23

We are your hosts for the episode.

**Jose Sanchez** 00:26

In this episode we're speaking with Professor Meghan Novisky about exposure to secondary violence in prison, which is sort of witnessing violence, witnessing other people be violently victimized; some of the impacts and implications of this secondary exposure; and we'll also talk about prisons and the COVID-19 outbreak.

**Jenn Tostlebe** 00:49

Dr. Meghan Novisky is an assistant professor of criminology at Cleveland State University. Her research investigates incarceration as a social determinant of health and how conditions of confinement structure health disparities. Her recent research has been published in outlets including Criminology, Justice Quarterly, Victims and Offenders. and the Journal of Correctional Health Care. In response to COVID-19, Dr. Novisky has written national and local op eds about the health implications of incarceration during the pandemic. She has also partnered with the American Civil Liberties Union of Ohio by drafting expert declarations to urge release or transfer of vulnerable incarcerated adults in Ohio's prisons and jails. These declarations were cited in briefs before the supreme court of the united states, the United States Court of Appeals for the sixth circuit, and the United States District Court for the Northern District of Ohio. Thank you so much for joining us Meghan.

**Meghan Novisky** 01:45

Thank you so much for having me. I'm excited to be here.

**Jose Sanchez** 01:48

Yeah, we're excited to speak with you. This should be a fun episode. As usual a quick breakdown of what this episode's gonna look like. We're gonna start with some general questions about incarcerated populations, institutions like prisons, then we're gonna move into a study that was published this year by Meghan and one of her colleagues, and then finally we're going to talk about prisons and COVID-19. So with that being said take it away Jenn.

**Jenn Tostlebe** 02:23

Thanks Jose. So again as Jose mentioned we're just going to start with some general questions on incarceration and incarcerated populations. So, Meghan first a really broad question. We hear the term "mass incarceration," or this influx of the number of prisoners into US prisons, used frequently in academics and pop culture. Recognizing that there have been various explanations for the start of mass incarceration: When and why did mass incarceration begin?

**Meghan Novisky** 02:56

Prior to the early 1970s, so around 1973, the US incarceration rate in prisons was pretty stable at a rate of about 100 per 100,000, and then in the mid 1970s the incarceration rate in prison started to climb pretty drastically and did so for almost 40 years. So that near 40 year growth is what resulted in this term mass incarceration. It peaked at a rate of about 500 per 100,000 within prisons, and right now we're in the low 400s per 100,000 in prisons. So we're a little bit lower today then some of the rates of recent decades but still much higher than where we at in the US normatively prior to the 1970s. And of course these numbers are even higher when you include jails in the estimate so i was referring to prisons only if you throw jails in it's even higher. As for the the why are the drivers of mass incarceration the biggest drivers are the shifts in sentencing practices that occurred between the 1970s and 1990s. These were put in place in general to reflect mentality of getting tough on crime or being more harsh with sentencing. The belief at the time was that more serious consequences for criminal behavior would deter people from engaging in crime. So, for example, if we send someone to prison for 10 years certainly they'll be afraid of doing something that would put them at risk for a 10 year prison sentence versus maybe you know two years or something like that. Even worse than that, if we threaten them with life in prison that will surely deter them. So, you saw introductions of mandatory minimum sentences, three strikes laws--so on your third felony it triggers an automatic life sentence--truth in sentencing--so where people were able to be released from prison earlier based on good behavior. There were caps put in place for how much time they had to serve. And then as I said, laws mandating life without the possibility of parole. So the backdrop of all this, of course, was the war on drugs, which played a large role, because a lot of these sentencing efforts targeted drug offenses specifically.

**Jenn Tostlebe** 05:20

Alright, so we know that several trends have kind of come out of mass incarceration, including things like overcrowding, racial disparities, changes in arrest and sentencing policies, which you just discussed, an ageing prison population, reliance on control of the population compared to rehabilitation. And so could you elaborate on one or two of these trends, and how they impact the lives of those who are incarcerated?

**Meghan Novisky** 05:50

Yeah, so I'll focus on the aging prison population, since that's one of my focus areas, people who are 50 years of age and up are typically classified as older or a geriatric population in prison settings, which is pretty different from community settings, where you would see older ages like 60, or 65 and up. And the reason you have that lower age criteria is because people who have been incarcerated tend to experience more health problems earlier in their life than people who have not been incarcerated. And so over the last couple of decades, what we've seen is a large increase in the number of older incarcerated adults in prisons. So today, what you can think of is essentially one in five people in prison would be classified as older, so be at least 50 years of age. This increase has introduced many issues for correctional administration. One example is that health care services take up a growing percentage of correctional budgets due to the greater need for health care services that older adults have. Where you might have some additional money for staffing previously, more money is being funneled into correctional health care services because of the need to care for these older individuals. You mentioned overcrowding. So if you think about the combination of the sizable number of older adults that are now incarcerated, with the overcrowding problems that we have, this has really contributed to correctional facilities becoming hotspots for the COVID-19 pandemic. And then if you just think about the fact that prisons were never really designed to accommodate an older population, so simple things like guard rails in showers so that people don't fall, or I know people in my research that I've interviewed have talked about, you know, making requests to be on a bottom bunk versus a top bunk because when they're assigned to a top bunk, if they have a condition like epilepsy, where they're at risk for seizures, and they fall out, that then becomes a life threatening situation. So those are the kinds of things that are coming up with this growth in the older prisoner population.

**Jenn Tostlebe** 08:04

I hadn't even thought about the bunking situation, that makes so much sense. I mean, not only epilepsy, but just getting older too. And climbing to the top bunk would be difficult.

