

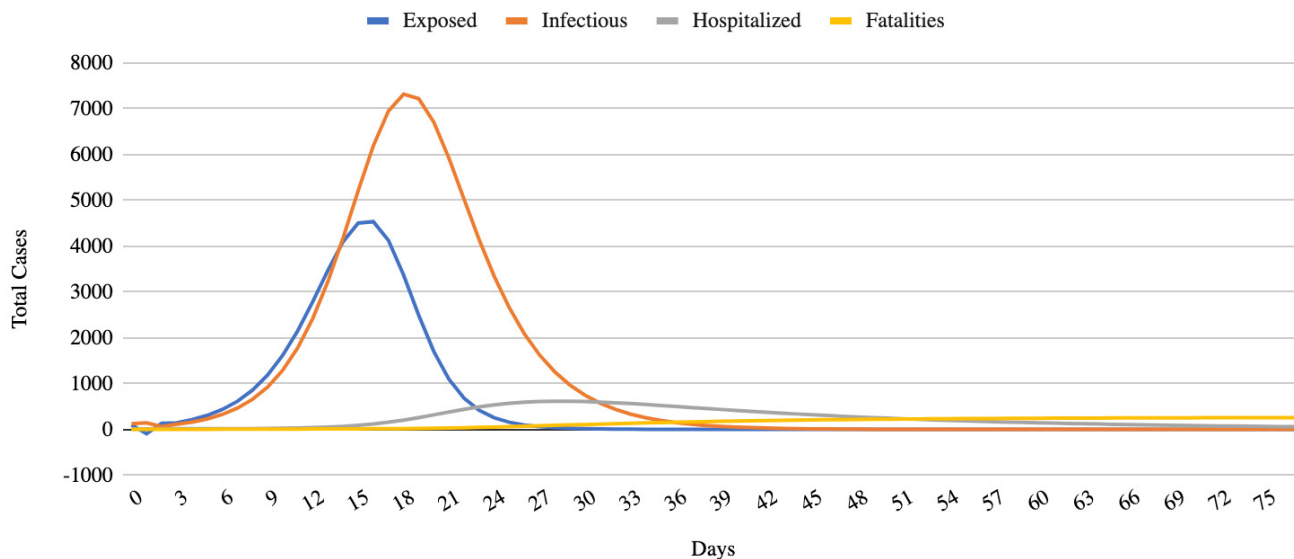
Data Shows COVID-19 in Mississippi Prisons is a Public Health Crisis

Mississippi has the second highest imprisonment rate in the country, with nearly 20,000 people incarcerated in the state's prison system and thousands of staff and vendors who work in these facilities daily. In the current coronavirus pandemic, incarcerated people and those who work at correctional facilities are particularly vulnerable given the crowded and unsanitary conditions that exist in jails and prisons.

The Mississippi Department of Corrections (MDOC) reports four confirmed cases of COVID-19 and one death among the men and women in the Department's custody, along with [four positive cases among Department staff](#). However, [only 20 incarcerated people have been tested to date](#) (recent testing numbers for staff are not available), so it is likely that the actual number of cases among incarcerated individuals and facility staff is much higher.

To project the potential impact that COVID-19 could have on Mississippi's state prison population and hospital usage, FWD.us used the COVID-19 Model for Incarceration created by Recidiviz, and customized it with Mississippi-specific data (please see "Methodology" for more details).

Recidiviz COVID-19 Model for Incarceration Projection



This model estimates that without population reductions and more protective measures put in place within prisons, COVID-19 will peak in Mississippi's prisons in about a month. In three weeks, more than 18,000 incarcerated people - or nearly every person in MDOC custody - will have the virus. At the hospitalization peak in one month, at least 600 incarcerated people will be hospitalized, utilizing 5.6% of Mississippi's total hospital bed capacity. Over its course, the virus is projected to kill 186 individuals incarcerated in Mississippi prisons, more than the total number of COVID-19-related deaths currently recorded in Mississippi. The model estimates similar trends for MDOC staff, predicting that nearly all staff will become infected, with dozens of hospitalizations and lives lost.

These are grim numbers. But according to the model, it is not too late to save lives. If Governor Reeves released 5,000 individuals in the next week, or about one-quarter of the state prison population, the number of projected deaths and hospitalizations would be reduced by 24% and 30% respectively, saving thousands from severe illness and ultimately saving lives.

A release of this magnitude is easily achievable by identifying those individuals who are most vulnerable to the virus, and whose punishments most dramatically exceed the nature of the offense. There are [more than 1,000 people in prison aged 60 years or older, and more than 500 people in Mississippi prisons have been deemed medically high risk](#). Beyond just these most vulnerable populations, there are thousands more people serving extreme sentences for minor offenses, like people who are incarcerated for violating the rules of probation or parole and people serving life and virtual life sentences for nonviolent offenses. All of these individuals can and should be released.

In taking action to reduce the number of people in prison, Governor Reeves would be following the lead of conservative leaders from [Georgia, Alabama, Arkansas](#), and the [federal government](#) who have taken steps to reduce incarceration during this pandemic. This model makes clear that actions like these have the potential to save lives and preserve precious healthcare resources in Mississippi.

Methodology

In order to estimate the projected impact of COVID-19 on incarcerated populations, the Recidiviz [COVID-19 Model for Incarceration](#) uses incarceration-specific measures of how COVID-19 would spread within a prison or jail, along with state data on incarcerated populations and community resources to generate a likely estimate of total future COVID-19 cases in the incarcerated population, and related hospitalization use and deaths. This model is similar to models being used to estimate total hospitalizations and deaths across the state and country, but recognizes that social distancing is not possible within prisons and jails, and that many individuals in prisons and jails are at particular risk from this disease.

FWD.us used the April 16, 2020 release of the model and entered inputs for Mississippi based on current publicly available data, including the current number of confirmed cases in the state, as well as the age breakdown of the state prison population, housing density, and percentage of capacity used in state prison facilities. FWD.us also included [updated data on hospital capacity](#) in the state.

FWD.us also updated the hospitalization rate used in the model. While Recidiviz included the mid-range estimate of hospitalizations per confirmed case in the United States, given current limitations in testing capacity, we felt the denominator (the total number of cases) might be underestimated and the total rate therefore overestimated. Instead, we used an estimated hospitalization rate of 5%, based on an Imperial College of London paper that included an [age-adjusted estimate of hospitalizations per total \(including unobserved\) hospitalizations](#). This should be seen as a lower bound for hospital bed use by people in the state prison population.