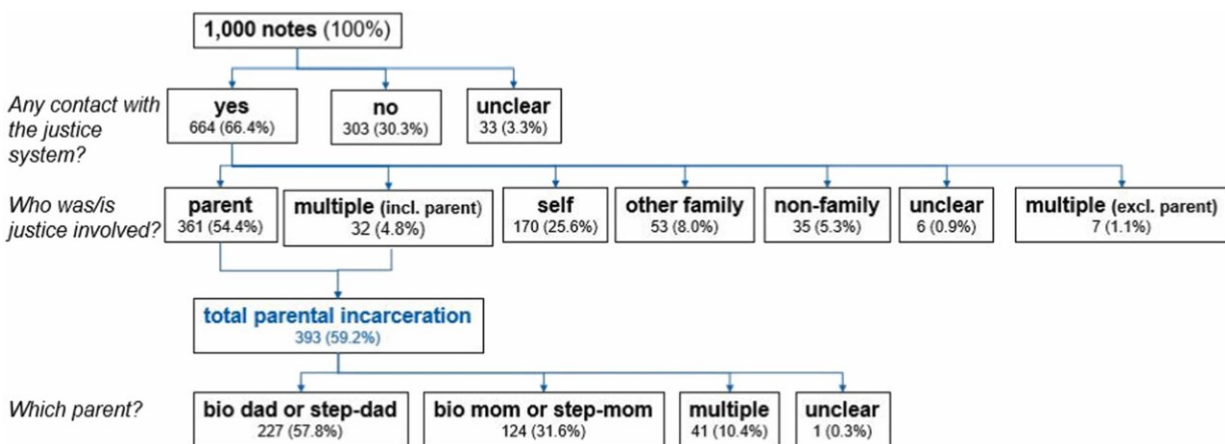


Study examines impact of incarceration on youth health

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Results of manually annotating 1000 random clinical notes with justice keywords for type of justice-system involvement. Credit: *Academic Pediatrics* (2024). DOI: 10.1016/j.acap.2024.05.010

Researcher Samantha Boch has studied the impact of incarceration on child and family health for more than a decade. Her latest research examines the health records and health use of youth with probable personal or familial justice involvement.

The challenge was identifying [youth](#) who have been impacted by [mass incarceration](#), as most health care systems don't routinely ask about incarceration. Families may not disclose that information due to stigma, fear of child protective services involvement, or judgment.

"There are few, if any, large community-level studies about the health of youth affected by incarceration, or their family's incarceration, using medical records, explains Boch, an associate professor at the University of Cincinnati College of Nursing.

"Despite high youth family or personal exposure to the criminal legal system, gaps remain in understanding its prevalence and consequences. There are numerous reasons for this, some include a lack of provider awareness, lack of curriculum in provider training, lack of funding for this research and lack of routine sensitive screening for exposure."

Boch and her research team searched the [electronic medical records](#) for justice-related keywords such as "prison," "jail," "sentenced," "probation," "parole," and others, to determine the impact of incarceration. The researchers used data from Cincinnati Children's Hospital collected over an 11-year period.

Their study, [published](#) in *Academic Pediatrics*, found that of the more than 1.7 million records reviewed, 38,263 (or 2.2%) of youth seen between January 2009 and December 2020 likely had a parent incarcerated or faced some type of confinement as a juvenile.

But this small percentage was also responsible for a disproportionate number of physical and mental health diagnoses and health care visits at Cincinnati Children's. They were compared against a socio demographically matched sample and the total sample population of children.

Nearly 63.3% of all behavioral health inpatient admissions, 23.7% of all hospitalization inpatient days and 45.5% of all foster care visits were attributed to the 2.2% of youth who had documented probable personal or family justice system involvement. The findings complement [another study](#) led by Boch, published in 2021 using data from Nationwide

Children's Hospital in Columbus, Ohio.

Youth with a justice keyword in their record had 1.5 to 16.2 times the prevalence of various physical and mental health disorder groupings studied compared to matched youth. They also had 428.2 more physical health diagnoses and 269.2 more mental health diagnoses per 100 youth than the matched youth (who came from similar backgrounds).

According to the study, youth with a justice keyword made up a large proportion of all youth ever diagnosed with health disorders or conditions at Cincinnati Children's from 2009 to 2020. This includes 42.9% of all schizophrenia spectrum and other [psychotic disorders](#), 42.1% of all bipolar and related disorders, 38.3% of all suicide and self-injury disorders, 24.5% of all trauma and stress related disorders, 44.9% of all shaken baby syndrome cases, 13.9% of all infectious diseases, 12.5% of speech language disorders and 12.8% of all youth pregnancies.

Nationally, about 7% of U.S. youth have had a parent incarcerated. Findings at Cincinnati Children's and Nationwide Children's Hospital in Columbus grossly underestimate the number of youth affected by incarceration or confinement, says Boch.

"Our data reflects families who disclosed and health providers who documented," says Boch. "Families who refrain from disclosing or whose information is not documented were not represented—a key limitation." This study is an attempt to uncover the size of the impact of mass incarceration on youth health in Cincinnati. Our health care systems and correctional systems clearly overlap and impact the lives of children.

"Replication of these findings in other communities would strengthen the growing justification for decarceration efforts and other reforms, especially if we want all U.S. children and families to thrive," says Boch.

"We will continue to have health care disparities and lead the world with poor health outcomes if we continue to lead in [incarceration](#)."

More information: Samantha Boch et al, Pediatric Health and System Impacts of Mass Incarceration, 2009–2020: A Matched Cohort Study, *Academic Pediatrics* (2024). [DOI: 10.1016/j.acap.2024.05.010](https://doi.org/10.1016/j.acap.2024.05.010)

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