**Meghan Novisky** 08:16

Yeah. And I hadn't really thought about it much, either, until I started talking, you know, with people who are living in these situations. And something else that, you know, they used as examples were things like, you know, if they don't get vision checks regularly, or if they don't get hearing aids that can help them that then increases their risks for victimization in the prison because they can't monitor their surroundings as easily due to, you know, declining vision and or hearing.

**Jenn Tostlebe** 08:46

Lots of things to think about.

**Jose Sanchez** 08:49

Yeah, one of the things that you mentioned a little earlier, was that we have compared to some of our previous decades, a lower incarceration rate. And so some of the research that we're seeing, come out, is talking about, you know, this downsizing of the prison and jail populations, or I've seen a couple of call it or say that we're entering this era of mass decarceration. What exactly does this mean, and why are we seeing this happen now?

**Meghan Novisky** 09:23

First of all, I'll say I hope we are entering an era of decarceration. I certainly think that's the direction we need to be heading towards. And so some of the reductions that we that we are seeing, well, let me scale back. So to explain what decarceration means we're simply talking about implementing policies and procedures that will significantly reduce the volume of people incarcerated in jails and prisons. So calls for decarceration are being made for multiple reasons. Some of the rationale behind that includes growing evidence of inhumane conditions of confinement, the financial expense of incarcerating so many people. I know, in Ohio, it's about $25,000 per year per person to incarcerate in our state prisons. So multiply that out times the about 49,000 people we have incarcerated in prisons in Ohio. And that just gives you an idea for what we're looking at with the budget, and then problems with overcrowding and understaffing. And again, we're seeing this play out with the pandemic, where we have all these people crowded together, and they're unable to socially distance. And they're having problems keeping up with staffing, and they can't account for the conditions of the pandemic. So I think the pandemic represents a timely reason or rationale for why decarceration is being suggested and advocated for.

**Jenn Tostlebe** 10:48

Alright, so kind of switching topics just a little bit to get into kind of this new wave of terminology that people are advocating for. So in recent years, there's been this push amongst some correctional researchers to use people first language when describing those who are in or touched by the criminal justice system. And based off of your work, the things that I've read, and just talking to you in other circumstances, it seems like you're a strong advocate of this movement. Can you describe this trend, and the importance of using terms like people who are incarcerated, or people who were incarcerated rather than things like offender, inmate, ex convict, etc?

**Meghan Novisky** 11:37

Yeah, and I'm really glad you asked this question. So I'll start by saying that this is something that should have been trending much earlier. And I will admit myself that this has been a learning curve for me. And I have made efforts to be more intentional in my choice of language, because basically, the goal is to describe incarcerated individuals as they are, which is people. And this is a population that is far too often dehumanized, or seen by the public as subhuman. So basically, academics such as myself, the two of you, others, policymakers, the media, we all risk contributing to the problem, if we use stigmatizing terms, such as offender or inmate. And so the important thing to remember is that incarceration status does not or should not strip someone of their humanity. We need to remember we're talking about human beings, we're talking about people. And one example that I will always remember was, when I sat down to interview someone, and it was shortly after this individual had left prison, so it a few months after he was released, and we sat down to do the informed consent process, and I asked him to sign his name. And he started tearing up. And he was like, you know, I'm really sorry, it's just the first time anyone's asked me to actually use my name instead of sign inmate. And that really, you know, resonated with me, I certainly don't want to be part of the problem here. I want to be part of the solution. So that's why I have tried to be more intentional in my language choices and the words I'm using even like when I'm writing academic papers and things like that.

**Jenn Tostlebe** 13:24

I completely agree that this is something that should have been more widely implemented years and years ago. And it has long ranging, stigmatizing effects, even post release that we're seeing.

**Meghan Novisky** 13:38

Yeah, absolutely.

**Jose Sanchez** 13:40

Yeah, definitely. And I've seen it with, we see it with juveniles, and people are moving away from calling them delinquents. And I know even some people have pushed back against like the term juvenile. Because, you know, in our field, the juveniles, you're the person that that has been adjudicated of something. And, yeah, I gotta agree that it just makes it seem like when you call someone, an ex con or a criminal, like, you're...not to get, like super theoretical with it, but you're sort of labeling the person as a whole, based on one act, right, instead of so just focusing on the act itself.

**Meghan Novisky** 14:25

Yeah, absolutely. I mean, you're essentially contributing to this branding that occurs of someone or defining them based on their, you know, one, one choice they made or one bad decision they made. And so it kind of takes away in a sense, optimism or ability to kind of move forward from that and do something that is different, right?

**Jose Sanchez** 14:51

Yeah, definitely. And so as we start to start making our way towards talking about your your paper. When you look at the at the report by the Bureau of Justice Statistics, at the end of 2019, there were approximately more than 1.4 million individuals incarcerated in state and federal prisons. And, again, like you said earlier, this is the lowest rate that we've had in quite a while. More often than not, those individuals who are incarcerated not only engage in criminal behavior, but are also victims of other people's criminal behavior, both in and out of prison. How many, or what percentage of people would you say are victimized while they are under institutional control, whether that be in prison or in jail?

**Meghan Novisky** 15:47

So that's a great question. And my response to that is that the estimates, you know, depend on how we're defining victimization. But a couple examples I can give you is that 2% of the deaths of people in prison are caused by homicide. And then the results of a national survey of jail detainees, this was back in 2002, show that approximately 7% of those in jails were injured in some way as a result of a fight or an assault. And then, you know, also disturbing is BJS reporting about 25,000 instances of sexual victimization among incarcerated people in 2015. Those are the most recent estimates we have. But the bottom line is we know it happens. We don't know enough about victimization rates in correctional facilities and how often they're happening. And government data collection efforts often lag by several years. So I mean, you kind of have to piece things together. We know that people prior to prison have higher rates of traumatic experiences, including exposure to violence. And so, you know, that in combination with people being exposed to violence in prison is problematic because you're essentially amplifying those risk factors they have before they even get into the door if they're exposed to more violence while under correctional custody.

