

# Health Care for Youth Involved with the Correctional System



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## KEYWORDS

• Adolescents • Juvenile detention facilities • Correctional system

## KEY POINTS

- Youth involved with the correctional system are disproportionately impacted by negative health outcomes, related to both physical and mental health.
- Detention settings allow time for providers to ensure that health issues for adolescents are addressed, but many challenges exist to providing care in these facilities.
- Community-based providers should be aware of adolescent patients who have a history of being detained and ensure that all necessary aspects of their health and well-being are followed closely after the youth is released home.

## INTRODUCTION

Youth who are currently or who have been incarcerated represent a significant number of adolescents, a group that is often medically underserved and that has substantial physical and mental health needs.<sup>1-3</sup> In 2011, more than 60,000 youth in the United States spent time in correctional facilities.<sup>4</sup> Both the absolute numbers of youth who are detained and the rate of detention has steadily decreased over the past several years as a result of declining arrest rates and changing state and local legal policies regarding the management of youth who commit delinquent acts.<sup>3,5,6</sup> However, those who are detained often have the greatest need for physical and mental health care.

## DEMOGRAPHICS

The demographics of youth in detention are important to consider because of health disparities that are related to gender, race, and ethnicity. Detained women account for

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nearly 14% of all incarcerated youth, and tend to have more physical and mental health needs.<sup>3,4,6</sup> Youth of racial or ethnic minorities are overrepresented in correctional facilities: black youth represent 40% of detainees and Hispanic/Latino youth represent 23%. In comparison, white youth constitute 32% of detainees.<sup>4</sup> Another significant demographic consideration is that lower socioeconomic status is correlated with juvenile delinquency and is especially prevalent among the black and Hispanic youth who are detained.<sup>3,6</sup> These characteristics of incarcerated youth help define the health needs of these adolescents, because many of the social determinants of poor health are also associated with delinquency.<sup>3</sup>

## JUVENILE JUSTICE PROCESS

Youth generally enter the juvenile justice system through law enforcement (ie, after an arrest). Other referrals to the juvenile courts may be made by parents, schools, victims, or probation officers. Fortunately, the rates of arrest and confinement for all crimes—violent crimes, person offenses, property offenses, drug offenses, public order offenses, technical violations, and status offenses (acts that are illegal based on the age of the offender, but not for adults)—have been steadily decreasing over the past decade.<sup>5,7</sup>

Youths arrested for an alleged infraction may be diverted to management outside of the court system (eg, to a community-based treatment program). According to the U.S. Department of Justice, in 2009 this accounted for 22% of police cases.<sup>8</sup> For other arrests, the police will determine if the youth can be safely released home with a date to return to court, or the police or judge may order the youth to stay in a secure detention facility until their court hearing (either because of the seriousness of the crime or because a stable place for release cannot be identified). After the court hearing, a youth who is found to be guilty (often referred to in juvenile courts as “the petition is sustained”) may be released on house arrest or will be ordered to serve time in a residential treatment or rehabilitation facility. These residential facilities may be referred to as *placement homes*, *group homes*, *camps*, *ranches*, *halls*, or other names, depending on the jurisdiction. Residential placement accounted for 27% of adjudications in 2009.<sup>8</sup> After residential placement, youth will be released home and will remain on probation for a court-determined length of time, during which the youth remains under supervision of the court or the juvenile corrections department.

## HEALTH CARE SERVICES IN DETENTION FACILITIES

Although the spectrum of services on-site varies widely between correctional facilities,<sup>9</sup> federal law requires that detention halls and residential treatment facilities offer health care services to all detained youth. Additionally, individual state case laws may mandate more specific provisions regarding the extent to which correctional health care services must be available. These laws dictate areas of care, including initial screening and evaluation, access to urgent care during detention, preventive care services, staff training, nutritional services, and several other areas.<sup>10</sup>

In addition to these laws, correctional facilities may voluntarily seek accreditation by the National Commission on Correctional Health Care (NCCHC), which sets standards for providing appropriate health care in all corrections facilities and has specific standards for juvenile facilities.<sup>10</sup> For example, NCCHC standards mandate a process for emergency care and a system of sick call in which youths’ requests for care are assessed daily by a nurse and appropriate action is taken based on the urgency of the situation. They also require physical health, oral health, and mental health

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