
The Impact of Mental Illness and Addiction on the Criminal Justice System: National and Oklahoma Perspectives

Southern Legislative Conference, July 2008

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ODMHSAS

Creating Healthier Oklahoma Communities

Oklahoma is in the Midst of a Crisis

As with many states across the nation, Oklahoma has failed to identify and meet the needs of those with mental illnesses and substance abuse.

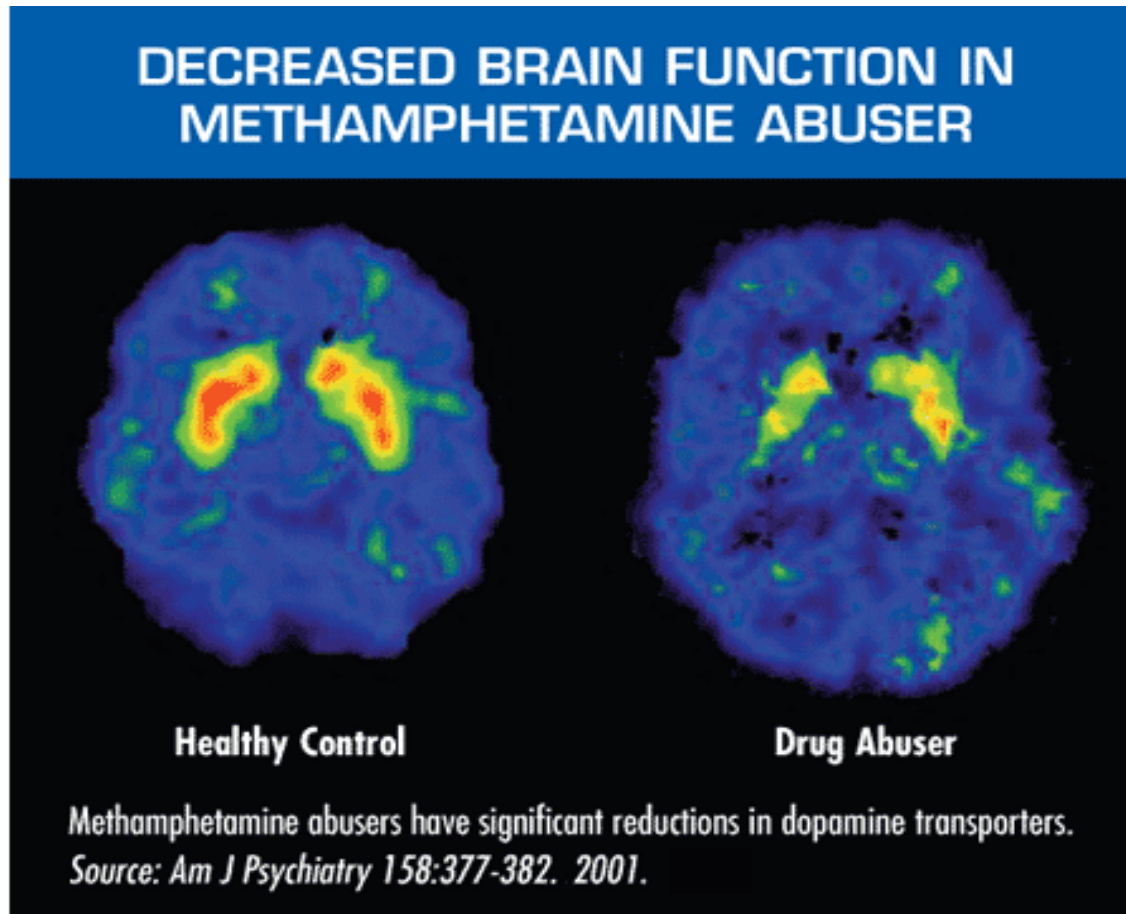
As result, our criminal justice system is filled with people who have untreated mental or addictive disorders at great cost to those in need, their families, our communities and our state.

Mental Illness and Addiction Defined

Mental and addictive disorders are often overlooked when we speak of public health or medical issues. Yet, these illnesses are primary public health concerns.

They are medical conditions that disrupt a person's thinking, ability to relate to others, and daily functioning. Just as diabetes is a disorder of the pancreas, mental and addictive disorders are a disease of the brain.

