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Sentenced Not Admitted

Ideally, prison reforms convicts into productive members of society. However, mental illness inhibits this progression. Prisons are not mental hospitals, and those suffering from mental illness are essentially serving prison sentences with no benefits or resources. A common misconception is that being sent to a mental health facility is worse than the fate of prison. However, mental hospitals are a far cry from electroshock therapy and the scenes depicted in *American Horror Story*. Yet although these facilities have improved, getting the necessary help may still pose a challenge to many people suffering from a mental illness. Why do so many people with mental disorders not seek the necessary resources to treat them? While many of these people suffer in the safety of their own homes and under care of their families, the mental state of these people makes them more likely to find themselves struggling in the criminal justice system. While a prison appears to the general public as another society entirely, the possibility of release back into the general public is still very high. And, in order for our society to function and prosper, we need the best interest of all people at heart and in mind.

Numerous prison systems, specifically Pennsylvania, report more than 20% of their inmates being seriously mentally ill (Abramsky). This illustrates one of the many faults in the United States justice system. In extension of this problem, E. Fuller Torrey, a psychiatrist and schizophrenia researcher, says in his book *Criminalizing the Mentally Ill*, “the underlying cause of the recent explosion in the number of seriously mentally ill individuals in jail is a profound

failure of the public mental health system”(iv). We have implemented plenty of public health systems, but many people forget that the mind can get sick too and that it also needs care. We tend to think it is easier to lock those with mental illnesses up and ignore their unseen struggles, but with a little attention to the public mental health system, the jails can be used solely for what they were designed for. In Chicago, the state has set up a 24-hour triage center where people experiencing psychiatric breaks and substance abuse problems can be brought by the police. Based on the programs being put into action stated above, and the identification of many of the sources of the problem, the government can move forward with these solutions and correctly relieve those suffering mentally from their ailment.

America’s health care system is expensive. Although it is often seen as a costly investment, it is necessary. When our loved ones age, their need for care increases and nursing homes enter the minds of families, and are usually the best option. Nursing homes are expensive and can be seen as a burden to people with aging family members. Likewise, mental health facilities are costly. The need for them, however, compared to the need for old age homes, can be unpredictable, creating an unplanned expense. A 2008 study of those suffering from mental illness in the U.S. shows that 58.7 percent of American adults with a serious mental illness had sought mental health care; only a little more than half of the millions of people suffering got the care they needed (Wexler). This could be connected to the cost and unpredictability of the services needed.

Two characteristics of those who commit petty crimes such as trespassing, vandalism, and theft, appear to be mental illness and addiction. Both happen to be treatable, but we tend to neglect the one that was out of human control in the first place; while addiction can be blamed on the abuser, mental illness has no one to blame. Drugs can contribute to an altered mental state

and the commission of a crime at that point in time, but mental illness is a constant altered state with no high to come down from and no sense of reality to return to. Through various psychology and criminal justice classes in both high school and college, I have come to learn that addiction takes hold of the mind in a similar way that mental illness does. Many of those who suffer mentally do not know that what they have done is wrong. According to *Criminalizing the Mentally Ill*, “this process, known as ‘criminalization’ of mental illness makes no more sense than punishing persons with Alzheimer's or brain tumors for the behavioral problems caused by their disease” (Fuller iv). Perhaps this process contributes to the stigmas about mental illness, painting them as criminals instead of victims to their ailment.

Most of us would likely assume that the vast majority of heinous felonious offenders would also be those who suffer mentally, but this is not the case. For instance, when we think of devastating crimes, we imagine school shootings, wild fires that begin with arson, and terrorism. While these crimes take ahold of the media and the minds of everyone who sees them, a very small minority of felons is mentally ill. Carrying out a felonious or violent crime often takes quite a bit of planning and awareness, while many of those suffering from mental illness tend to commit careless and rash crimes. Because many serious offenders begin as petty criminals who are left untreated “their crimes are an unfortunate but predictable consequence of the breakdown of the public mental health system” (Fuller). With this idea clearly reinforced through statistics, the likelihood of prison facilities realizing this is an issue seems fairly high. So, why are so few states implementing treatment programs for those inmates?

