

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 406
(A-24)

Introduced by: Medical Student Section, American Association of Public Health Physicians

Subject: Opposition to Pay-to-Stay Incarceration Fees

Referred to: Reference Committee D

1 Whereas, "pay-to-stay" fees require individuals to pay for their own imprisonment to cover
2 housing and food costs and are used in 49 states, including \$249 daily in Connecticut, \$80 daily
3 in Maine and Kentucky, \$66 daily in Ohio, and \$20 daily in Alabama¹⁻⁵; and
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5 Whereas, average hourly wages during incarceration are \$0.13 to \$1.30 per hour, and in the
6 first year after release, 49% earn \$500 or less and 80% earn less than \$15,000⁶⁻⁷; and
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8 Whereas, because only 10-15% are ever collected, pay-to-stay fees do not significantly
9 contribute to prison budgets, but permanently damage the credit records of individuals leaving
10 incarceration if not paid within 180 days after release and harm future prospects for stable
11 employment and housing^{5,8,9}; and
12

13 Whereas, pay-to-stay fees keep formerly incarcerated individuals trapped in a cycle of poverty
14 and imprisonment, as debts hinder re-entry, contribute to recidivism, and force individuals to
15 forgo basic necessities in order to make payments¹⁰⁻¹²; therefore be it
16

17 RESOLVED, that our American Medical Association oppose fees charged to incarcerated
18 individuals for room and board and advocate for federal and state efforts to repeal statutes and
19 ordinances which permit inmates to be charged for room and board. (Directive to Take Action)

Fiscal Note: Modest - between \$1,000 - \$5,000

Received: 4/10/2024

REFERENCES

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3. Teresa Beatty and Michael Llorens v Ned Lamont and William Tong. 3:22-cv-00380 (2022).
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8. Lehr, S. The Vast Majority of States Allow People to be Charged for Time Behind Bars. National Public Radio. March 4, 2022.
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12. Harper A, Ginapp C, Bardelli T, Grimshaw A, Justen M, Mohamedali A, Thomas I, Puglisi L. Debt, Incarceration, and Re-entry: a Scoping Review. *American Journal of Criminal Justice*. 2021; 46(2):250-278.

RELEVANT AMA Policy

D-430.992 Reducing the Burden of Incarceration on Public Health

1. Our AMA will support efforts to reduce the negative health impacts of incarceration, such as: (1) implementation and incentivization of adequate funding and resources towards indigent defense systems; (2) implementation of practices that promote access to stable employment and laws that ensure employment non-discrimination for workers with previous non-felony criminal records; and (3) housing support for formerly incarcerated people, including programs that facilitate access to immediate housing after release from carceral settings.
2. Our AMA will partner with public health organizations and other interested stakeholders to urge Congress, the Department of Justice, the Department of Health and Human Services, and state officials and agencies to minimize the negative health effects of incarceration by supporting programs that facilitate employment at a living wage, and safe, affordable housing opportunities for formerly incarcerated individuals, as well as research into alternatives to incarceration. [Res. 902, I-22]