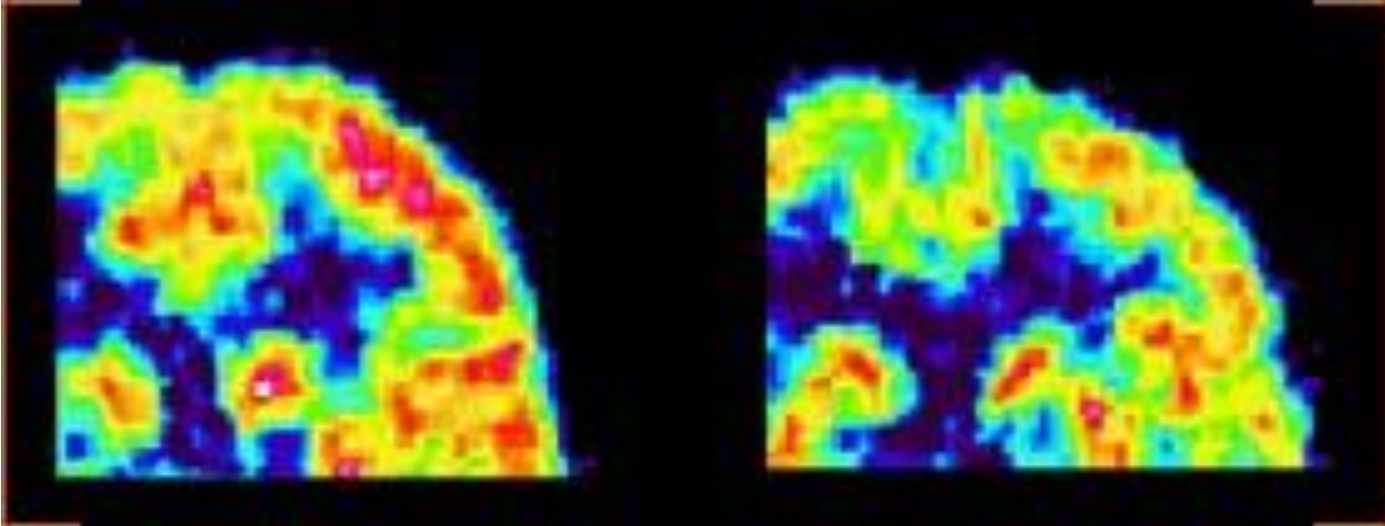
The Science of Addiction



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The Science of Mental Illness



Brain scan of a person with schizophrenia (right) and non-schizophrenic brain (left). The non-schizophrenic brain shows more activity in the frontal cortex. (Source: PBS.org)

National Perspective on Incarceration of Individuals with Mental Illness/Addiction

- A 2006 study by the Justice Department's Bureau of Justice Statistics found:
 - More than half of all prison and jail inmates, including 56% of state prisoners, 45% of federal prisoners and 64% of local jail inmates, have a mental health problem.
- Among the inmates who reported symptoms of a mental illness:
 - 54% of local jail inmates had symptoms of mania, 30% major depression and 24% psychotic disorder, such as delusions or hallucinations
 - 43% of state prisoners had symptoms of mania, 23% major depression and 15% psychotic disorder
 - 35% of federal prisoners had symptoms of mania, 16% major depression and 10% psychotic disorder

National Perspective on Incarceration of Individuals with Mental Illness/Addiction

- Female inmates had higher rates of mental health problems than male inmates.
 - In state prisons, 73% of females and 55% of males
 - In federal prisons, 61% of females and 44% of males
 - In local jails, 75% of females and 63% of males
- Inmates with a mental health problem also had high rates of substance abuse in the year before their admission:
 - 74% of state prisoners and 76% of local jail inmates were dependent on or abusing drugs or alcohol
 - 37% of state prisoners and 34% of local jail inmates said they had used drugs at the time of their offense
 - 13% of state prisoners and 12% of local jail inmates had used methamphetamine in the month before their offense

Oklahoma Data on Incarceration of Individuals with Mental Illness/Addiction

- Out of 25,000 inmates, the Oklahoma Department of Corrections estimates that approximately 11,000 have a serious mental illness. More than 75% of female inmates and 46% of male inmates have been diagnosed with a mental illness.
- Of these, 57% were incarcerated for non-violent offenses.
- In terms of substance abuse, 33% of inmates were imprisoned for drug and alcohol offenses, and at least 50% were incarcerated for a crime related to substance abuse. Additionally, 57% of offenders on parole and 50% of those on probation had drug and alcohol offenses.
- During FY 06, substance-abuse related offenses comprised 67% of sentences ordered for the DOC community sentencing program and 57% of DOC offenders released needed substance abuse treatment.
- Among DOC inmates, distribution of drugs is the top offense and the possession of drugs is the second most frequently occurring offense.

