

Timeline of Hospital Criminalization

I. Prehospital:

A. Police investigation and evidence collection at crime scene can delay medical transport for the purpose of collecting evidence against patients who were violently injured

1. Patton D, Sodhi A, Affinati S, Lee J, Crandall M. Post-Discharge Needs of Victims of Gun Violence in Chicago: A Qualitative Study: *J Interpers Violence*. Published online September 27, 2016.

doi:10.1177/0886260516669545

2. Jacoby SF, Richmond TS, Holena DN, Kaufman EJ. A safe haven for the injured? Urban trauma care at the intersection of healthcare, law enforcement, and race. *Soc Sci Med*. 2018;199:115-122.

doi:10.1016/j.socscimed.2017.05.037

II. Issues on Arrival to Hospital:

A. Security checkpoints, metal detectors, and other forms of surveillance can result in stigmatization and delays to care as well as arrest of patients and eventual criminal charges

1. Lara-Millán A. Emergency Room Overcrowding in the Era of Mass Imprisonment. *Am Sociol Rev*. 2014;79(5):866-887.

doi:10.1177/0003122414549552

B. Police involvement in care can lead patients to perceive investigation of crime as more important than their medical care:

1. Jacoby SF, Richmond TS, Holena DN, Kaufman EJ. A safe haven for the injured? Urban trauma care at the intersection of healthcare, law enforcement, and race. *Soc Sci Med*. 2018;199:115-122.

doi:10.1016/j.socscimed.2017.05.037

III. Issues in Waiting Room / Triage:

A. Police patrols in waiting rooms and patient care areas can deter patients from seeking care, including by leading some patients to leave without being seen

1. Lara-Millán A. Emergency Room Overcrowding in the Era of Mass Imprisonment. *Am Sociol Rev*. 2014;79(5):866-887.

doi:10.1177/0003122414549552

IV. Issues in Emergency Department / Trauma Bay:

A. Police presence in patient care areas, questioning of patients, especially victims of violence, and access to patient information or property can lead to:

1. Patients leaving AMA

a) O'Neill KM, Salazar MC, Vega C, Campbell A, Anderson E, Dodington J. "The cops didn't make it any better": Perspectives on police and guns among survivors of gun violence. *Social Science*

& *Medicine*. 2021;284:114197.

doi:10.1016/j.socscimed.2021.114197

2. Patients withholding important medical information from their care team
 - a) Liebschutz J, Schwartz S, Hoyte J, et al. A chasm between injury and care: experiences of black male victims of violence. *J Trauma*. 2010;69(6):1372-1378. doi:10.1097/TA.0b013e3181e74fcf
3. violation of patient privacy laws, erosion of patients' constitutional rights in police investigations, and evidence used by criminal-legal system against patients
 - a) Song JS. Policing the Emergency Room. *Harv Law Rev*. 2021;134

B. Healthcare workers are more than twice as likely to call security on Black patients as white patients:

1. Carmen R. Green, Wayne R. McCullough, Jamie D. Hawley, Visiting Black Patients: Racial Disparities in Security Standby Requests, *Journal of the National Medical Association*, Volume 110, Issue 1, 2018,

C. Black patients more likely to be restrained in the ED:

1. Schnitzer K, Merideth F, Macias-Konstantopoulos W, Hayden D, Shtasel D, Bird S. Disparities in Care: The Role of Race on the Utilization of Physical Restraints in the Emergency Setting. *Acad Emerg Med*. 2020 Oct;27(10):943-950. doi: 10.1111/acem.14092. Epub 2020 Aug 24. PMID: 32691509.