**Jose Sanchez** 17:17

Okay, I think that actually does serve as a nice segue to talking about your paper. AThis paper was authored by Megan Novisky and her co author, Robert Peralta, and it's titled "Gladiator school:" Returning citizens' experiences with secondary violence exposure in prison. The paper was published in 2020, in Victims and Offenders. In this paper, Professor Noviksy and her co-author detail the extent and impact of trauma exposure during incarceration. More specifically, they use data from in-depth interviews with 25 men and five women who recently left prison in a Midwestern US state to document the range of physical violence and injuries that they witnessed during their periods of confinement. And unlike most of the papers that we've talked about, so far, this was a qualitative study, meaning that the interviews were not done under the guidance of a structured survey, which is what you generally see in quantitative research. And in this paper, participants were asked about their experiences, while incarcerated generally, and specifically focused on the extent and impact of trauma exposure during their incarceration, meaning witnessing physical violence and injuries. And just to quickly talk about qualitative work, it is helpful for discovering facts about social phenomena, decision making, and processes. And it's also a good way to explore the way that people interpret and make sense of their experiences, which is what this study was focusing on, right, studying how the participants were interpreting their experiences. And so our first question: what was the inspiration behind this paper?

**Meghan Novisky** 19:17

Thank you for that introduction and kind of overview. And as I said, a couple minutes ago, we don't know nearly enough about the extent of victimization in prison. So one of my areas of research interests are understanding the conditions of confinement and I certainly see violence as a part of that. And as the two of you are probably also aware based on your own research, it can be pretty difficult to collect data from prisons. That contributes to why we don't have you know, a larger understanding of violence inside institutions. And the data we do have I'll add are also fairly narrow in that they tend to focus on prison violence as one of two things, either personal victimization or perpetrated assaults, right. So we're typically surveying people about whether or not they're victimized and whether or not they committed a misconduct, including, you know, violence. So with Rob and I's paper, we really tried to widen the lens, so to speak, by conceptualizing victimization or violence as also including witnessed violence. So not just whether someone was personally victimized or whether they perpetrated an act of violence, but what were they observing around them? And how is that a component of violence that we should be thinking about? And so the idea was to get a better understanding of prison violence by considering the implications of witnessing violence inflicted on others.

**Jenn Tostlebe** 20:48

And why is it important to understand the frequency and intensity of secondary exposure to violence or witnessing violence?

**Meghan Novisky** 20:58

I think it's important for a few reasons. Firstly, it's certainly a human rights issue. So correctional authorities have a duty to provide humane conditions of confinement, which includes safe living conditions and living quarters. So just because someone's incarcerated, that doesn't mean that they have lost their constitutional rights, they still have constitutional rights. Secondly, traumatic events, including experiences with violence can trigger or worsen mental health symptoms, and they can become barriers to rehabilitation and re-entry. So within the correctional literature, we look at what's termed responsivity factors. So what are the barriers that are going to get in the way of rehabilitative programming being effective, and if someone is so traumatized or experiencing, you know, reduced functioning because of mental health symptoms, then that's going to potentially be a barrier to their ability to complete rehabilitation programming, and successfully reintegrate back into society. One of the people I interviewed for this study, I remember describing difficulties that they had keeping a job after they were released, because the job they got was retail, it was a retail setting, and they were constantly surrounded by customers. So they didn't feel safe, unless they could account for who was around them at all times, and kind of where people were around them at all times. And that's essentially impossible if you're working, you know, in a store, for example. And so that was so anxiety provoking for that individual that it was interfering with their ability to lower their risk for recidivism, which involved keeping a job. Another person I spoke with discussed being triggered by loud noises, because it reminded them of similar noises they heard when they were hearing others getting attacked in prison. So I think those are a couple of reasons why this is important.

**Jenn Tostlebe** 23:01

I think it was a statistic in this paper that kind of shocked me, I knew it was high, but I wasn't aware of how high but you talked about post traumatic stress disorder and how I think it was like 20% of people are found to have PTSD after released from prison, which is exactly what you were just talking about.

**Meghan Novisky** 23:24

Yeah, I mean, you see similarities, if you read research on PTSD surrounding conditions of war, or people, you know, being deployed in battle type situations.

**Jose Sanchez** 23:36

So in this paper, you use, you're draw on two theoretical perspectives to sort of frame the paper, and we'll touch on them a little bit more in-depth later. But, we did want to give our listeners a brief overview of these theoretical perspectives prior to jumping in on them just in case they are not familiar with them. And the first one that you talk about is social learning theory that was developed by Ron Akers. And it really emphasizes that behavior is learned through our associations and reinforcements. And we learn our behavior through imitation, observing others, and our behavior is learned. The other theoretical perspective that you draw on is general strain theory, which was developed by Robert Agnew. And this theory focuses more on external pressures like negative life events, for example, being sent to prison, and how these events can bring about negative emotions like anger, and how some people may cope with these pressures and emotions by committing crime. And so that's just a very brief barebones sort of description of the theoretical frameworks that Meghan draws upon for this paper. And so we just wanted to establish that real quick for our listeners.