Cost of High Incarceration Rates to Oklahoma Taxpayers

- The result of these high incarceration rates has been skyrocketing cost to the taxpayer. Since 1991, appropriations to the department of corrections have more than tripled, rising from \$156 million in FY '91 to more than \$503 million this legislative session.



Societal Impact and the Fiscal Facts

- What happens to Oklahomans more so than any other state in the nation – when someone does not have access to mental health or addiction treatment – they end up incarcerated.
- This does not make sense, not only in terms of the human suffering that can be avoided by making services available, but also from a fiscal standpoint.
- The average cost to maintain an inmate in prison is \$48 per day. However, for someone on a prison mental health unit, the cost jumps to approximately \$175/day.
- Providing appropriate mental health services to someone in the community to keep them from entering the criminal justice system costs approximately \$20/day.
- Providing appropriate substance abuse services to someone in the community to keep them from entering the criminal justice systems costs less than \$15/day.
- Our society can no longer afford to ignore the fact that individuals who are mentally ill or addicted are being incarcerated without appropriate treatment.

Prisons and Jails Are Ill-Equipped to Help Offenders with Mental Illness and Addiction

The American Psychiatric Association notes that people with mental illness are:

- Much more expensive to incarcerate than other inmates
- Incarcerated longer than other inmates
- Are often in state or federal prison for non-violent crimes
- Have a co-occurring substance abuse disorder
- Not receiving treatment and programs that would decrease recidivism
- Better served, economically and medically, with treatment in their communities



Prisons and Jails Are Ill-Equipped to Help Offenders with Mental Illness and Addiction

For those with a substance abuse problem, not nearly enough are being helped during their time behind bars. They often leave with the same problem with which they came in, a travesty that puts them right back onto the road of addiction.



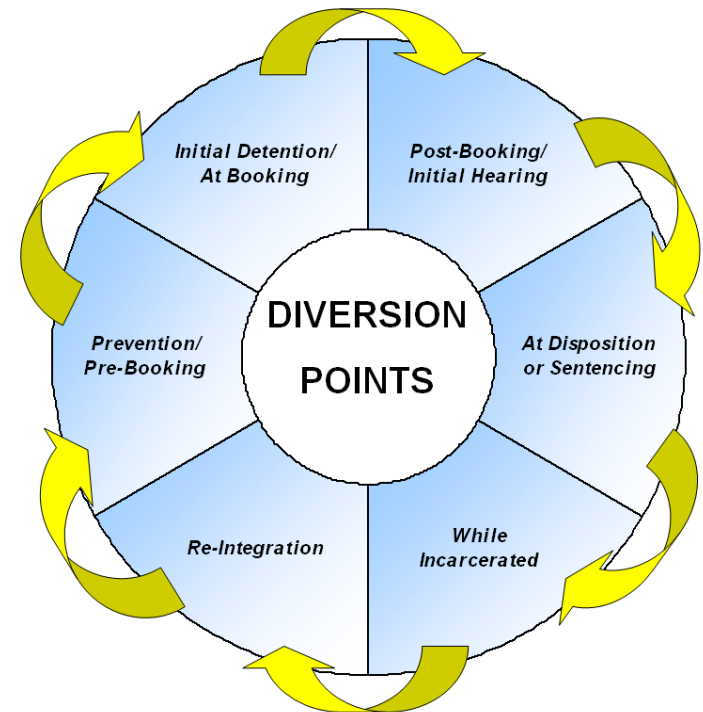
Owen Franken / PNI

Recidivism among people with mental illnesses and addiction also is high, when treatment is not available.

Oklahoma's Proposed 'Smart on Crime' Package Hopes to Address the Issue

ODMHSAS has been advocating a 'Smart on Crime' package at the state level. The components of the package include programs to address mental illness and addiction at a number of diversion points:

- ❑ Prevention/Pre-booking
- ❑ Initial Detention/At Booking
- ❑ Post-Booking/Initial Hearing
- ❑ At Disposition or Sentencing
- ❑ While Incarcerated
- ❑ During Reintegration into the community



Prevention/Pre-Booking Diversion Point

Current

- 325 police officers and sheriff's deputies trained in Crisis Intervention Training.
- Limited mental health emergency responders to assist law enforcement.
- Waiting list of more than 600 needing residential substance abuse treatment.
- Systems of Care programs in only 33 counties.

