

## **Improving Emergency Department Care for Individuals Impacted by Incarceration**

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### **Background/Introduction:**

Individuals with a history of incarceration are at greater risk for poor mental health and several physiological diseases. In 2016, 43% of state prisoners reported a history of a mental health disorder (Maruschak et al., 2021). In 2019, those with a history of incarceration were 2.18 times more likely to have HIV/AIDS, 3.41 times more likely to have an STI, and 3.31 times more likely to have a liver disease (Udo, 2019). Due to the United States' high incarceration rate, many healthcare professionals will provide care for those who experience incarceration. However, federal law only mandates basic care for this population, without a specific guideline for delivery (Haber et al., 2024). The only guaranteed rights for prisoners receiving medical care are access to care, care that is ordered, and a professional medical judgment (Rold, 2008). Healthcare professionals should receive more guidance to improve health outcomes in the incarcerated population.

### **Goal:**

The goal is to develop an educational pamphlet and accompanying presentation for University of Iowa healthcare professionals outlining best practices for caring for individuals with incarceration history.

### **Product:**

The end-products will include an educational pamphlet and presentation, as well as a list of helpful additional reading materials.

### **Objectives**

- Complete a 5–10-page literature review, summarizing mental and physical health implications of incarceration and best practices for caring for individuals impacted by incarceration.
- Develop an evidence-based pamphlet and PowerPoint presentation, from the information collected in objective 1, outlining mental and physical health implications of incarceration and best practices for caring for individuals impacted by incarceration.
- Present the pamphlet, presentation, and source list to medical staff in the Emergency Department at a monthly meeting.

### **Reflection**

I now feel that I am proficient in engaging with scientific literature and evidence, as well as using health science databases to research a particular topic. This previous weakness has become a strength! Through this project, I have also greatly improved my communication skills. I have always prided myself on communicating well with others, but I have learned how to best engage in professional communication with those involved in academia.

One of the most valuable assets this project has given me is adaptability. When I first began this project, I thought that I would create educational materials for my peers (nursing students), but after much discussion with Dr. Grossmann and other mentors, we decided that I should make educational materials for a staff unit in the hospital. It was difficult at first to pivot, but I now feel more confident in dealing with unexpected challenges and making the best of any situation.