

Mental Health Treatment is Critical in Criminal Justice System

BY PAUL R. PACE

People with severe mental illness are four times overrepresented in the nation's correctional system in comparison to the overall population, says Robert Morgan, professor of psychology at Texas Tech University.

A person with mental illness is three times more likely to be incarcerated than they are to be hospitalized, he said. "That's a striking statistic." "Our correctional facilities are, in fact, mental health centers," he said. "The three largest providers of mental health services in the U.S. are Cook County Jail, L.A. County Jail and Houston County Jail. Corrections is where individuals are receiving mental health services."



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Morgan was a member of an expert panel assembled at a congressional briefing to put a spotlight on the need for

improved mental health care of people involved with the criminal justice system.

The briefing, "Innovations and Challenges in Providing Mental Health Services to People in Prison and Those Reentering the Community," was hosted by a partnership that included NASW, the American Psychological Association, the Legal Action Center and the Association of State Correctional Administrators.

NASW CEO Angelo McClain moderated the panel discussion, which included an audience of congressional staff.

The APA notes the prison systems face numerous challenges in providing mental health care to individuals in custody.

As Morgan explained, vast disparities exist between the general and prison populations for those who have a mental health disorder.

While about 18 percent of the general population may experience a mental health disorder or symptoms, the prison population, in comparison, is at about 45 percent, the APA notes.

Major depression among the general population is estimated at 6.7 percent. The prison population is at 16 percent. Serious psychosocial distress among the general population is at 3.4 percent, while the prison population is at 14.6 percent, the APA says.

Mental health services for those under correctional or community supervision are critical to their well-being and ability to build fulfilling lives free from criminal activity, the APA says.

There are efforts to address these challenges.

For example, Morgan said he has witnessed a successful program in Houston that combined mental health recovery services with training that aims to reduce future criminal justice contact.

This joint effort has led to reducing recidivism by nearly half, he said.

"We need to target issues that are putting people at risk both for mental health contact and improving their quality of life but also target this population for risk for future contact with the justice system," Morgan said.

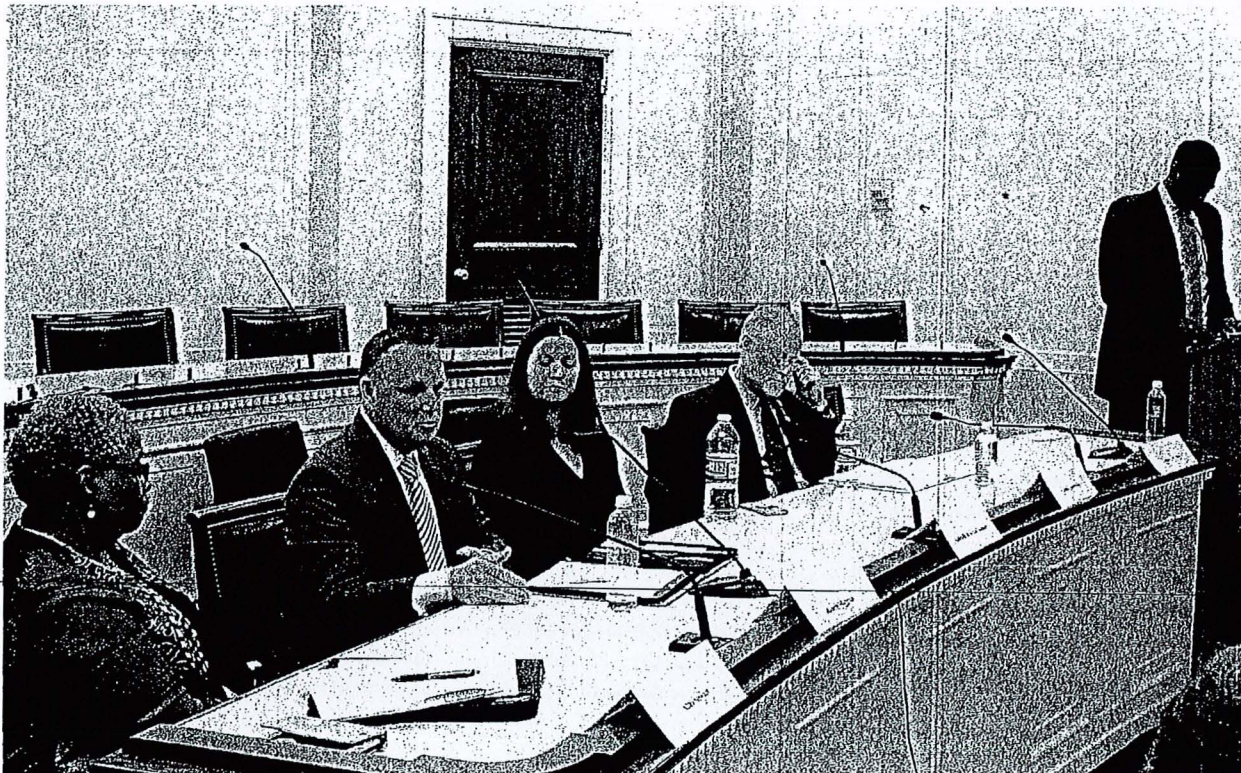
Panelist Altha Stewart, president of the American Psychiatric Association, explained that the role of the psychiatrist is to manage the psychiatric medication of people with serious mental illness.

