

Effects of incarceration spill over into health care system, study finds

September 11 2015, by Michele Berger

Consequences of incarceration on former inmates and their families are well known. But how does imprisonment affect the health care system as a whole?

A new study, led by Jason Schnittker of the University of Pennsylvania and published in the September issue of the *Milbank Quarterly*, finds that states with the highest [incarceration](#) rates experience significant declines in overall access to and quality of care.

Through this research, Schnittker, a professor in the Department of Sociology in Penn's School of Arts & Sciences, along with colleagues from the University of Minnesota and the University of Georgia, address the ties between the prison system and other social systems—and bring to light the broader social costs of incarceration. It's what's often called a spillover effect.

Spillover occurs when the behavior of one group in the community changes the situation of others. In the case of incarceration, the issue stems from relatively poor health among former inmates, higher levels of uninsurance and a greater risk of uncompensated care.

"Even a relatively small number of former inmates can affect the economics of health care," the researchers wrote. They wanted to see how just how far-reaching this was.

"There's an emerging consensus that we incarcerate too many people and

that incarceration has a huge negative impact on the lives of former inmates," Schnittker said. "There were reasons to expect that incarceration could, through a series of steps, affect health care systems. Our job was to show how that could happen."

To reach these conclusions, Schnittker and colleagues evaluated health care behavior at the individual level as a function of state-level incarceration rates, as well as a variety of control variables. They learned that in U.S. states that incarcerate a greater number of people, the populations in those states experience less overall access to care and reduced access to specialists, plus they feel less trust toward physicians and less satisfaction with their care.

Though former inmates and their families suffer the most, their situation also "affects the care of those removed from them," the researchers noted, including the uninsured, those older than 50, non-Hispanic whites, women and those with incomes that far exceed the federal poverty level. Despite the widespread potential impact, these [consequences](#) often remain "hidden from mainstream society ... but they are nonetheless quite powerful."

The solution?

"Addressing the health care needs of former [inmates](#)," Schnittker said, adding that this could be an "important step toward preventing further damage to the [health care](#) system."

More information: "The Institutional Effects of Incarceration: Spillovers From Criminal Justice to Health Care." *Milbank Quarterly*, 93: 516–560. doi: 10.1111/1468-0009.12136

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