**Jenn Tostlebe** 25:10

Yeah. So also through your thematic development process, or the process of identifying, analyzing, and interpreting patterns within the data or the qualitative interviews that you conducted, you developed several themes that represent this secondary violence exposure faced by people in your sample during their incarceration periods. Violence was an incredibly common experience. 27% of respondents described experiences with themselves being victimized or personal violence, and all 30 respondents indicated witnessing violence inflicted on others while in prison. And so this paper focuses specifically on that last part, or the secondary violence exposure in prison. And of these 30, respondents, 97%, or 29 out of the 30, witnessed physical assaults or fights during their incarceration experience. These fights took various forms, which you elaborate in your paper. Could you just describe, I think there were three types of physical assaults witnessed by people in your sample?

**Meghan Novisky** 26:21

Sure. So the first of the three was what we call non weaponized assaults. So these were assaults that you would probably think about as a fight that involved you know, a physical conflict. So someone was beat up by getting punched, being kicked, being pushed, things like that. So they were assaulted in some way, but it didn't involve a weapon. And the second category then did involve a weapon. So we termed those to be weaponized assaults. So someone being assaulted with the use of a weapon. And the paper reviews some of the various types of weapons in the prisons. And for those who are interested, I would encourage them to read about that a little bit more, because I mean, the types of weapons that are used are, I guess I'll say innovative, because they have access to such limited materials that they're making weapons out of things we wouldn't think about as weapons in the community. One example that I'll point to is heating up substances such as honey, and then using that to throw on someone to scald them. So of course, you know, if we're thinking about honey in the community, we're thinking about putting it into our tea or, you know, cooking with it or something like that. Whereas in prison that can be used as a weapon to severely injure someone. I know, one of the other examples was a lid from a can of tuna. This was in one of the women's prisons and tuna cans had to be banned after that, and they went to pouches, because that was able to be used as a weapon. So that's what I'm talking about with weaponized assaults. And then the third category is what we termed multi-perpetrator assault. So these were assaults that involved the victim being attacked by multiple individuals. And so it was typically three to five or six individuals beating up on one person in a really brutal way.

**Jenn Tostlebe** 28:16

Were the multi perpetrators thoughts commonly due to like gang initiation? Or did they not really talk about that.

**Meghan Novisky** 28:25

So it often was linked to gang activity. In fact, initiation was mentioned. One of the challenges was to pick someone, typically an older individual and go up and see if you could knock them out with one punch, or as like a group bonding activity, where you would have like the pack mentality going after one individual and attacking them as a group as a group bonding experience. So I wouldn't say all of them are linked to gangs, but it's it's definitely came up as a contributor.

**Jenn Tostlebe** 28:59

Yeah. And I would also agree with you, Meghan, that if people are interested in these things, the quotes that you pull out and use in the paper are really enlightening. And some of these experiences are just pretty traumatic experiences to even think about, especially some of the weapon involved assaults. In the innovative ways and the different descriptions. It's a lot to unpack, but I think it's important to get out there into the world.

**Jose Sanchez** 29:31

Well, thank you. Yeah, I mean, that's like a disclaimer, I guess, for anyone who wants to read the paper is make sure you're in the right headspace for it because the descriptions are quite graphic. And I know, doing the interviews, I was, you know, it was difficult for me at times to you know, keep like a straight face and kind of move through the interview and also, at the same time, express some sympathy for what they experienced kind of all at once. So that was kind of something that came up in interviewing when they we're describing these incredibly traumatic experiences.

**Jenn Tostlebe** 30:06

Alright, so to kind of tie back into the theoretical perspectives that Jose mentioned before, could you talk a little bit about how witnessing these physical assaults map on to social learning theory and general strain theory?

**Meghan Novisky** 30:21

Yeah. So I guess I'll start with social learning theory first. So the idea, as Jose pointed out, is that with social learning theory, observed behavior, essentially risks being imitated. And this is why you see the push within evidence based practices within corrections, to get correctional staff on board to model prosocial behavior. Because if they are modeling prosocial interactions that will be witnessed, that will be observed. And hopefully over time that will be repeated. Of course, the opposite rings true as well, according to this theory, that if staff are engaging in misconduct and violent behavior themselves that may risk being imitated. And so related to, you know, watching violence, if people are witnessing physical assault with some frequency, theoretically, then there are risks for imitating or repeating, that behavior would increase. And so this is concerning, not only during incarceration, because violence in prison could increase, if that happens, but also upon release, if people have learned while they're incarcerated, that violence is effective.

**Meghan Novisky** 31:34

And then general strain theory. So as people are experiencing unpleasant or stressful events with increased frequency, as Jose pointed out, they're more likely to experience these negative emotional states. So that could include anger, frustration, fear, desperation, and so on. And so according to the theory, over time, people may determine that crime is a solution to resolving those negative emotional states. So again, theoretically, criminal behavior could be seen as a coping mechanism to resolve those negative emotional states. And if that happens, then you could see increases in a variety of different criminal behaviors, such as drug use, violence, or, you know, other forms that would that would help them cope with that situation.

**Jenn Tostlebe** 32:25

And as you pointed out, I mean, this is concerning, not only when they're in prison with an increase in misconduct violations, but also post release where these actions could be taken out on other individuals. And considering 97% of people in your sample were witnessing these physical assaults. That's concerning.

**Meghan Novisky** 32:47

And yeah, yeah. And I think it was a saying, think about the length of time that they're witnessing it. I mean, in the United States, our average, you know, prison sentence is about three years. So that's a long period of time, if that's kind of the environment that you're living in.

**Jose Sanchez** 33:05

And something else that you touch on on this paper is not just witnessing people getting hurt violently, but sort of the extreme, which is witnessing homicides, At least nine out of 25 participants in the study described seeing a person kill somebody else, again, the most extreme form of violence. And you also mentioned that it was very common for these deadly altercations to sort of just happen with very little provocation. And so what we wanted to ask you is sort of this, you discuss these burdens of violence? Can you describe what is meant by "burdens of violence," and elaborate on how these burdens aren't necessarily just restricted to the victim of the violence or like the direct victim of the violence?

