

# [Annotated bibliography: mental health issues in prison](https://assignbuster.com/annotated-bibliography-mental-health-issues-in-prison/)

## Introduction

According to the organization Mental Health America (2019) “ 1. 2 million individuals with mental illness sit in jail and prison each year.”  The Sentencing Project is a non-profit organization that focuses on creating a fair and effective justice system (The Sentencing Project, 2019).  It does this by advocating for alternatives to incarceration, promoting reformation of sentencing policy, and addressing unjust racial and social disparities (Mental Health America, 2019).  Mental Health America (2019) stated in 2015, Sentencing Project ranked the states based on the number of people incarcerated.  The study yielded that state by state, the ratio of people incarcerated and lack of access to mental health care promoted a positive correlation between one another (Mental Health America, 2019).  Mental Health America (2019) reports that in the ten states with the least available mental health care resources, six of them also have the highest rates of incarceration.

Psychiatric hospitals began to be deinstitutionalized in the 1950s due to the reforms of psychiatric care including, Medicaid being enacted in 1965, the advancement of psychotropic medications and the growing influence of the psychiatric community. Since the deinstitutionalization of United States mental health hospitals and institutions, the population of incarcerated individuals with mental health issues has increased.  One example of this, was noticeable here in the state of Virginia.  According to a news article written by Capital News Service (2018), “ more than 7, 450 people placed in Virginia’s jails in 2017 were mentally ill.”  This was an increase from 2016 by fifteen percent (Capital News Service, 2018).  With all of the mental health institutions closing and no alternative place for the mentally ill to receive continued treatment and care, correctional institutions became one of the most convenient places for people with mental illnesses to be placed.

Annotated Bibliography

Burke, J. D., Mulvey, E. P., Schubert, C. A., (April 9, 2015). Prevalence of mental health problems and service use among first-time juvenile offenders. Journal of Child Family Studies, 24, 3774-3781. doi: 10. 007/s10826-015-0185-8

Most research documented suggests that juveniles have a high rate of mental health disorders, but there are gaps in the research as well that must be explored to address the concern of juveniles with mental disorders in the criminal justice system.  Some of these gaps include not knowing how mental health services are used with the juveniles and families and lack of knowledge of the course of the mental health disorders.  Researchers achieved this by using multiple interviews which consisted of a structured clinical interview and questionnaires.  These interviews and questionnaires focused on family functioning, service use and parental burden and psychopathology.  Research in this article also highlighted that while prevalence was high, the rate of juveniles participating in mental health services was low. The research also revealed that over time, mental health problems decreased once becoming involved with the criminal justice system, except for those juveniles that had obsessive compulsive disorder.

Cappon, L. (March 28, 2016). Who decides? The decision-making process of juvenile judged concerning minors with mental disorders. International Journal of Law and Psychiatry, 46: 7-19. doi: 10. 1016/j. ijlp. 2016. 02. 022

This article focuses on analyzing the previous research on juvenile judges decision-making process. The reason an analysis of judges decision-making is relevant is because the decision affects juveniles with mental health disorders.  Judges can reserve the right to send a juvenile to a juvenile detention center or a mental health facility as part of the judge’s ruling.  “ The overall aim of this study is to gain insight into the role of all actors, including the juvenile judge, in the juvenile judge’s decision-making process in cases relating to minors with mental disorders” (Cappon, 2016).  This article used actors and semi-structured interviews to conduct research necessary to determine the impact of the decision-making process.  The conclusions were that the judge’s decision was mostly determine by the social services investigator and the psychiatrist.  The actual minors and parents had minimal affect on the decision of the judge.  Any further research should focus on the groups that most influence the juvenile judge’s decision.

