Rising to the Challenges of Correctional Health Care

Elizabeth F. Gondles, Ph.D.
Health Care Advisor to the President
American Correctional Association

"To know even one life has breathed easier because you have lived. This is to have succeeded."
— Ralph Waldo Emerson

In today’s correctional health care field, there are no easy answers and no quick fixes. No matter what your position in corrections — nurse, doctor, warden, director, sheriff, administrator or line staff — all of us have a responsibility to make certain that those we serve have access to adequate care. With the impact of the Patient Protection and Affordable Care Act (PPACA), staff retention rates, rising costs of delivering care and constant federal mandates, we are facing numerous challenges.

The U.S. spends two and a half times more on health care than most developed countries. As all Americans are living longer than any time in our history, the costs of health care will continue to escalate. No single solution exists that will transform our health care delivery system into one that is more affordable. We will need to depart from traditional approaches of standard practices and try new ideas and new approaches. PPACA will present even more challenges toward how we incorporate these new approaches and ideas.

Organizational leadership is vital to the health and survival of our correctional systems. Every employee in corrections has a stake in finding solutions to our challenges. We must embrace change, we must accept change, and we must lead in that change or we will end up as followers to that change. Too often in our history we have served as followers and not as leaders of change.

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The history of correctional health care in our nation illustrates many failures. Julie Andrews once said, “Perseverance is failing 19 times and succeeding the 20th.” In U.S. corrections, we are prevailing on many fronts today. Our standards have moved corrections into the 21st century with the advent of good correctional practices. Some of the most dedicated and excellent health care professionals in the world work in our nation’s prisons, juvenile facilities, and jails and in community corrections. Every day, they ensure that some of the unhealthiest people in our country are cared for and that their needs are met.

In every life, in every generation, Americans have faced steep hills to climb. History has taught us that our corrections forefathers did not perceive challenges as problems that were too large to overcome. This was clearly demonstrated in 1870 with the founding of the American Correctional Association and our guiding principles, which live on today in newer language, but remain the bedrock of ACA. Those principles address the humane treatment of inmates and outline the mission of corrections. Our principles are what give us our purpose, just as the U.S. Constitution gives our nation its guidelines.
As Beverly Sills said, “There are no shortcuts to any place worth going.”4 This is true for people working in correctional health care, and indeed, in all of U.S. corrections. All of us continue to use the tools we have always used: commitment, honesty, kindness, love, persistence and desire to succeed. Our profession, including our health care professionals, have put these tools to work every day and have worked wonders against the odds in providing care to offenders.

Had we not risen above the problems we have faced, health care would not have achieved the successes that we deliver each and every day. We will continue to rise to each new challenge, and we will add value to the ever-growing possibilities that await the talent, skills and wisdom of the most dedicated health care professionals in the world — correctional health care professionals.

ENDNOTES


