

Effects of Incarceration: Spillovers from Criminal Justice to Health Care

New York, New York, September 9, 2015—The consequences of incarceration on former inmates and their families are well known. But how does incarceration affect the health care system as a whole? A new [study](#) in the September issue of *The Milbank Quarterly* finds that along with the steady increase in incarceration in the United States comes a negative effect on the quality and functioning of the health care system.

The study, by Jason Schnittker of the University of Pennsylvania and colleagues, addresses the ties between the prison system and other social systems—and brings to light the broader social costs of incarceration. In particular, the researchers found that those states that incarcerate the largest number of people have experienced significant declines in overall access to and quality of care.

Background

A spillover effect occurs when the behavior of some members of a community affect the situation of others. Some of the spillover effects of incarceration rest with the particular health care needs of former inmates, on how they consume care, and on who does or does not pay for the services they receive. The researchers write that “consideration of the health care system is essential to evaluating the total social costs of incarceration... The spillover effects on health care... [documented] in this article are hidden from mainstream society.” While former inmates and their families suffer the most, their situation “also affects the care of those removed from them.”

Findings

Using a multi-level approach that included both evaluation of individual-level data on health care behavior and state-level data on incarceration rates, the researchers “established an intersection between systems of care and corrections, linked by inadequate financial and administrative mechanisms for delivering services to former inmates.” They found that in US states that incarcerate a larger number of people, the overall population experiences:

- Diminished access to care
- Less trust in physicians
- Less satisfaction in care received
- Reduced access to specialists

These spillover effects likely reflect the consequences of uncompensated care. And they affect even those least likely to be personally affected by incarceration, including the uninsured, those over age 50, non-Hispanic whites, women, and those with incomes far exceeding the federal poverty level. “Addressing the health care needs of former inmates could be an important step toward preventing further damage to the health care system,” says Schnittker. Study authors include Christopher Uggen and Suze Maves McElrath from the University of Minnesota and Sarah K.S. Shannon from the University of Georgia.

About *The Milbank Quarterly*

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