Correctional Agencies For Mentally Ill Prisoners

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Mental Illness and the Changing Role of Correctional Agencies

Correctional agencies have increasingly provided enough care to the mentally ill persons in prisons today. Initially, mentally ill people were housed in mental hospitals when serving their detainment by late 1959. The number of housed mentally ill criminals, however, dropped by quite a percentage around the 1990s when there was a shift carried out by the United States government to deinstitutionalize individuals who were mentally ill and were serving their time in psychiatric hospitals. This gave an opportunity to some ill persons to live in the community even though monitored by law enforcement officials, but others faced the criminal justice where their fate was decided. A report in the year 2006 shows that approximately 705,600 mentally ill individuals were incarcerated in both the federal prisons and in the local jails (Metzner & Fellner, 2010). Some other research also demonstrates that many individuals with mental illnesses get overrepresented during the trial or, rather, probation level and as well in the parole state more than the general population when estimated. Their rates range almost from two to four times the normal rate for the general population. There has been a rise in the number of mentally ill criminals, and this has strained not only the justice system of the nation but also the correctional system.

Back in the 1970s, the state attempted to close down the mental hospitals run by the state, and they were inspired by the Community Mental Health Act of the year 1963. This was due to a report which showed that mentally ill patients were being abused in the health institutions, and they lacked enough care while at the hospitals. This idea also proposed that funds that were earlier use in these hospitals from the government be redirected to the local communities to help them manage and monitor these patients. However, there was a mass failure in this since the funds were either never released or never reached the local community upon which they were to be delivered. These left the community overwhelmed by the patients and soon afterwards, they were not able to care for the patients anymore.

This even worsened the situation, and the mentally ill persons started roaming in the communities, getting themselves in trouble, which led to a massive arrest and their imprisonment in the local jails. It is a system that is underfunded and understaffed with less training, but the primary focus is incarceration instead of the needs of caring and helping the mentally ill individuals come to terms with their life and health conditions as defined by the mental illness they have.

Incarceration, Treatment Failure, and Community Risk

It is proven that prisoners have mental illnesses in many cases, their conditions worsen when they are in prisons and by the time, they leave the prisons, they even become more harmful to the community being that the incarceration amplifies their conditions. Sincerely speaking, you can imagine someone with a condition like bipolar disorder being put in a restrictive environment and, to make it worse, hostile; it does not match well with his or her conditions, and such a punishment is like the death penalty to him (Metzner, & Fellner, 2010). It is by no chance a bad idea to incarcerate mentally ill people in society. However much they might require detainment, they can be rehabilitated in rehabilitation centres since those are the best places for them and not prisons (Metzner & Fellner, 2010). This new idea or rather solution of locking these people up in prisons has created more problems and ignored the milestone ruling by the Supreme Court.

Hospitals meant for mentally ill persons have been trans-institutionalized in the recent past, and now, instead of having mentally ill people in hospitals, we have them in prisons. This has made life even harder for these patients, and their lives get worse day by day as they stay locked up in cells. A number of them do get themselves withdrawn, while others always find themselves in introverted quarantine used as a protective strategy (Fellner, 2006). Research, which was done by students from the University of Pennsylvania clearly showed that incarceration has a vigorous relation with the consequent mood disorders that relate to how one feels. It is clear that people exposed to concurrent sentences tend to be mistreated.

Ranging from being ignored to being granted restricted freedom within a short duration of time are just but a few inhuman conditions that they are exposed to. Some of their cells are always fitted with tiny windows or, at times, no windows at all, making them poorly ventilated. Over the years, solitary has been used for punishment, but in many prisons across the globe, it secludes prisoners with a mental illness disorder from the other prison demography. The disgusting situation is that many people exposed to solitary do not undergo proper health diagnosis before confinement (Fellner, 2006). Undiagnosed individuals suffering from mental disorders like bipolar may end up getting confined without any hope of getting medication to keep them going. This may result in a worsened condition that may even lead to such individual losing their lives. Moreover, those who may experience problems caused by drug abuse are just perceived to persevere withdrawal from addiction and hence denied controlled acquisition of substances while in prison to facilitate proper recovery.

The study by the National Institute of Mental Health and the United States Department of Education has it that most of our prisons are occupied by a group of individuals who are desperate for a critical diagnosis, exposure to preventive measures and treatment of mental disorders (Fellner, 2006). It is worth noting that this is not the true reflection of what is going on in our prisons. Firsts and foremost, the police officers and the correctional officers are not exposed to any special training on the most relevant ways to handle prisoners suffering from mental disorders. Instead, they are the people

mishandling such individuals and exposing them to all forms of hardships. It is, therefore, necessary for such programs to be launched into being to expose the police and correctional officers handle and manage individuals suffering from serious mental illnesses.

Solitary Confinement and the Need for Humane Care

It has come out clearly that solitary confinement in managing individuals with a mental disorder is the worst mitigation to finding a solution to this problem. However much it may be regarded as the best method in the United States, everyone should understand that it is inhuman. It is the most rigorous and formidable form of handling anyone distressed by a mental illness condition. The aftermath of this form of treatment becomes significant after leaving prison. The condition worsens with unendurable symptoms. The uncivilized act of denying prisoners diagnosis and medications should no longer be in the current society set-up.

Generally, the mental health care system in the United States has failed in delivering its services to patients with mental disorders and extending its services to the prisons to reach individuals under confinement (Fellner, 2006). This is due to ignorance by the federal government to improve the mental health care system by taking charge of the responsibility from the states as it had promised before. The outcome is that adverse effects of mental disorders on the individual ill of such conditions are on the verge of increasing. The government has failed to establish rehabilitation facilities to handle criminals found guilty of criminal offences since the solitary mechanism has remained the default mechanism through which the government uses to manage individuals suffering from an ill mental disorder.

Precisely, the best method to contain this situation is to devolve back mental health care system as a responsibility of individual states. I therefore strongly believe that with proper funding from the federal government, the states can see the country through this distressful treatment of individuals who have a mental disorder. This can be achieved through establishing a mental health care system complementing rehabilitation programs for such individuals. Moreover, American citizens must put up with a mental disorder. We must all extend our love and compassion to individuals who have a mental illness. In a brotherly way, we should learn how to accommodate and handle them. Stigmatization of ex-prisoners should not exist in our places of the job. Neither should it be a barrier preventing such individuals from securing job positions. Failure to comply with this will let in a new dawn for the crime. Above all, we need to criticize the federal government for its failure to establish a comprehensive mental health care system to handle and manage casualties of mental disorders effectively.

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