Although many facilities are failing to fix this problem, some are rising to the occasion and taking action. In Pittsburgh, police officers are being trained to recognize the signs of mental illness even before a potential suspect is taken into custody. And, once a suspect is taken into

custody, he or she is immediately entered into a specialized program. With police officers already in the hot seat and under constant examination and speculation, it is important to acknowledge what is and is not their responsibility. Recognizing the signals of a mentally ill person prevents not only unnecessary violence, but also introduces another element to a job that is meant to protect people. Because of the introduction of this program, a young woman was directed toward the help she needed instead of a life behind bars. She was arrested for possession of drug paraphernalia, drugs, prostitution, disorderly conduct, and resisting arrest. However, on top a heroin addiction she was suffering from schizophrenia (Abramsky). In fact, schizophrenia is the most prevalent mental illness among those who are taken into police custody. It causes a chemical reaction in the brain that causes the person to act purely for self-preservation. The person is not trying to bring harm to anyone, and, in many ways, during that psychotic break, the line between right and wrong is virtually nonexistent. In most cases, her mental illness would have been overlooked and her criminal behavior highlighted. But, according to Amy Kroll of the Allegheny County Office of Behavioral Health, a plan was drawn up within two hours of her arrest to help her with both her drug addiction and mental disorder (Abramsky). This was essentially the turning point of this woman's life. She either could have been thrown into jail to be neglected and deemed a criminal or identified as sick and a potential productive member of society. The woman was immediately placed into rehab and eventually was placed in a halfway house. A mental-health court also decided to put her on three-year probation with job placement, medication, and therapy in lieu of being incarcerated (Abramsky). In all, Allegheny County saw about 150 mentally ill patients annually and with the implementation of these mental health programs, this number has dropped to around 90 patients.

Although the needs of the people should be first and foremost, perhaps the most logical response for many would be, “how much does it cost”? In a society driven by money and profit, as well as a nation 3 trillion dollars in debt, money cannot be ignored. In total, it costs around \$1 million to house one inmate in a state prison. According to Sasha Abramsky, the implementation of these new regulations and systems would raise that cost to only \$1.1 million. Many scholars argue that the reason the mental health system is failing is the extreme cost for the facilities; however, when numbers are crunched and the system is examined, this is not at all the case. The main issue is, in fact, the manpower and planning these new efforts would take. However, it would also bring benefits as the implementation of these programs would employ hundreds of people in the given area. According to one article, “San Antonio, Texas documented annual savings of... \$1.5 million in jail costs for mental health and \$1 million in emergency room costs. Minneapolis saved \$2.16 for every dollar spent on its triage center. Salt Lake City reported emergency room use by mentally ill people in crisis fell by 90 percent” (“In Chicago”). The budget may need a small increase to lift these programs off the ground, but time and planning are the main investments. In all, finances do not necessarily need to be the driving force behind these reforms. A plan and plenty of people willing to put in the time will launch these programs and help the people who need them.

In Chicago, the same problem plagues prisons to a much higher magnitude. In 2012, nearly half of the mental health institutions were closed due to lack of funding, and the reasoning for this cut was never explicitly stated. With nowhere to house mostly nonviolent criminals with mental illnesses, the Cook County jails are overflowing. With that being said, the city of Chicago is opening a 24-hour triage center for police officers to take those who experience psychotic breaks and other mental crises. Instead of immediately being brought into a police department,

they can begin identification and rehabilitation as soon as they are detained instead of being subject to the procedures of a mentally stable person (“In Chicago”). When proper institutions are available to those who need them, facilities such as prisons and hospitals are able to be used entirely for their purpose and help the vast majority of people who fit correctly into their programs. When funds are not being spent on people who need help elsewhere, more money is available to these institutions, thus improving their quality and helping more people.

The most logical place to put someone breaking the law is in the hands of law enforcement. On the surface many do belong in the criminal justice system, but if one digs a little deeper, some may be sick people who need treatment, just as those who are seriously wounded need attention from a hospital. Solutions offered by E. Fuller Tolley and others are being implemented all over the country. And while Pittsburgh and Chicago are still sorting out minor details, just a few years after applying these strategies, countless people are receiving the help they need. If the responsibility of the mental health system is placed on the prison system, both will fail. With the United States health care system as one of the most developed, wealthy, and technologically advanced in the world, we have the resources to rebuild and reconstruct this system— one state, one county, and one person at a time.

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