Neglecting Mental Health Treatment in Prisoners

High rates of recidivism are only one of the costs.

In the United States today, we have more mentally ill people behind bars than anywhere else, which in effect, makes our correctional system the largest provider of mental health services in the nation. And yet a new study reports that only about half of prisoners diagnosed with and medicated for mental illness when admitted to a correctional facility receive treatment for that illness while incarcerated.

The study assessed the mental health screening process and medication continuity in a nationally representative sampling of 18,185 prisoners. The authors found that about a fourth of responding inmates had received a mental health diagnosis during their lifetime, and about 18% of prisoners were taking medication when they started their sentences. Of those, only about half continued to receive medication during their incarceration.

Medication continuity was much greater in inmates with severe mental illness, such as schizophrenia, than in those with illnesses, such as depression, that have less obvious symptoms. The authors cited an expanding prison population without a corresponding increase in prison staff, cost cutting, and inconsistencies in screening procedures across facilities as primary reasons for the failure to treat.

The data in the study were based on the inmates' own reports and may therefore include inaccuracies, the authors acknowledge. Nevertheless, the patterns that emerge from this large epidemiologic survey of prisoners offer a unique perspective. They urge innovative thinking about



Inmates await the start of a counseling session at the California Medical Facility in Vacaville, California. Photo by Jim Wilson / New York Times.

public health intervention and prevention and call on prison administrators to prioritize validated screening procedures for identifying and treating mental illness in inmates.

"Research clearly shows a link between mental illness and repeated incarcerations," says Lorry Schoenly, a correctional health care risk consultant. "It is in our best interest as a society to provide treatment for the mentally ill while behind bars. The resulting improved health benefits both the individual and the larger community."

Although issues of funding and administrative priorities are tremendous hurdles, says Schoenly, some prisons have a much more rehabilitative culture than others, and correctional nurses can work to foster such a culture through their professional relationships. Read Schoenly's blog at www. correctionalnurse.net.—Laura Wallis

Reingle Gonzalez JM, Connell NM. Am J Public Health 2014;104(12):2328-33.

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Sederal resources for emergency responders and training officers. A resource page (http://bit.ly/19sStmq) developed by the Center for Domestic Preparedness will help emergency responders get the latest information on upcoming courses and network with instructors and alumni. More than 40 courses are available. New technology that can be used to manage patient tracking, transportation, and care during mass casualty events will be incorporated into the training sometime this year. The system will help health sector providers, emergency managers, and decision makers better allocate critical resources during a mass casualty response.