

*Executive Board Adoption Date: October 8, 2002*

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# HEALTH CARE IN JUVENILE DETENTION

## **STATEMENT OF THE ISSUE:**

Quality health care services should be an integral part of the continuity of care for youth which is often lacking in juvenile detention facilities. These youth are most often incarcerated as adolescents during a period of rapid physical and psychological growth and development. Despite the perceived “healthy” status of adolescents, early and unprotected sexual activity, violence, substance abuse and unrecognized mental health disorders have led to a significant increase in the morbidity and mortality of high-risk youth. Health care providers in detention facilities must identify and address the needs of each juvenile as well as provide appropriate preventative care during the juvenile’s temporary stay.

## **NATURE OF THE ISSUE:**

- Families lack financial resources to provide for their child’s healthcare needs
- Families may lack understanding of the necessity for regular and consistent healthcare
- An established means for continuity of care after release may not exist
- Youth entering detention have frequently received inadequate medical and dental care prior to admission

## **POSITION STATEMENT:**

NJDA strongly encourages all juvenile detention facilities to provide quality healthcare services for juveniles in custody. These services should identify and address the acute needs of each juvenile as well as provide appropriate preventative care during the juvenile’s temporary stay. Licensed professionals must provide healthcare services. Time permitting, they should include but are not limited to:

1. A medical screening at admission followed by a complete history and physical exam.  
Early and Periodic Screening, Diagnostic and Treatment (EPSDT).
  2. Medical examinations for acute and chronic medical problems.
  3. A dental screening with provisions for cleaning and restorative work.
  4. A mental health screen upon admission with referral to the court for psychiatric care as needed.
  5. HIV testing and counseling as indicated followed by appropriate referral.
  6. Substance Abuse Screening, Assessment, and Testing, followed by appropriate referral for services.
  7. Education about chronic illnesses, (i.e., diabetes, asthma, anemia, etc.).
  8. Education about acute medical issues, (i.e., sexually transmitted diseases, allergic reactions, acne and puberty).
  9. Assist parents in identifying a primary health care provider upon notification that the juvenile will return to the community.
  10. Assist parents in the referral process for the follow-up services to the identified community health care provider.
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