**Meghan Novisky** 34:10

Absolutely. So underscoring this, I just want to emphasize that, you know, something that's important to consider here is that the environment within which people live can impact them in a variety of ways. So by burdens of violence, what I mean is the consequences or hardships of violence, beyond the victimization of the individual who's victimized themselves. So in this paper, Rob and I discussed how the burdens of violence need to be expanded conceptually. And so one example is that some of our respondents discussed how even though they weren't involved in certain acts directly themselves, so they weren't the victim of the violence and they were not perpetrating the violence. They still had to be involved in it in some way. Not only by watching the violence, which happened across respondents, but being asked to do things like work on the cleanup crew after a violent altercation. We talked to people for example who were actually describing mopping up blood following a serious assault or homicide and I still remember you know one of the one of the men describing to me how he had a mop out and he just talks about how he kept pouring the bleach to his side but he didn't want to look at the floor. So he's like I just kept pouring the bleach and you know running the mop but he didn't want to actually look at the blood because there was that much of it on the floor. Some individuals describe difficulties getting these types of images out of their heads even upon release which is when I interviewed them, I interviewed them within a year of their release, so that's one example of a burden of violence that I'm talking about that I think we're not talking enough about in the literature. How is that for that individual that has to go in after an assault and clean up a cell that's still with blood?

**Jose Sanchez** 36:13

That must be tough. You know seeing something as bad as a homicide and then being told that you that you need to clean up the scene.

**Meghan Novisky** 36:23

And by the way keep in mind what prison labor is. In Ohio I think it's like 29 cents an hour or so. So imagine you're not only asked to clean up that kind of situation but you're being paid pennies or quarters to do it as as your you know job. So it's a burden on top of a burden and something that is, at least among my participants likely to stick with them in a long term manner.

**Jose Sanchez** 36:52

I can only imagine. So kind of bringing back the theoretical framework into it. How did you and your co-author sort of arrive at general strain theory being a good lens to frame the experience of witnessing homicide within a prison setting?

**Meghan Novisky** 37:11

That's a great question. So I mean basically we saw theoretical links that indicated that witnessing that type of violence was experienced or perceived as a particularly stressful event that was tied to negative emotions and we know based on general strain theory that when you have that combination risks for criminality increase. So we felt that framing it in this way would aid policymakers and practitioners in understanding that if prison violence is not addressed and we're not just talking narrowly about the few percent of people who are, you know that we talked about earlier in the podcast that are victims themselves, but prison violence as a whole. If that is not addressed there are not only short term implications but potentially longer term risks for recidivism, which impacts at that point you're talking about you know outside of the prison and the community at large. Within the prison you're talking about risks for victimization for the residents or incarcerated people and the staff, as well. I mean all the staff we have over 400,000 correctional officers working in these institutions and we should want them to be working in a safe environment too. It's not just about the residents of prisons but also all of the staff that are working there.

**Jenn Tostlebe** 38:26

Just kind of a question like something that I'm curious about that I didn't totally gather 100% from the paper which also ties into my next question. In the witnessing homicide section you mentioned that nine out of 25 of the male participants described experiencing this. Did, I know you only had five females in this sample, but did any of them talk about witnessing homicide or was that primarily just witnessing assaults that they were experiencing?

**Meghan Novisky** 38:57

The women didn't describe witnessing homicide. That was exclusive to the men in a sample.

**Jenn Tostlebe** 39:04

So kind of to tie in with the male versus female perspectives. In the opening of your paper, you mention that there are differences between men and women regarding their experiences with violence both before prison and during incarceration. Can you talk a little bit about what these differences are and whether or not you did find gender differences when it came to violence during your interviews?

**Jose Sanchez** 39:31

Sure. So I mean one of the things I'm talking about as far as differences is women who are incarcerated upon entry to prison tend to have more extensive histories of trauma particularly related to histories of sexual victimization and abuse. Oftentimes with incarcerated women their crimes are very much related to fleeing or responding to violence inflicted against them or being in violent environments or drug related behaviors that they are using to cope with the effects of trauma exposure they've experienced. Of course men who are incarcerated have elevated exposure to traumatic experiences as well but that's kind of just an overview of one of the differences. And so within these data I mean one of the gender differences that came up, but I don't want to speak beyond my data because it's only a sample of 30 individuals only five of which were women but so with that kind of limitation in mind i'll say that, none of the women as we just spoke about discussed homicide they were mostly talking about assaultive type behaviors. So while there they were exposed to violence, at least among my sample, it didn't rise to the level of homicide. Another difference that I'll point out is that the women were more likely to describe sexual violence within the institution and oftentimes inflicted by correctional officers. So again men did mention it, it did come up with some of the male respondents but I believe all of the women mentioned it so yeah those are a couple differences that i can point to.

**Jose Sanchez** 41:16

So to wrap up our questions on your paper and this was a pretty important piece to your paper and that was the mental health implications of witnessing this violence while being in a prison setting. Can you describe some of those implications that you found in your study?

**Meghan Novisky** 41:39

Sure. So things like increases in anxiety. Things like difficulty sleeping. Things like being hyper vigilant, so being extra aware and tuned into your surroundings whether or not they are immediately kind of threatening or dangerous to you, constantly being on edge. You see remnants of this with you know symptoms of PTSD or post traumatic stress disorder. Those are some of the ones that immediately come to mind. I know lack of sleep came up a lot and just feeling on edge came up a lot and of course one of my interests is physical health, as well, and so you think about how someone who is more frequently in that state of fight or flight or feeling on edge and you've got risks to your allostatic load being taxed because your body is perceiving itself as in a stressful environment more often. Your cortisol is running all of these things. That can have longer term physical health implications in addition to some of these mental health implications

**Jenn Tostlebe** 42:54

It's all tied together.

