

Statement on Mental Illness and Incarceration
Mobilizing Against Mass Incarceration Statewide Network
September 24, 2015

1. My name is Al Hays, and I am Professor Emeritus of Political Science and Public Policy at the University of Northern Iowa. I am here representing a network of citizens across the state who are concerned with reducing mass incarceration in the state of Iowa and the nation. Over the next few months, we are going to be advocating on a wide range of issues that affect mass incarceration, but today I will focus briefly on the issue of mental illness and imprisonment.
2. I believe that most of us would agree that simply imprisoning someone who acts out due to mental illness is not a satisfactory, long term solution to the problem. Unless the underlying illness is addressed, they are likely to continue to have issues with the criminal justice system, at great cost to themselves and to the taxpayers. In fact, incarceration often exacerbates the underlying mental illness, rather than making it better.
3. And yet, according to the Department of Corrections, 27 percent of prison inmates are seriously mentally ill, displaying a wide range of serious disorders. This amounts to approximately 2,260 inmates, and at a cost of \$36,000 per year per inmate, the total yearly expenditure for housing them would be approximately \$81,000,000. This is clearly a problem that needs to be addressed if we are to have a safe and cost effective criminal justice system.
4. What I want to emphasize today is that a number of counties in Iowa have recognized disproportionate incarceration of the mentally ill as a problem, and they are taking steps to address it. In Black Hawk County, our Sheriff, Tony Thompson has entered into a cooperative relationship with Black Hawk-Grundy Mental Health Center and other professionals to deal more effectively with the significant numbers of mentally ill persons who end up in the county jail. I'm sure that other counties are undertaking similar efforts.
5. The Black Hawk County Board of Supervisors has also endorsed the county's participation in a national effort called the Stepping Up Initiative. Endorsed by the National Association of Counties, the Council of State Governments and others, this initiative calls upon counties to come up with even more creative and proactive approaches to this problem. I have attached a handout on the initiative to my written presentation.
6. The role of state policy should be to encourage and fully support these local efforts. Some state measures that would constitute significant support include:
 - a. Continuing to support mental health courts as one of several strategies to reduce unnecessary incarceration.
 - b. Fully funding basic mental health services in all counties. Especially important in reducing imprisonment is effective crisis intervention by trained law enforcement personnel and mental health professionals.

- c. Creating alternatives to incarceration for those suffering mental illness who can be more successfully treated in the community.
- d. Providing extra funding for counties (or groups of counties) that have developed and implemented a coordinated plan involving criminal justice professionals, mental health professionals, patients and the public in reducing incarceration rates for the mentally ill.
- e. Encouraging the coordination of mental health and drug treatment programs, since addiction and mental illness are often co-occurring.
- f. Addressing the acute shortage of psychiatrists and other mental health professionals that currently exists in Iowa.

7. I am pleased that the Governor has appointed a group of experts to study this and other problems related to incarceration. I believe that, working together, we can come up with creative solutions. Thank you for taking the time to hear my presentation.

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THE
STEPPING UP
I N I T I A T I V E

STEPPING UP: A National Initiative to Reduce the Number of People with Mental Illnesses in Jails

THERE WAS A TIME WHEN NEWS OF JAILS serving more people with mental illnesses than in-patient treatment facilities was shocking. Now, it is not surprising to hear that jails across the nation serve an estimated 2 million people with serious mental illnesses each year¹—almost three-quarters of whom also have substance use disorders²—or that the prevalence of people with serious mental illnesses in jails is three to six times higher than for the general population.³ Once incarcerated, they tend to stay longer in jail and upon release are at a higher risk of returning than individuals without these disorders.

The human toll—and its cost to taxpayers—is staggering. Jails spend two to three times more on adults with mental illnesses that require intervention than on people without those needs,⁴ yet often do not see improvements in recidivism or recovery. Despite counties' tremendous efforts to address this problem, they are often thwarted by significant obstacles, such as coordinating multiple systems and operating with minimal resources. Without change, large numbers of people with mental illnesses will continue to cycle through the criminal justice system, often resulting in missed opportunities to link them to treatment, tragic outcomes, inefficient use of funding, and failure to improve public safety.

