

# Barriers to reintegration lead to poorer health for the formerly incarcerated

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Formerly incarcerated individuals with barriers to re-entry and service needs following their release are subsequently more likely to experience poor physical and mental health, according to an eye-opening new Rutgers University-Camden study.

Daniel Semenza and Nathan Link, assistant professors of criminal justice at Rutgers-Camden, analyzed data on recently [incarcerated](#) men from the Serious and Violent Offender Re-entry Initiative (SVORI) to examine how multiple barriers to reintegration related to employment, housing, childcare, and service needs accumulate to influence physical and [mental health](#) three, nine, and 15 months after release.

"It's a [prison](#) re-entry study that examines outcomes other than recidivism," says Link. "In general, re-entry work has been far too narrowly focused on recidivism."

The study, published in the journal *Social Science & Medicine*, shows that greater reintegration barriers decrease self-rated health for formerly incarcerated individuals at all three intervals, and increases their symptoms of depression at three and nine months after release.

Semenza and Link explain that those released from prison face a wide variety of challenges when coming home and reintegrating back into daily life. These challenges can range from difficulties in finding a job, finding housing, securing affordable childcare, or getting necessary medical services.

They note that individuals struggle to find jobs because employers may not be willing to hire those who have been incarcerated.

"This is especially true when people must indicate prior incarceration on a job application," says Semenza.

They further explain that, if the individual leaving prison does not have a home to return to with their family, he or she might struggle to find a place to rent, especially if they do not have the financial means to put any money down, such as the first and last month's rent plus a security deposit.

The researchers add that people leaving prison often need a range of services, such as childcare, job training, additional education, drug or alcohol treatment, medical treatment, or help accessing public assistance.

"All of these challenges can pile up and make it extremely difficult to start a new life, and our study finds that there may be health consequences to these accumulated barriers as well," says Semenza.

In light of these common challenges, respondents in the study were given a list of 30 needs and asked if they needed that service or item. The researchers then counted the number of barriers that a person says they are experiencing at each time point in the study after release from prison.

"Indicating a need represents a potential [barrier](#) to reintegration and each contributes to the accumulation of challenges that we discuss in the article," says Semenza.

The Rutgers-Camden researchers posit that this accumulation—the whole—is greater than the sum of its parts. Drawing on important literature related to "stress processes and health" to make their case, they

explain that the months after being released from prison are not only crucial for long-term success, but represent times of significant stress that can be further exacerbated by problems in satisfying their variety of needs. They posit that greater acute and prolonged stress can create a kind of "wear and tear" on the body, and those with accumulated barriers to reintegration are likely experiencing higher levels of stress than those with fewer barriers.

"We think of these barriers as placing a heavier and heavier burden on those leaving prison as they accumulate, which can impact both physical and mental health over time," says Semenza.

The Rutgers-Camden study shows that both lower self-rated physical health and increased symptoms of depression can actually lead back to an increase in reintegration barriers, evidence of a "negative feedback loop" where more barriers to reintegration worsen health, and in turn, poorer health increases these barriers.

"For instance, if a person has difficulty getting a job, it could lead to symptoms of depression, which can in turn make it more difficult to apply for jobs or to attend job training meetings," says Semenza.

The Rutgers-Camden researchers suggest that comprehensive reintegration services addressing multiple needs related to all aspects of employment, housing, childcare, and public assistance, among other issues, can improve not only recidivism rates but also population [health](#) outcomes more broadly.

"While programs surely need to focus on the big barriers like housing and employment, other needs shouldn't be ignored," says Link. "We believe that a greater policy and research focus on the months right after coming home can really have an impact on the lives of those who have served their time in prison moving forward."

Pulling back the lens, adds Link, their study goes beyond most research on prisoner re-entry that focuses almost exclusively on recidivism as outcomes by questioning whether a person reoffended or not and what was associated with these outcomes. He posits that these are important questions, but in order for the American justice system to be reformed, re-entry needs to be thought of more broadly and include the re-entry goal of improving life outcomes.

"As researchers, analyzing both mental and [physical health](#)—as important outcomes per se—with the goal of figuring out how to improve them is one such way to do this," says Link.

**More information:** Daniel C. Semenza et al. How does reentry get under the skin? Cumulative reintegration barriers and health in a sample of recently incarcerated men, *Social Science & Medicine* (2019). [DOI: 10.1016/j.socscimed.2019.112618](#)

Provided by Rutgers University

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