**Jenn Tostlebe** 42:58

One other question I had about the mental health implications is, it sounds like we're talking more long term mental health implications, but was this a discussion that they were experiencing these things both while they were incarcerated as well as post-release or was it kind of more one or the other?

**Meghan Novisky** 43:17

I mean we focused mostly on how they were feeling about those events at present. So it was at the upon the interview. I suspect that while they were incarcerated they had limited abilities or at least they felt they had limited abilities to kind of process what they were dealing with or talk about it because there's this expectation that you are not to show emotion in prison, especially in male facilities. So they were mostly reflecting on what was going on at that moment in the community and I will say that something that came up quite a bit was that they try to not even think about it because it's that kind of like upsetting. They were willing to discuss it with me but that was in part because they felt that if they spoke up about it, it might lead to some positive changes down the road. But otherwise they tried to compartmentalize it almost and just like pack it away and not think about it because it's so anxiety provoking.

**Jenn Tostlebe** 44:19

Yeah. Makes sense. Well hopefully it does have some positive changes down the road. I know mental and physical health is something I'm interested in too. Fingers crossed that we can actually make some differences and some movement on the ground.

**Meghan Novisky** 44:35

Yeah, absolutely.

**Jenn Tostlebe** 44:37

Alright so I think this discussion of mental and physical health is a nice transition point to move into a discussion on COVID-19, the COVID-19 pandemic, in prisons and some of the research that you've done on this as well as some of the more public research like the opinion editorials you've written.

**Jenn Tostlebe** 44:57

Correctional facilities we know that they're particularly vulnerable places in the United States when it comes to not only violence as we've been talking about this episode, but also when it comes to health and pandemics. And so I looked up and as of January 5 in American prisons, more than 329,000 people who are incarcerated have tested positive for COVID. And over 2,000 individuals who are in prison have died from the Coronavirus, so pretty high numbers. In one of your more recent papers, you've talked about some of the largest hotspots or clusters of COVID-19 in the US are actually in correctional facilities or are identified as correctional facilities. And so can you elaborate more on why these jails and prisons settings are particularly vulnerable places for things like COVID-19 transmission?

**Meghan Novisky** 45:58

So first of all, just think about the sheer volume of people that we're talking about that are in these facilities. There's a lot of people incarcerated in prisons and jails across the United States, we're talking about a large number of people. And as was pointed out earlier, in our discussion, a lot of our institutions are overcrowded. So you've got a lot of people crammed together in small spaces or tight quarters. It's a very stressful environment, think about our discussion on violence that we just had, right? So the environment is stressful and we know that exposure to prolonged periods of stress can actually increase risks for infectious disease because your immune system can decline in heightened states of stress. And then you've got a lot of older adults crammed together in those circumstances. So one in five individuals are 50 years of age and up. The incarcerated population at baseline tends to have more chronic health problems than individuals residing in the community. So pre-existing risks for something like Coronavirus. And then also prisons and jails, we have to remember, are not static environments, they're very fluid environments. And if even if we take away the transfers, let's assume there was no transfers going on, which we know there were but let's say there weren't, you still have the hundreds of 1,000s of correctional staff moving in and out of those facilities every day. So whatever they're exposed to in the community, they're bringing into the prison and whatever they're exposed to in the prison, they're bringing into the community. And so you kind of put all that together, add on the fact that it's impossible in those settings for people to do the basic CDC guidelines, like we have been encouraged to do in the community, like, stay six feet apart from other people. Someone I just talked to the other day was talking about living in a dormitory style setting where there was 120 people in the dorm, and the bunks are three feet apart. So even when you're sleeping, you're right next to someone else. So all of those factors combined are the perfect storm, unfortunately, for these facilities to become hotspots, and we've seen that play out over the last 10 months.

**Jenn Tostlebe** 48:20

During the summer, I was talking to some individuals who were incarcerated in Oregon prisons within the solitary confinement units. And one of them straight up told us, you know, this is the first time I've ever been thankful to be in a restrictive housing setting because I am able to socially distance versus, as you mentioned, you know, in the dormitory settings, you're three feet apart, even when you're sleeping. So it's just interesting.

**Meghan Novisky** 48:48

Yeah, and I love that paper that you did, I thought one of the comments by one of your respondents, and you can correct me if I'm wrong, but I think it was this paper. But the individual said it something along the lines of it's not a matter of if it's a matter of when it will spread throughout the prisons. And I thought that was just spot on.

**Jenn Tostlebe** 49:08

Yeah, and I mean, their primary reason was the correctional officers going in and out of the community, as you mentioned.

**Jose Sanchez** 49:16

You mentioned how the correction officers can bring COVID-19 from the communities or their homes into the prison and vice versa. And so I had a question and maybe I'm interested in, because I've kind of seen it play out a little bit in my field research, and the impacts that COVID-19 prisons and jails has had on the communities that they are situated in. In my case, we're evaluating the gang reduction program in Denver, and this program works with both juveniles and adults, but ever since about March the program hasn't seen many adult referrals. Actually I don't think they've seen any in several months and part of it has been because one of their biggest referral sources for adults are halfway houses, but right now halfway houses are in complete disarray because colorado DOC is in complete disarray with COVID-19 outbreaks. I've heard some people that halfway houses mentioned that, well, we have this list of people that we are expecting to come in but we'll get 24 hour notice "oh this person is no longer coming because they contracted COVID." And because we don't actually know what our intake is going to be we can't make these referrals. So how do you think COVID-19 in prisons and jails is affecting the communities outside of those walls?