The National Initiative

Recognizing the critical role local and state officials play in supporting change, the National Association of Counties (NACo), the Council of State Governments (CSG) Justice Center, and the American Psychiatric Foundation (APF) have come together to lead a national initiative to help advance counties' efforts to reduce the number of adults with mental and co-occurring substance use disorders in jails. With support from the U.S. Justice Department's Bureau of Justice Assistance, the initiative will build on the many innovative and proven practices being implemented across the country. The initiative engages a diverse group of organizations with expertise on these issues, including those representing sheriffs, jail administrators, judges, community corrections professionals, treatment providers, people with mental illnesses and their families, mental health and substance use program directors, and other stakeholders.

The initiative is about creating a long-term, national movement—not a moment in time—to raise awareness of the factors contributing to the over-representation of people with mental illnesses in jails, and then using practices and strategies that work to drive those numbers down. The initiative has two key components:

1. **A CALL TO ACTION** demonstrating strong county and state leadership and a shared commitment to a multi-step planning process that can achieve concrete results for jails in counties of all sizes.

The Call to Action is more than a vague promise for reform; it focuses on developing an actionable plan that can be used to achieve county and state system changes. As part of this Call to Action, county elected officials are being asked to pass a resolution and work with other leaders (e.g., the sheriff, district attorney, treatment providers, and state policymakers), people with mental illnesses and their advocates, and other stakeholders on the following six actions:

- Convene or draw on a diverse team of leaders and decision makers from multiple agencies committed to safely reducing the number of people with mental illnesses in jails.

- Collect and review prevalence numbers and assess individuals' needs to better identify adults entering jails with mental illnesses and their recidivism risk, and use that baseline information to guide decision making at the system, program, and case levels.
- Examine treatment and service capacity to determine which programs and services are available in the county for people with mental illnesses and co-occurring substance use disorders, and identify state and local policy and funding barriers to minimizing contact with the justice system and providing treatment and supports in the community.
- Develop a plan with measurable outcomes that draws on the jail assessment and prevalence data and the examination of available treatment and service capacity, while considering identified barriers.
- Implement research-based approaches that advance the plan.
- Create a process to track progress using data and information systems, and to report on successes.

In addition to county leaders, national and state associations, criminal justice and behavioral health professionals, state and local policymakers, others with jail authority, and individuals committed to reducing the number of people with mental illnesses in jails should sign on to the Call to Action. Stepping Up participants will receive an online toolkit keyed to the six actions, with a series of exercises and related distance-learning opportunities, peer-to-peer exchanges, and key resources from initiative partners.⁵ The online toolkit will include self-assessment checklists and information to assist participants working in counties in identifying how much progress they have already made and a planning template to help county teams develop data-driven strategies that are tailored to local needs.

2. A NATIONAL SUMMIT to advance county-led plans to reduce the number of people with mental illnesses in jails.

Supported by the American Psychiatric Foundation, a summit will be convened in the spring of 2016 in Washington, DC, that includes counties that have signed on to the Call to Action, as well as state officials and community stakeholders such as criminal justice professionals, treatment providers, people with mental illnesses and their advocates, and other subject-matter experts. The summit will help counties advance their plans and measure progress, and identify a core group of counties that are poised to lead others in their regions. Follow-up assistance will be provided to participants to help refine strategies that can be used in counties across the nation. After the 2016 summit, participants will be notified of potential opportunities for sites to be selected for more intensive assistance through federal and private grant programs.

Although much of the initiative focuses on county efforts, states will be engaged at every step to ensure that their legislative mandates, policies, and resource-allocation decisions do not create barriers to plan implementation.

To learn more about the initiative or to join the Call to Action, go to StepUpTogether.org.

Endnotes

1. Steadman, Henry, et al., "Prevalence of Serious Mental Illness among Jail Inmates." *Psychiatric Services* 60, no. 6 (2009): 761-765. These numbers refer to jail admissions. Even greater numbers of individuals have mental illnesses that are not "serious" mental illnesses, but still require resource-intensive responses.
2. Abram, Karen M., and Linda A. Teplin, "Co-occurring Disorders Among Mentally Ill Jail Detainees," *American Psychologist* 46, no. 10 (1991): 1036-1045.
3. Steadman, Henry, et al., "Prevalence of Serious Mental Illness among Jail Inmates."
4. See, e.g., Swanson, Jeffery, et al., *Costs of Criminal Justice Involvement in Connecticut: Final Report* (Durham: Duke University School of Medicine, 2011).
5. Among the key partners are the National Alliance on Mental Illness; Major County Sheriffs' Association; National Association of County Behavioral Health & Developmental Disability Directors; National Association of State Alcohol and Drug Abuse Directors; National Association of State Mental Health Program Directors; National Council for Behavioral Health; National Sheriffs' Association; and Policy Research Associates.