Goal

- Police responders in every community trained to identify substance abuse and mental health symptoms.
- Psychiatric/addiction responders throughout the state to respond to the scene to help divert individuals.
- Residential treatment services to meet the needs statewide.
- Statewide Systems of Care services for youth and families at-risk of entering the criminal justice system.

Initial Detention/At-Booking

Current

- Oklahoma currently has limited resources to identify persons being brought to or being held in jails that could be diverted into alternative treatment services.

Goal

- Mental health and substance abuse jail screening services for each county with treatment and medication programs to divert offenders.

Post-Booking/Initial Hearing

Current

- Oklahoma County has a day reporting program where individuals with mental illness report for treatment daily while waiting for a disposition of their case as an alternative to incarceration. This team makes recommendations to the court for alternatives to incarceration.
- Oklahoma has limited treatment for individuals on probation/parole who are at high risk for incarceration due to technical violations related to mental illness and/or addiction.

Goal

- Day reporting programs designed to provide substance abuse, methamphetamine and/or mental health treatment and evaluation for those waiting for disposition with recommendations for alternatives to incarceration.
- Treatment for individuals on probation/parole at-risk for re-incarceration due to mental illness and/or substance abuse dependence.

At Disposition or Sentencing

Current

- Oklahoma is a model state for drug courts based on outcomes.
- Oklahoma has funding for only 14 mental health courts to divert eligible, non-violent offenders from incarceration.
- Oklahoma has only 10 juvenile drug courts to divert eligible youth from the criminal justice system.
- Limited resources for OJA youth with mental health or addiction issues.

Goal

- Expansion of drug courts over the past two years is the model upon which this request is based, to replicate their success at all diversion points.
- Expand mental health courts statewide.
- Expand juvenile drug courts statewide.
- Provide MH/SA treatment for youth in the OJA system to prevent further involvement with criminal justice.

While Incarcerated

Current

- Oklahoma has three co-occurring therapists and some substance abuse treatment within the Department of Corrections system; however, it is insufficient to fund the staggering needs.

Goal

- Meet the mental health and substance abuse treatment needs of those incarcerated.



Reintegration into the Community–Part 1

Current

- Three specialists in the prison setting to assist with development of discharge plans for those with mental health needs.
- Four Intensive Care teams to assist those with mental health needs who are leaving prisons and re-entering the community. These teams aid with linkage to housing, employment, treatment and medications to keep individuals from recidivating.
- No Program of Assertive Community Treatment (PACT) that specializes in the forensic population.

Goal

- Ten additional discharge specialists to help those being discharged from DOC with linkage to treatment to help this population from recidivating.
- Intensive Care teams statewide to assist with this need.
- Two forensic PACT teams (OKC and Tulsa) to provide services to those released from jails and prisons, and at risk for incarceration.

Reintegration into the Community–Part 2

Current

- Oklahoma has few resources to assist with employment and housing for those reintegrating from and at high risk for involvement with the criminal justice system.
- Oklahoma has limited services for individuals who began substance abuse treatment while incarcerated, but need those services to continue upon release.

Goal

- Statewide assistance with housing and employment for those reintegrating from or at high risk for involvement with the criminal justice system.
- Individuals at-risk for re-entering the criminal justice system without continued substance abuse treatment will receive treatment upon release from incarceration.

Treatment Works...

- The fact is that mental and addictive disorders are treatable, as treatable or even more successfully treated than common physical illnesses such as heart disease, cancer or diabetes.
- Of those who suffer from bipolar disorder or major depression, 80% respond quickly to treatment. Additionally, 60% of those with schizophrenia can be relieved of acute symptoms with proper medication.
- It is possible to meet the needs of those with mental illness or addictive disorders at virtually any stage of involvement (and, ideally, *before* involvement) in the criminal justice system – and divert them into more effective, less expensive alternatives.
- Diversion programs, such as Oklahoma’s proposed ‘Smart on Crime’ package, constitute sound public policy from an economic, public safety and humanitarian perspective. With greater emphasis on such programs, we can make a difference.