**Meghan Novisky** 50:56

Yeah, well I think the example you gave is really relevant and I think that also touches upon something coming up in the family study that I've been doing with Bree Boppre at Wichita State University. So we've been interviewing family members who have a loved one incarcerated during the pandemic. They've told us about similar things happening inside the facilities with programming coming to a halt essentially because these prisons are trying to go on lockdown or we have reduced movement to reduce spread but then that has the kind of unintended or collateral consequence of reducing access to the programs they need to be eligible for release, which is slowing down their release and as you're describing it that's then trickling into halfway houses. So to your question more directly I think how it's impacting the community, first of all risks for infection are likely elevated in the community because of correctional facilities. When you have hotspots in prisons or jails and you have staff working there coming into the community, that increases the risk for everybody. I mean correctional officers go to the same grocery stores we do, the same restaurants for pickup, they have families, so there's increases in risk in the community just to contract the virus. But the other way it's affecting the community is these individuals have families in the community and these families are just devastated by what's going on. A lot of them, all the people I've talked to, haven't got to see their loved one in 10-11 months because visitations are shut down. And we're talking about wives, we're talking about husbands, we're talking about mothers, kids. They're losing this contact with their loved one and that's impacting them as well. So those are a couple things to think about as far as the community. Our increased risks for contracting the virus and then how family members are impacted as well.

**Jenn Tostlebe** 53:04

And that goes both ways. Not only are the family members not being able to see their loved ones, but people who are incarcerated aren't able to see their loved ones which I'm sure is impacting mental and physical health as well.

**Meghan Novisky** 53:18

Yeah absolutely.

**Jenn Tostlebe** 53:19

Alright so you mentioned your new study just slightly, but we're aware of some of your past and present work on COVID-19 in institutional settings as well as outside of these settings. Including a paper that recently came out in Victims and Offenders called "Institutional responses to the COVID-19 pandemic in American prisons," as well as the project that you mentioned you're working on about what it is like to love someone who's incarcerated during a global pandemic. Can you elaborate a little bit about what these projects are, the goals of them, and then just briefly some of the critical or more preliminary findings that you're finding from these studies?

**Meghan Novisky** 54:04

The first one institutional responses paper, I teamed up with Chelsea Narvey at Sam Houston State University and Dan Semenza at Rutgers Camden and what we did was we decided to essentially put together a snapshot of what institutional responses were like a few months into the pandemic. So we looked at June. So our results are focused on June 2020, this was a few months into the pandemic and we spent time basically scraping data from all 50 state department of corrections websites, as well as the Federal Bureau of Prisons to get an understanding for what their case numbers were like, what they were posting as far as communicating their response plans to the public, and just you know what was going on and how they were presenting it at that time. So that's what that paper is about that. The cool thing about that paper is it's in a special issue about correctional responses to the pandemic worldwide. And it's open access, so anyone can go on and access that paper, and any of the other dozens of papers that have been published, if you're interested in, whether what's going on in the United States or in other countries. And as far as our findings, I mean, we found that there were some things that correctional facilities were doing that, you know, were kind of strengths, or positive, so to speak. And then we found some things that were going on that were concerning, or what we termed kind of areas of growth. And as far as strengths, one of the things we found was just the efforts being made to create a public facing kind of portal for the public to go on and access the numbers. So most, the vast majority, of correctional departments were posting on their websites, how many cases they had among the residents and the staff, for example, and they were regularly updating that. There were efforts made to provide people with some supplies like masks. So those kinds of things. And then as far as areas for growth, we were concerned about people having reduced access to visits, about people being asked to mass produce PPE and sanitation supplies, but not having unrestricted access to it themselves. So like hand sanitizer, for example, is being mass produced. But in a lot of Department of Corrections, the residents were not allowed access to hand sanitizer.

**Jenn Tostlebe** 56:37

So they were making it but didn't have access to it.

**Jose Sanchez** 56:40

Correct. So yeah, so I don't know, those are a couple things that popped up trying to summarize quickly. Yeah, and get into the other paper too. But if folks are interested, there's clear areas in both strengths and deficiencies that we point out in that paper.