Daquin, J. C., Daigle, L. E., (August 31, 2017). Mental disorder and victimization in prison: Examining the role of mental health treatment. Criminal Behaviour and Mental Health 28: 141-151. doi: 10. 1002/cbm. 2056

Research suggests that victimization is increased in incarcerated individuals with mental disorders.  Gaps in the research were identified as whether the risk of victimization various depending on the disorder or symptom and what role mental health treatment plays in increased or decreased risk of victimization.  The purpose of this article was to examine the relationship between disorders, symptoms and victimization of prisoners that may affect treatment.  It also examined whether treatment facilitated the relationship of victimization and treatment within the prison.  The results concluded that psychotic symptoms resulted in decreased victimization while symptoms like depression, hallucinations, paranoia, and personality disorder resulted in increased victimization.  While treatment may improve mental illness in an individual, treatment in the prison also increased risk of victimization.  Some inmates with mental disorders are not at an increased risk of victimization, but there is not enough research to determine the relationship between victimization and treatment of prisoners with mental disorders.

Fazel, S., Hayes, A. J., Bartellas, K., Clerici, M., Trestman, R., (July 14, 2016). Mental health of prisoners: prevalence, adverse outcomes, and interventions. The Lancet Psychiatry, 3 (9), 871-881. doi: 10. 1016/S22150366(16)30142-0

There are over millions of people being held within prisons.  According to most research available, the prevalence of mental health disorders or illnesses, are lower in the general public when compared to the populations in prisons.  Research in the article referenced that there were low rates of identification and treatment of psychiatric disorders (Fazel, Hayes, Bartellas, Clerici, Trestman, 2016).  Thus, efforts should be on increasing ways to identify mental illnesses and then the treatment of the illnesses.  The purpose of this review was to present research and recommendations to improve the care that prisoners receive for their mental health issues.  Options have been explored throughout research with minimal positive treatment options.  Furthermore, the article also suggests that compared to males and younger inmates, women and older adults need more mental health care.  Recommendations from the article focused on developing policies to meet the most vulnerable populations and be reviewed yearly.

Harte, J. M., (October 24, 2015). Preventing crime in cooperation with the mental health care profession. Criminal Law Social Change, 64: 263-275. doi: 10. 1007/s10611-015-9589-z

Mental disorders have not been a part of criminological theories despite the growing evidence that individuals with disorders are more inclined to be involved with criminal behavior.  Over the years, mental health care workers and law enforcement officers have worked together to decrease crime and improve society.  This study researched times when the law enforcement officers and mental health workers worked together and how unsuccessful those joint efforts may have been.  One of the results discovered in the study is the unrealistic expectations that reoffending can be reduced through treatment.  Another conclusion is that it was difficult to predict the possibility of which offenders are a risk to society.  Furthermore, the article identifies that law enforcement officials and mental health workers, work on the issues from opposite needs of the spectrum.  Therefore, despite multiple parties working on the same problem, the parties work different angels and hope to achieve different objectives.

Martin, M. S., Potter, B. K., Crocker, A. G., Wells, G. A., Colman, I., (May, 11, 2016). Yield and efficiency of mental health screening: A comparison of screening protocols at intake to prison. Public Library of Science ONE 11 (5) 1-13. doi: 10. 1371/journal. pone. 0154106

This article documented that due to elevated false positives, the value of mental illness screening has been increasingly challenged in low prevalence environments.  Prior research has already indicated that screening may not be beneficial in low prevalence settings, however in high prevalence setting like prisons and correctional institutions, screening may be beneficial.  Since false positive rates are linked to incidence, screening in greater prevalence environments, including correctional institutions, may be more efficient.  Taking history of mental health recognized only 41. 0 percent of all mentally ill prisoners.  Screening protocols found between 61. 9 and 85. 7 percent of all instances.  While screening in low prevalence environments may not be practical, it may be useful in prisons and prisons where the incidence of mental illness is greater. Further consideration is required to determine the screening efficiency in these environments and the impact of policies and clinical procedures on the advantages and harms of screening.