V. Inpatient (and non-trauma ED) Issues:

A. Stigma associated with police involvement risks substandard care in the form of decreased time with patients and decreased use of diagnostic tests:

1. Brooks KC, Makam AN, Haber LA. Caring for Hospitalized Incarcerated Patients: Physician and Nurse Experience. *J Gen Intern Med*. Published online January 6, 2021:1-3. doi:10.1007/s11606-020-06510-w
2. Douglas AD, Zaidi MY, Maatman TK, Choi JN, Meagher AD. Caring for Incarcerated Patients: Can it Ever be Equal? *J Surg Educ*. Published online July 2021:S193172042100163X. doi:10.1016/j.jsurg.2021.06.009

B. Shackling can cause physical harm to patients, risking worse health outcomes:

1. Pressure ulcers
2. Shackling of pregnant, laboring, and postpartum patients
 - a) Opposed by:
 - (1) [American College of Nurse Midwives](#)
 - (2) [American College of Obstetricians and Gynecologists](#)
 - (3) [American Medical Association](#)
 - (4) [Association of Women's Health, Obstetric, and Neonatal Nurses](#)
 - (5) [Bureau of Prisons](#)
 - (6) United States Marshals
 - (7) [National Commission on Correctional Healthcare](#)
 - (8) Many more

- C. Healthcare workers are not aware of patient rights in interactions with law enforcement and not equipped to safeguard those rights:
1. Douglas AD, Zaidi MY, Maatman TK, Choi JN, Meagher AD. Caring for Incarcerated Patients: Can it Ever be Equal? *J Surg Educ*. Published online July 2021:S193172042100163X. doi:10.1016/j.jsurg.2021.06.009
 2. Brooks KC, Makam AN, Haber LA. Caring for Hospitalized Incarcerated Patients: Physician and Nurse Experience. *J Gen Intern Med*. Published online January 6, 2021:1-3. doi:10.1007/s11606-020-06510-w
 3. Moore PQ, Roy C, Aceves J, Palter JS. Interactions with immigration officers in the emergency department: A needs assessment. *Am J Emerg Med*. 2020;38(6):1281-1283. doi:10.1016/j.ajem.2019.12.016

D. Police use of force in hospitals disproportionately targets Black patients:

1. Armstrong D. The Startling Reach and Disparate Impact of Cleveland Clinic's Private Police Force. ProPublica. Accessed May 19, 2021. <https://www.propublica.org/article/what-trump-and-biden-should-debate-about-the-cleveland-clinic-why-the-hospitals-private-police-mostly-arrest-black-people?token=TuMy8gExpvZxdxiWRs7mTz21zSyVml5E>
2. May 4, 2021 Health Commission meeting | San Francisco. Accessed May 20, 2021. <https://sf.gov/meeting/may-4-2021-health-commission-meeting>

VI. Issues Post-Discharge // Long Term:

- A. Structural oppression (such as racism, sexism, xenophobia, transphobia) and other forms of stigma negatively impact health. Those same structures also impact how people are criminalized before, during, and after their visit to the hospital. Fears of being reported to the police and ICE by providers prevents sex workers, survivors of violence, migrant folks, people who use drugs, trans and gender non-conforming people, and people who self-manage abortions or lose a pregnancy from accessing necessary healthcare.
1. Schwartz S, Hoyte J, James T, Conoscenti L, Johnson R, Liebschutz J. Challenges to Engaging Black Male Victims of Community Violence in Healthcare Research: Lessons Learned From Two Studies. *Psychol Trauma*. 2010;2(1):54-62. doi:10.1037/a0019020
 2. Substance abuse reporting and pregnancy: the role of the obstetrician–gynecologist. Committee Opinion No. 473. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2011;117:200–1
 3. Roberts S C M and Nuru-Jeter A. Women's perspectives on screening for alcohol and drug use in prenatal care. *Women's Health Issues*. 2010 May–Jun; 20(3): 193–200.

4. Schempf A H and Strobino D M. Drug use and limited prenatal care: an examination of responsible barriers. *American Journal of Obstetrics and Gynecology*. April 2009, 200(4): 412.e1-412.e10
5. The American College of Obstetricians and Gynecologists, [Opposition to Criminalization of Individuals During Pregnancy and the Postpartum Period: Statement of Policy](#), December 2020.