"We are underrepresented in correctional settings," she said.

Having a plan for after care and readmission to the community for individuals involved with the criminal justice system is important, she explained.

It's a balance, she said.

"You have to focus on reducing recidivism and an appropriate treatment plan if you are going to accomplish any level of continuity in that



person's level of treatment," Stewart said.

She urged passage of the Medicaid Reentry Act (H.R. 4005). This bill would allow Medicaid payment for medical services furnished to an incarcerated person during the 30-day period preceding the individual's release. It would allow the person an opportunity for a smoother transition from incarceration back into the community, she said.

Medicaid
Panelist Gabrielle de la Gueronniere, director of policy at the Legal Action Center, noted that Medicaid

is the single largest payer for people with mental health care needs.

Close to 30 percent of the people who receive coverage through Medicaid expansion have a mental health or substance abuse disorder, she said. "Medicaid is critically important to this population."

However, Medicaid continues to be threatened. There are discussions in Congress for cuts to the program and/or to increase requirements, such as drug testing and work, in order to receive benefits. These attempts have the potential to cause a severe setback for this population, she said.

Gueronniere supported efforts to enforce the Wellstone-Domenici Mental Health Parity and Addiction Equity Act of 2008.

It requires that insurance coverage for behavioral health care services is equivalent to the coverage that insurers provide for physical health care services.

"This law, which has been around for 10 years, is not enforced," Gueronniere said.

She urged support of the Behavioral Health Coverage Transparency Act of 2018 (S. 2301), which establishes a consumer parity portal that gives patients a single place to get information about

NASW CEO Angelo McClain, right, moderates an expert panel on Capitol Hill titled "Innovations and Challenges in Providing Mental Health Services to People in Prison and Those Re-entering the Community."

