

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 *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