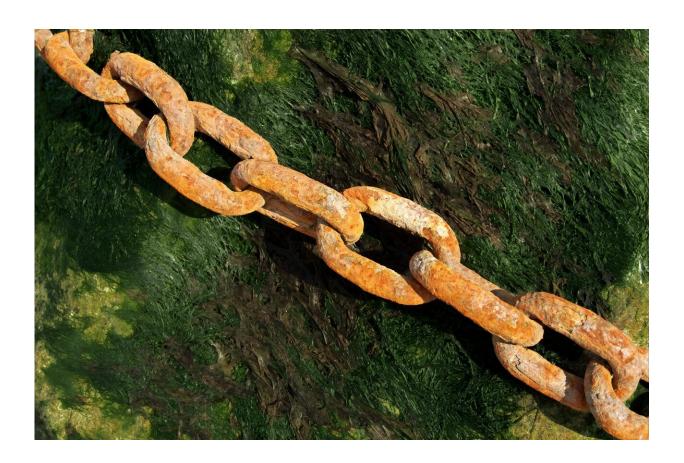


Incarceration of a family member during childhood associated with diabetes in men

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Men who experienced a family member's incarceration are 64% more likely to have diabetes in later adulthood, compared to those who were not exposed to this childhood adversity, report researchers from the



University of Toronto and University of Alabama in a recent study in *SAGE-Open Medicine*.

The study—by Bradley White, an associate professor with the University of Alabama's Department of Psychology, and Esme Fuller-Thomson, a professor at the University of Toronto's Factor-Inwentash Faculty of Social Work (FIFSW)—mirrors previous research by the authors, published in 2016, which found that the <u>incarceration</u> of a family member during <u>childhood</u> was also associated with a much higher risk of heart attacks in men, but not women.

Their recent study looked at a large representative sample of adults over the age of 40 across five US States. Of the men who were exposed to this <u>childhood trauma</u>, 7.9% had diabetes. Of the men who had not experienced the incarceration of a family member as a child, only 4.8% had the disease. The difference was much less for women (5.4% vs. 4.5%).

"Previous studies have found that the incarceration of a parent plays havoc with the stability of housing, employment, and parental marital relationships. It has also been associated with psychosocial maladjustment and mental disorders in children, and often leads to considerable social and familial stigma," says White. "Less attention has been paid to the long-term physical health outcomes of the children as they grow up."

Family member incarceration during childhood is an under-investigated yet increasingly common childhood experience in the United States. One in every 17 respondents aged 40-64 had experienced a family member incarcerated, compared to one in every 63 respondents aged 80 and older. The vast majority of U.S. prison inmates are men, most of whom are fathers to children under 18.



While White and Fuller-Thomson's study was not designed to draw conclusions about the different results found between men and women, the researchers have developed several hypotheses that they would like to explore in the future.

"Prior evidence suggests men may be more vulnerable biologically to early adversities than women and experience stress-related testosterone suppression, which is linked to insulin resistance," says White. "In addition, incarceration also frequently interferes with fathers' contact with children, which may particularly impact their sons' abilities to cope with stress. Boys and men are also less likely than girls and women to seek psychosocial support in response to adverse events."

Since other adverse childhood traumas that have also been found to contribute to the development of health problems in later life are also more prevalent in households where a family member is incarcerated, six other forms of childhood traumas were adjusted for in the analysis in addition to known risk factors for diabetes, such as obesity and smoking. The six forms of trauma include sexual, physical, and verbal abuse, and parental addictions, parental mental illness and parental domestic violence.

"The results of our two studies suggests that the dramatic increase in incarceration rates may have detrimental long-term health effects for boys with a family member in prison, and these effects may persist into later life," says Fuller-Thomson, who is also director of the University of Toronto's Institute for Life Course and Aging and cross-appointed to the Department of Family & Community Medicine and the Faculty of Nursing.

"Our results support the consideration of alternatives to current incarceration policies and practice," said co-author Keri J. West, a doctoral candidate in the FIFSW at U of T.



"These alternatives include investment in diversion strategies to redirect individuals to community-based rehabilitative programs, facilitating family contact by placing incarcerated individuals in facilities close to their communities, and eliminating visitation policies that create excessive burden for family members, such as restrictive visitation hours and prohibitive fees for phone calls."

More information: *SAGE-Open Medicine*, <u>DOI:</u> 10.1177/2050312120905165

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