McCormick, S., Peterson-Badali, M., Skilling, T. A., (December 15, 2016). The role of mental health and specific responsivity in juvenile justice rehabilitation. Law and Human Behavior, 1 (41), 55-67. doi: 10. 1037/lhb0000228

It is important to understand the role mental health problems play in youth involved in justice.  Understanding the role of mental health problems brings difficulties in research, policy, and practice to light.  According to the risk-needs-responsiveness (RNR) structure, mental health issues are usually not risk factors for criminal conduct, but the prevalence levels are very high.  Thus, mental health as a responsiveness variable can moderate the achievement of criminogenic needs-based procedures.  In this research, the relationships between mental health status, criminogenic requires therapy, and recurrence were explored.  Also, more frequently, young people who received mental health therapy had their criminal needs matched across multiple domains, indicating an association between mental health therapy and goals of intermediate treatment. Adolescents who had a higher percentage of criminogenic requirements targeted by suitable facilities were less likely to reoffend, regardless of mental health status.  Further research should be focused on the need for ongoing study to accurately comprehend how mental health therapy interacts with criminogenic needs targeted intervention.

Reingle Gonzalez, J. M., Connell, N. M., (December 1, 2014). Mental health of prisoners: Identifying barriers to mental health treatment and medication continuity. American Journal of Public Health, 104 (12), 2328-2333. doi: 10. 2105/AJPH. 2014. 302043

Mental health screening and continuity of medication were assessed in a nationally representative sample of 18, 185 United States prisoners. The information used in the study was used from the 2004 State and Federal Correctional Facilities Survey.  Twenty-six percent of the inmates from the sample were diagnosed with a mental health disorder at some point of their lifetime.  About eighteen percent of inmates took medication for their condition/conditions on admission to prison.  In prison, More than fifty percent of prisoners who received medicine for mental health conditions at the time of admission to prison, did not receive medicine once admitted to prison.  Compared to other prisoners with conditions such as anxiety, prisoners with schizophrenia were more likely to receive medication. Screening procedures that do not result in treatment by a medical professional in prison, causes a lack of treatment continuity.  This treatment discontinuity has the capacity to effect on release from prison both the expense of recurrence and health care.

Swank, J. M., Gagnon, J. C., (June 4, 2016). Mental health services in juvenile correctional facilities: A national survey of clinical staff. Journal of Child Family Studies, 25, 2862-2872. doi: 10. 1007/s10826-016-0436-3

This research determined the use of best practices within juvenile correctional facilities to provide mental health services to youth.  Ninety-four employees were used in a domestic sample for the study.  There were no statistically important differences between participants and non-respondents for facilities level of safety, sex served, or census area. Mental health programming, individual, group, and family counseling services and case management services were examined across the facility using evidenced-based interventions. The participants of the employees, the perceived service quality, and obstacles to interventions were studied and the results concluded that evidence-based interventions were used but other interventions were used as well, that may not have had empirical assistance.  Thus, the conclusion was that about half of the participants used compulsory person and group counseling and less than a third of the participants used family counseling.  This resulted multiple techniques that were used to assess the efficiency of mental health services were also revealed by clinical employees.

Underwood, L. A., Washington, A., (February 18, 2016). Mental illness and juvenile offenders. International Journal of Environmental Research and Public Health, 13 (2), 228-242. doi: 10. 3390/ijerph13020228

According to this study, the reliance on the juvenile justice system has risen over the previous decade to satisfy the requirements of juvenile offenders with mental health issues. Because of this trend, this study was carried out with diverse achievement on the efficacy of multiple intervention and therapy programs and/or approaches.  The recent literature indicated that a active, vigorous care scheme is required to go beyond simple therapy within the juvenile justice system would produce the best results.  This result is because of the interconnected issues involving youth in the juvenile justice system with mental health issues.  The researchers of this study focused on the extent to which delinquency and mental illness co-occur; why treatment for these individuals requires a system of care; intervention models; and the juvenile justice systems role in providing mental health services to delinquent youth.

## References

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