**Meghan Novisky** 56:57

And then the other project that I'm working on right now is with my colleague Bree Boppre at Wichita State University. Essentially, in the summer, we decided to launch a project. This is a mixed methods project. So we did a survey that we sent out to people who had a loved one incarcerated in the pandemic. And we received over 300 responses for the survey. But then in the survey, we also asked people to indicate if they would be interested in doing a follow up qualitative interview with us. And so we got to think about 100 people or so willing to do that. So about a third of our sample, and then we randomly selected from that 100 people to contact for these follow up qualitative interviews. So we did those interviews with them last summer in June and July. And because the pandemic, you know, we didn't know what was going to happen at the time, we decided to include a question at that time on whether or not those individual be willing to do a second qualitative interview with us, depending on you know, what was happening with the pandemic later. And so since this is still going on, and you know, very much affecting correctional institutions, we are now in the second phase of our qualitative data collection. We started actually, just last week, doing follow up interviews with these same family members, we interviewed 35 of them last summer. And so we're now circling back to those 35 and doing follow ups about, okay, you told us what was going on in June and July, it's been six months, what's it like now. And as far as kind of preliminary results for that? I don't want to comment too much about phase two, because we're just getting started with that. But as far as phase one, we just, I mean, we determine that, at least from the perspective of family members, and what they're aware of, the conditions in these facilities are pretty dire. A lot of them have diminished contact with their loved one, a lot of them are worried about transparency. And that's an issue that came up in the institutional paper as well, is just the lack of transparency about what's going on in these facilities and how that's communicated to family members. And then there's reporting changes within themselves as a result of, you know, constantly worrying about their loved one and what's going on. So, you know, increases in anxiety, being more on edge or more like, you know, worried and stressed, seeking out counseling for themselves because they don't know how to handle the stress of what's going on. So it's, it seems to be affecting at least the people in our sample pretty significantly and the conditions and the facilities have been reported as pretty dire. A couple examples I'll point to there is, people not having access to things like masks, for weeks or months on end. I know one example that was described to me was the soap wasn't being replaced frequently enough and then when the soap was replaced it was way too strong. The chemicals were too strong so people were using this soap and then they were getting burns on their hands and arms from the soap. So they were in this awful situation or predicament of I want to wash my hands and reduce my risk but if I wash my hands I'm gonna burn my skin. And then an example from an interview I just did a couple days ago, this woman's significant other has not been outside for 10 months, has not seen the sun, has not gotten fresh air. The prison has been consistently in a lockdown type situation and so imagine not seeing the sun or breathing in some fresh air for 10 months. I don't know, I just can't imagine what that would be like and then being you know stuck in a cell with another person for like 50 days on end, not even being able to go out. The way she described it is, well conditions got a little better around Christmas because every few days they were allowed out for an hour to go shower or use the phone or something. So that was reported as an improvement. That just gives you kind of a sense for what's been going on.

**Jenn Tostlebe** 1:01:24

I can't imagine not having a breath of fresh air or having really any alone time ,well as much of, alone time as you could have in an institution. But being with someone for 50 days on end with no separation would be a lot to deal with.

**Jenn Tostlebe** 1:01:43

And i mean, so I think it's really interesting that you're talking to people who have loved ones in prisons because a finding from 2019 was that 45% of Americans have ever had an immediate family member incarcerated. So this is not a small number of individuals that you are starting to gather information from and talking to to get their experiences, so i think that's very cool.

**Meghan Novisky** 1:02:13

Yeah it's essentially one in two of us right. I mean people need to think about it like that. That this is something that affects a lot of us and if it's not affecting a lot of us or hasn't affected a lot of us now it still could at some point.

**Jose Sanchez** 1:02:29

As we move forward with research on COVID-19 in prison and jail settings what do you think are some like the critical questions that we need to ask and answer with our research?

**Meghan Novisky** 1:02:42

Well I'm hoping the two of you come up with some. But as far as my own ideas, I think one of the areas is we're gonna need rigorous research that documents the mental and physical health implications of being incarcerated during a pandemic. So this is something we're going to need to look at you know in a more longitudinal sense. But, I mean the way I see it there are so many people right now living in solitary confinement style quarters and have been for months and we already have research that indicates that there are physical and mental health harms of prolonged exposure to solitary confinement and what I suspect is that we're going to see similarities with the pandemic. Especially because family contact has declined and that can at times be a buffer to helping prevent some of these physical and mental health impacts. So even though these individuals aren't per se housed in solitary confinement, based on the nature of how prisons are responding to the pandemic and locking everything down for months on end, the effects physically on their bodies and on their mental health are probably very reminiscent or similar to as if they were you know actually living in a solitary confinement cell. So that's kind of one area I see and I think this will be especially important looking at the effects on older adults because they already, as we talked, about have higher than average burdens of disease and so if they have reduced access to health care and they have increases in sedentary style living conditions--so they're sitting around a lot and they can't move, they can't get exercise--and reductions in social support, that's all very concerning for what that means particularly for older adults who need that higher level of care. So those are kind of a couple areas I see. I think just documenting how prisons and jails have responded to the pandemic over time. My study looks at June, but we need more studies to look at longer periods of time or like maybe how correctional facilities have learned from what has gone on, and they've shifted gears and tried other things. And I think I want to point out to jails. So a lot of the focus thus far is on prisons. So making sure we're we're looking at jails to widen that net.

**Jenn Tostlebe** 1:05:17

Alright, well that is all we have for you. Do you have anything else you'd like to add either on secondary violence or COVID-19?

**Meghan Novisky** 1:05:25

I don't think so. I just encourage people to read the papers if they're interested. And they can reach out to me with questions or if you know, anyone needs a copy of the paper, I'm happy to share it.

**Jenn Tostlebe** 1:05:33

Yes. And we are linking those on our website, too. So for anyone who's interested in them, as well as some of the op eds that Professor Novisky has written. Well, thank you so much, Meghan, it was great talking with you. And we really appreciate you coming on the podcast. Is there anything that you would like to plug, anything that's coming out soon, or anything you're working on? That you'd like to share?

**Meghan Novisky** 1:06:00

Stay tuned. I have a couple of pieces under review right now. So I don't want to comment on them yet, but I should hopefully have some new stuff to share soon. And then I'm looking forward to sharing results more formally of our family study in particular.

**Jose Sanchez** 1:06:15

Yeah, we're definitely looking forward to that.

**Meghan Novisky** 1:06:18

Thank you. And thank you so much for having me.

**Jenn Tostlebe** 1:06:20

And then our last question is where can people find you or reach out to you? Twitter email..

**Meghan Novisky** 1:06:27

so they can find me on Twitter. It's just @DrNovisky, or they can email me at m dot novisky at csuohio.edu.

**Jenn Tostlebe** 1:06:41

Perfect. Alright, thank you so much.

**Meghan Novisky** 1:06:44

Thank you for having me.

**Jenn Tostlebe** 1:06:46

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