Law & Evidence-Based Correctional Practices for Addressing Mental Health Needs
The Problem

• Nature:
  2006 DOJ study revealed that the majority of prisoners suffer from some form of mental illness (compared to 11% of U.S. adult population).

  Incidence of serious mental illnesses (including schizophrenia, major depression, bipolar disorder and PTSD) is 5 times higher among prisoners than in the general population.

• Scope:
  Estimated 1.25 million prisoners with mental illness
What Can Law Do?

• **Mandate the provision of basic services**
  Example: Court cases, such as *Estelle v. Gamble*, that sketch the Constitutional requirements for provision of health services to inmates.

• **Authorize alternative procedures and programs**
  Example: Statutes that officially authorize mental health courts and clarify the procedures that govern those courts.

• **Guide discretionary decision-making**
  Example: Administrative rules that offer guidance to correctional guards and community correctional officers about how to handle rule violations related to untreated or inadequately treated mental illness.
Promising Developments in Law & Policy

Pre-Entry

• Screening for mental illness
• Collecting health records and treatment/provider information
• Maintaining/establishing medication regimen
• Identifying unmet treatment needs
Promising Developments in Law & Policy

Entry

• Assisting with benefits maintenance (suspension v. termination of Medicaid)
• Assisting with application for public benefits (SSI, SSDI, veterans’ benefits)
• Providing opportunities for treatment while in custody
• Devising release plan for housing, jobs, and arranging treatment for co-occurring disorders
Promising Developments in Law & Policy

Re-entry

• Connecting ex-prisoners to care providers
• Using graduated sanctions for mental health-related violations of conditions of supervision
• Providing more intensive support and supervision in the initial months following release