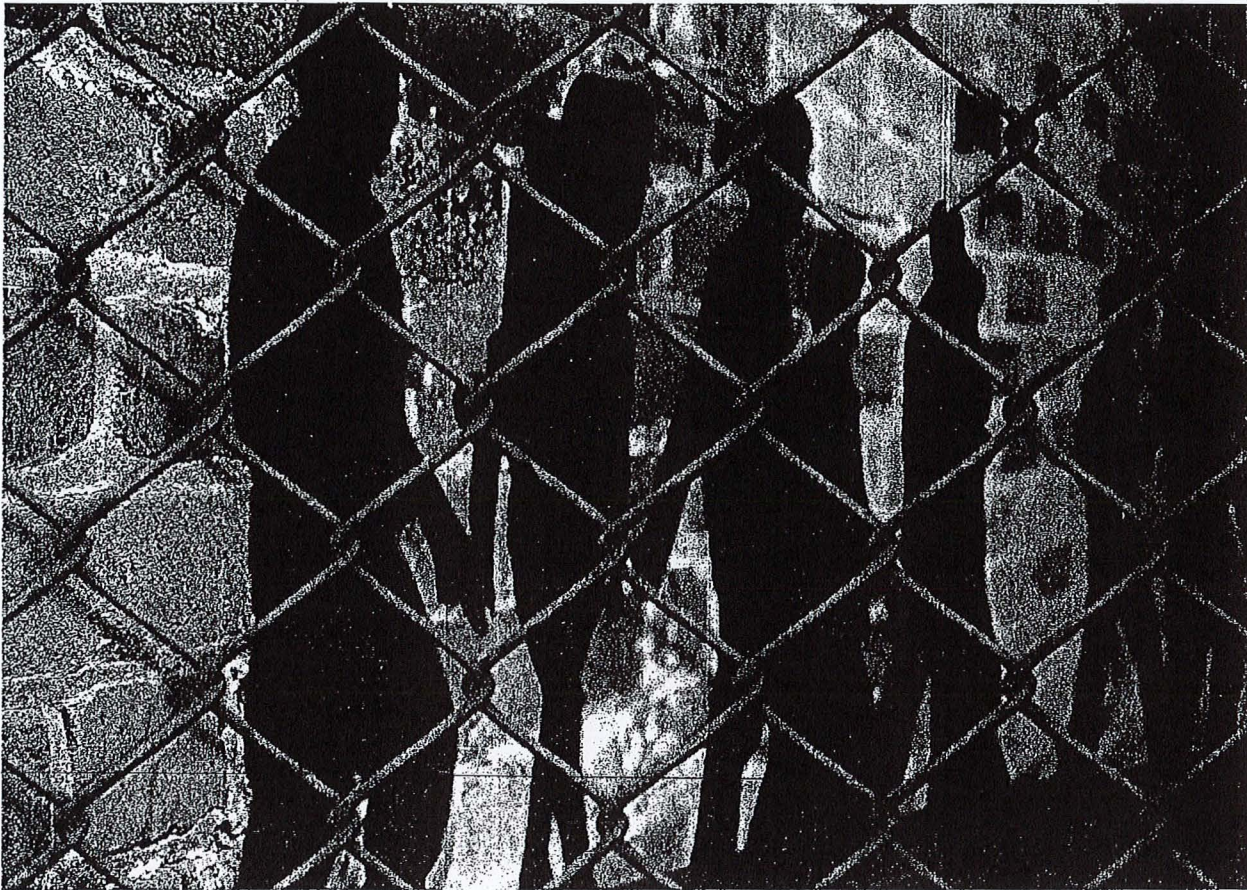


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their rights as well as other provisions to ensure mental health parity laws are enforced.

Recommendations

Avoiding incarceration is the best way America can address the influx of individuals with mental illness in the criminal justice system, said panelist Denny Kaemingk, secretary of the South Dakota Department of Corrections and chairman of the Behavioral Health Committee at the Association of State Correctional Administrators.

"One in 10 law enforcement calls is related to mental illness," he said.

He noted in 2016 a task force was formed in South Dakota to improve public safety. Among

its goals was to identify mental illness in people coming into contact with the criminal justice system.

From that program, 15 recommendations and outcomes of the task force were developed and many of them are in practice today, Kaemingk said.

Among the recommendations are:

- Strengthen the ability of law enforcement to identify mental illness.
- Require the use of a standardized mental health screening at jail intake.
- Establish a process for mental health assessment.
- Expand the availability of crisis services statewide.
- Provide training for prosecutors to utilize

deferred prosecutions.

- Expedite the completion of court-ordered competency evaluations.

Six of every 10 inmates in South Dakota's jails have symptoms of a mental health disorder, Kaemingk said.

"We can and must do a better job of treating individuals suffering from mental illness," he said. "It should start at the first time they have contact with the criminal justice system."

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