**HEALTH INDICATOR 4: INCARCERATION RATE**

**DESIRED RESULT:** DECREASE THE INCARCERATION RATE

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**CURRENT**

![ Chart showing current incarceration rate of 341 per 100,000 people.]

**TARGET**

![ Chart showing target incarceration rate of 150 per 100,000 people.]

**DEFINITION**

Incarceration in North Carolina prisons per 100,000 population

**DETAILS**

Rate based on jurisdictional population with sentences greater than one year

**NC INCARCERATION RATE (2017)**

341 per 100,000 people

**2030 TARGET**

150 per 100,000 people

**RANGE AMONG NC COUNTIES**

Not Applicable

**RANK AMONG STATES**

21st*

**DATA SOURCE**

US Bureau of Justice Statistics

**STATE PLANS WITH SIMILAR INDICATORS**

Not Applicable

*Rank of 1st for state with lowest incarceration rate

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**Rationale for Selection:**

People of color, notably African American men, are imprisoned at disproportionate rates and tend to face harsher punishment for similar crimes as their white counterparts. There are enormous health, social, and economic consequences of incarceration for both the imprisoned person, their families, and our communities.

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**Context**

Incarceration is a key health indicator for its sweeping effects on communities, families, and individuals. Communities with high rates of incarceration are affected by damage to social networks and family ties, increased poverty and crime, and reduced life expectancy.\(^{41}\) High rates of incarceration weaken communities and contribute to adverse health outcomes.\(^{41}\) For much of the 20th century, the incarceration rate in the United States (and internationally) averaged 110 inmates per 100,000 persons. A shift in U.S. crime policy at the local, state, and federal levels toward mandatory lengthy jail and prison sentences in the 1980s led to the prison boom (450 inmates per 100,000 persons) or mass incarceration.

Families with an incarcerated adult member face economic hardships including housing insecurity, difficulty meeting basic needs, and increased use of public assistance.\(^{35}\) Incarceration of a parent is a traumatic experience for a child, increasing their risk of depression and anxiety, antisocial behavior, substance abuse, involvement with crime, disengagement from school, and risky sexual behaviors.\(^{35}\) (See Adverse Childhood Experiences, Pages 46-47)

Inmates are likely to develop chronic conditions such as hypertension, diabetes, arthritis, and asthma and are more at risk of contracting communicable diseases such as HIV, hepatitis C, and tuberculosis. Incarcerated individuals experience poor diets (high calorie, high fat, low nutrient density foods), low sanitation standards, presence of infestations, inmate violence, excessive use of force by officers, sexual violence, and lack of social connection.\(^{42}\) Inmates are also at higher risk of dying from a drug overdose or suicide. These risk factors are exacerbated by conditions upon reentry into society such as limited resources, less educational attainment, disadvantages in employment, absence of drug rehabilitation resources, and unstable housing. Without proper rehabilitation, released into a less structured environment, and significantly disadvantaged due to their criminal records, the formerly incarcerated often fall into poverty and reoffend.

**Disparities**

Application of law enforcement and sentencing has led to disproportionate incarceration rates, with African Americans making up 52% of the total incarcerated population, but only 22% of the state population.\(^{44,45}\) For example, although drug use is lower among African Americans and rates of trafficking are not different based on race/ethnicity, African Americans are 6.5 times more likely to be incarcerated for drug-related offenses.\(^{36}\) Numerous studies have shown systematic differences exist in outcomes for people of color from arrest, case processing, sentencing, and parole, all of which increase their likelihood of serving time in jail or prison.\(^{36}\)
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**FIGURE 10**

Incarceration rates across populations in North Carolina and distance to 2030 target

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**FIGURE 11**

NC POPULATION ESTIMATE BY RACE/ETHNICITY (2017)

<table>
<thead>
<tr>
<th>RACE / ETHNICITY</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>W</td>
<td>64.1%</td>
</tr>
<tr>
<td>B/AA</td>
<td>22.1%</td>
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<tr>
<td>OTHER</td>
<td>13.8%</td>
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</tbody>
</table>

NC PRISON POPULATION (2017)

<table>
<thead>
<tr>
<th>RACE / ETHNICITY</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>W</td>
<td>39.8%</td>
</tr>
<tr>
<td>B/AA</td>
<td>52.3%</td>
</tr>
<tr>
<td>OTHER</td>
<td>7.9%</td>
</tr>
</tbody>
</table>

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Incarceration rates across North Carolina's counties also show disparities in the state. Figures from 2015 show the highest incarceration rate for African Americans was in Graham County with 2,864 per 100,000 African American residents (compared to 279 per 100,000 for whites) and for American Indians at 3,426 per 100,000 American Indian residents in Gates County (compared to 174 per 100,000 for whites). In North Carolina, 17% of inmates have mental illnesses (3-4 times more than the general public).

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**2030 Target and Potential for Change**

North Carolina currently has the 21st lowest incarceration rate of the 50 states and the rate has been declining over the past decade. With this trend and considering the lowest state rate (Massachusetts – 120 per 100,000), the HNC 2030 group selected an aggressive target of 150 people incarcerated per 100,000 population. Meeting this target will be very challenging and is almost entirely dependent upon sharply reducing the disparities we see in the disproportionate incarceration of African American and American Indian populations. While rates have been trending down, faster decreases in these trends in the next decade will be viewed as a success.

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**Levers for Change**

(National Research Council, 2014)

- Revise current criminal justice policies to reduce the rates of incarceration
- Improve conditions and programs in jails and prisons to reduce harmful impact and foster successful reintegration into community
- Improve educational outcomes, particularly for boys of color
- Reduce intergenerational and neighborhood poverty
- Improve access to treatment for substance use disorders, physical illnesses, and mental illnesses
- Increase employment opportunities and job training programs in disadvantaged communities
- Implement standardized, evidence-based programs to reduce recidivism