Mental Illness in US Jails:  
*Diverting the nonviolent, low-level offender*

Research Brief

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Jails are becoming America’s new mental hospitals. Increasing numbers of seriously and chronically mentally ill people are detained in US jails each year. As a result, jail facilities are faced with a role that they were neither designed nor staffed to assume. Alarmingly high numbers of severely mentally ill detainees are steadily causing our nation’s jails to replace public mental hospitals as primary mental health service providers.

In the Los Angeles County jail system, 16% of inmates require mental health services on a daily basis, making it de facto the largest mental institution in the country. In several county jails across the country experience similar levels of saturation: Miami’s Dade County jails, for example, house more mentally ill persons than any single institution or hospital in the county. In Travis County jail in Austin, Texas, 300 inmates, or roughly 14% of the general inmate population, have serious psychiatric

Approximately 670,000 mentally ill people are admitted to US jails each year. This is nearly eight times the number of patients admitted to state mental hospitals. Some mentally ill offenders must be held in jail because of the seriousness of their offenses and should receive mental health treatment while incarcerated. Many others who are mentally ill, however, have committed less serious, nonviolent offenses such as disturbing the peace, vagrancy and trespassing. There are at least three reasons why the diversion of these individuals into community-based mental health programs would be preferable to incarceration: 1) community treatment programs provide a public safety benefit by reducing the likelihood that the mentally ill offender will be rearrested, 2) community treatment programs provide a management benefit by enabling jails to operate more efficiently, to focus on keeping dangerous offenders off the streets, and to more effectively ensure the safety of jail staff and other detainees, 3) community treatment programs provide more effective mental health treatment through an array of integrated services that most jails do not offer.

Jails are critical places to address mental health issues because of the sheer number of mentally ill persons behind bars on any given day. Jails serve as the first point of entry into the criminal justice system for nearly 10 million individuals arrested each year, as many as 13% of whom suffer from severe mental disabilities, compared to less than 2% in the general population.

This research brief focuses on the diversion of low-level,
illnesses. This rivals the psychiatric population of Austin State Hospital, which houses 340 patients. 26

In Seattle’s King County jail, approximately 8% of the inmate population is severely mentally ill, making the correctional facility King County’s largest institution for the mentally ill. 27

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Nonviolent mentally ill offenders to treatment programs in the community as an alternative to detention in dangerously overcrowded and understaffed jails. This type of cooperative program between the criminal justice system and the larger mental health care community is a proven way of effectively treating persons with mental illness. It also reduces the administrative burden on jails that are ill-equipped to provide the sophisticated level of mental health services currently expected of them.7

WHY ARE SO MANY SERIOUSLY MENTALLY ILL INDIVIDUALS IN JAILS?

Mentally ill offenders are often arrested because jails lack adequate procedures to divert them into community-based treatment programs, when appropriate. Less than 5% of jails polled nationwide in 1992 had instituted procedures to divert mentally ill inmates from the criminal justice system into the mental health treatment system.8 Where treatment programs do exist in jails, effectiveness is often undermined by inadequate staffing and weak links to the professional mental health community.

Mentally ill offenders are often jailed because community-based treatment programs are either nonexistent, filled to capacity, or inconveniently located. Police report that they often arrest the mentally ill when treatment alternatives would be preferable but are unavailable.9 Consequently, jails often detain mentally ill misdemeanants for months at a time pending the availability of psychiatric examinations, psychiatric beds, or transportation to public psychiatric hospitals, which, in rural communities, can be far from jail facilities.10 In 1992, due to the lack of psychiatric services, beds, or transportation to a hospital, a shocking 29% of jails surveyed reported to have incarcerated mentally ill persons against whom no criminal charges were filed.11

Mentally ill offenders are often jailed for relatively minor offenses. Jail officials affirm that seriously mentally ill individuals are commonly jailed for relatively minor breaches of the law, such as vagrancy, trespassing, disorderly conduct, alcohol-related charges, or failing to pay for a meal.

When it is mental illness and not criminal intent that underlies a petty criminal act, treatment in mental health programs is demonstrably more effective at reducing recidivism than a sentence to jail.

WHAT DOES CORRECTIONS THINK OF MENTAL HEALTH SERVICES?
Most criminal justice administrators report that jail programs are ill-equipped to respond effectively to the needs of mentally ill offenders. Jail administrators and other corrections officials cite mental health services as one of the most serious institutional service needs. Responding to a survey of the National Institute of Justice, administrators described their mental health programs as "grossly understaffed" and "in urgent need" of program development and of intervention by mental health organizations.

Sixty-four percent of jail administrators indicated the need for improved medical services for the mentally ill offender.

Eighty-two percent of probation and parole agency directors indicated the need for better access to mental health professionals.

**WHY DIVERT MENTALLY ILL OFFENDERS FROM JAIL?**

Diversion of mentally ill misdemeanants into well-administered community-based programs ensures greater public safety and protection through a combination of specialized mental health treatment and supervision directed toward preventing recidivism.

Appropriate diversion of mentally ill misdemeanants from the criminal justice system helps promote smooth jail operations by reducing overcrowding and disruption in jail.

Diversion of mentally ill misdemeanants into appropriate mental health treatment programs in the community results in a better long-term prognosis for individual offenders and reduces the likelihood of their return to jail for a similar offense.

Diversion of mentally ill misdemeanants into community-based mental health programs ensures specialized care by trained and professional health care staff.

**DOES THE LACK OF MENTAL HEALTH SERVICES CONTRIBUTE TO THE HIGH RATE OF SUICIDE IN JAILS?**

Suicide is one of the 10 leading causes of death in the US. However, it is the leading cause of death in jails. The vast majority of jail suicides occur in the mentally ill population. That the rate of suicide among mentally ill offenders in jail remains much higher than any other inmate category or in the general population underscores the necessity for effective and comprehensive
intervention and prevention policies in corrections.

Suicide in jails is predictable and preventable.

Over 50% of suicides in jails are committed within the first 24 hours of incarceration; 29% are committed within the first three hours.21

Over 95% of those who commit suicide in correctional facilities have a treatable psychiatric illness, 75% communicate their intent in advance, and 30% have made previous attempts.22

The rate of suicide among those inmates who have made previous attempts is more than 100 times the rate in the general population.23

Jail inmates who are mentally ill are at a disturbingly high risk for suicide. The successful prevention of suicides in jails depends largely on the ability and willingness of corrections staff and mental health professionals to work together in identifying those at risk and providing the treatment and monitoring necessary to ensure their safety and rehabilitation.

MENTAL ILLNESS IN JAIL...

US jails are troubled by serious overcrowding. Many corrections officials agree that jail facilities are inadequately equipped to handle the growing inmate population, particularly the number of inmates with serious mental illnesses.

Although all competent violators of the law, mentally ill or not, are legally responsible for the crimes they commit, it is clear that incarceration cannot be the only solution. For those mentally ill offenders who commit serious crimes, especially crimes that threaten the safety of the community, jail or other forms of incarceration may be the most appropriate choice. For the low-level offender who is seriously mentally ill, however, incarceration may be inappropriate and unnecessary.

...IS THERE ANOTHER SOLUTION?

A more effective alternative is to divert misdemeanants who are mentally ill from jail to appropriate community-based mental health programs where they can receive treatment and other vital support services. Diversion to treatment centers outside of jail has proven to be highly effective in reducing the likelihood of recidivism.
US jails are not mental health facilities. Let us re-establish our jails as centers of true justice and place mentally ill persons in treatment programs - not behind bars.

REFERENCES


Public Health, 85(12), 1612.


