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Confining Children in Adult Prisons May Kill Them: New **Evidence to Inform Policy Action**

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On a given day in the United States, over 47,000 children under 18 years of age are incarcerated, with 1 in 16 in an adult prison or jail. While "Raise the Age" legislative reforms have been successful in reducing the number of children in adult carceral facilities, every state has a pathway for trying children as adults.² In some states elementary-school aged children can be confined in adult prisons and jails, and many states automatically transfer teenagers from the juvenile system to the adult criminal legal system based on age or offense type.² Two-thirds of children transferred by a judge to the adult system are youth of color, which compounds racial and ethnic inequities in an already unjust, disparate system.³ Confining children in the harsh environment of adult prisons and jails is developmentally misaligned; counterproductive for achieving goals of healing, rehabilitation, and public safety; a violation of human rights; and portends worse lifelong health and social outcomes, including lower education and vocational success and higher rates of recidivism.^{4,5} Yet a key measure of health has been missing from this literature, now solved by Silvers et al. Their ground-breaking study, using national data from the National Longitudinal Survey of Youth and published in this issue of JAMA Network Open, reports that incarceration of US children in adult prisons or jails was associated with a 30% increased risk of mortality during early to mid-adulthood (between ages 18-39), compared to peers.6

Silver et al.'s study is important because it is the first-time long-term mortality risk for children in US adult carceral facilities has been measured using a nationally representative longitudinal dataset. Although their undeniable evidence—that incarceration of children in adult prisons is linked with risk of early death—does not necessarily indicate causality, the striking findings should set off clear public health alarms. Children in adult carceral facilities are at heightened risk of suicide, rape, and other forms of violence, and are known to be placed in solitary confinement for "protection." The Silvers et al. study builds on existing literature demonstrating how treating children as adults in the US's carceral

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system compounds stark health inequities and signals the erasure of childhood for our most marginalized youth.

Juvenile facilities may harm health too. In fact, Silvers et al. also found that arrest before age 18 reduced likelihood of survival during early and mid-adulthood by 18%, compared to peers never arrested. Adult prisons are not meant for children whereas juvenile facilities, which is where most arrested youth are placed if not sent home, are and may be used sparingly to support children in goals of rehabilitation and accountability. As juvenile facilities shutter it is crucial that jurisdictions develop real plans to support youth, rather than funneling them to adult facilities in counties that have closed or limited their juvenile halls. While the juvenile detention system is far from perfect, it is much more suitable than adult confinement for children who need rehabilitation to heal and re-emerge to a safe society.

The needed reforms will require synergistic effort⁷ but the legislative prescription is clear: end the prosecution of children as adults, and support troubled children so that they may thrive. The health community must also stand up because the prosecution of children as adults is a readily solvable public health issue. I encourage youth justice advocates, scholars, health professionals, teachers, formerly incarcerated young people and their families, to walk into city halls, state legislatures, and Congress, with the Silvers et al. article in hand, so that we can protect children, achieve health equity and restore protections to childhood, and in so doing, potentially save lives.

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Thank you to the many advocates who work tirelessly with youth and families affected by the juvenile and adult criminal legal systems. Your "Raise the Age" efforts are making a difference, and it is my hope that the health professional community will join in the efforts to protect and promote the health of children behind bars, especially for children punished as "adults." Thank you also to Kassandra Angel for assistance with gathering background studies that informed this commentary.

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Abbreviations:

US United States

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