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## Going to Jail to Receive Mental Healthcare?

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## Going to Jail to Receive Mental Healthcare?

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Photo credit: Brook Ward

If you or a family member needed mental health support, where would you go? If you are living paycheck to paycheck in the pricey San Francisco Bay Area, how would you pay for mental health care? It turns out that California prisons and county jails are now the largest providers of mental health care in the state. San Francisco jails are the largest mental health facility in the county, and at any given time, 35 to 40 percent of San Francisco inmates are being treated for a mental illness—a trend that is repeated across Bay Area correctional systems.

America's jails and prisons are increasingly filled with individuals with mental illness—close to 2 million, in fact, are booked into jails each year. We have a mental health and a mass incarceration crisis upon us, and California has the unique opportunity to serve as a model for how to reform these two overburdened systems nationally.

From 2007 to 2012, California state prisons saw a 19 to 25 percent increase in incarcerated people with mental illness. In fact, nearly 15% of men and 30% of women prisoners have a serious mental health condition, and they often do not get the treatment they need, which can worsen their symptoms.

But is providing mental health care in prison enough? The suicide rate in California prisons is twice the national average, and in 2011 the U.S. Supreme Court found that the treatment of mentally ill individuals in California's prisons was "cruel and unusual." Exacerbating these problems, efforts to address overcrowding in California prisons has created a situation where thousands of incarcerated individuals are being transferred to smaller county jails, which are often not adequately staffed to provide care for mental illness.

So how does California address the intertwined issues of affordable mental health care and mass incarceration? California's political history can offer some explanation for the present shortfalls in addressing problems in our mental health system. When former governor of California, Ronald Reagan turned out more than half of the state's mental health hospital patients and passed a law that abolished involuntary hospitalization, a national trend of deinstitutionalization followed. When he later became President, he made cuts to federal funding for community mental health centers, which eliminated many services for people who were struggling with mental illness.

To be sure, there were significant problems with state psychiatric hospitals at that time, including inhumane and even criminal treatment of people who were struggling. Yet, as government is apt to do, sweeping changes were made without considering the unintended consequences. In this case, a significant shortfall of mental health services left jails and prisons as the primary place for people with severe mental illness. While California played a role in this complex and often dreadful union of incarceration and mental health, we can lead the way in addressing these shortcomings in two ways: first by improving mental health care in jails and prisons and second by increasing the availability of affordable and accessible community mental health facilities.

While jails should not be the primary source of mental health care, they should still provide comprehensive care for individuals while they are incarcerated, aligned with the spirit of the "Rehabilitation" part of Corrections and Rehabilitation. Anyone who has worked in correctional settings knows that incarcerated individuals often have histories of trauma and/or substance abuse as well as other mental health concerns. We must fully address these concerns, if we expect to disrupt the cycle of incarceration. Programs like <a href="Choices">Choices</a> in San Mateo County provide a rare glimpse into what a comprehensive treatment program can look in a correctional setting. This program offers substance abuse treatment and individual therapy to help men and women address some of the underlying issues that contributed to their incarceration

and to support their ability to be successful upon release. We also need to invest more money in community mental health services and to support individuals once they are out of custody. Additionally, comprehensive and accessible community mental health is vital in any efforts to prevent contact with the criminal justice system in the first place.

The Bay Area community must exert political pressure on cities to invest in diversion programs and mental health services before they invest in building new jails. The power of these movements can be seen by looking at progress that has been made. In 2017 <a href="San Francisco relinquished">San Francisco relinquished</a> an \$80 million grant to replace a seismically unsafe jail with a new 384-bed facility due to community activists protesting and demanding the investment into diversion programs. Other social movements, including the <a href="No New Jail Coalition">No New Jail Coalition</a>, has pushed cities to invest in more psychiatric beds, community-based mental health support, and housing rather than jails.

If prioritizing mental health is not strong enough to spark a political desire for change, we can also appeal to the economic realities. Jailing individuals with mental illness creates significant burdens on law enforcement, and on state, and local budgets and does not protect the public. It would be much more cost effective to provide mental health services that allow people the opportunity to more fully participate in and contribute to their communities.

Understanding how incarceration has become intertwined with treating mental illness in California can be a cautionary tale rest of the nation. We can also be the example that leads the nation to reconsider these practices, and to move towards providing preventative treatment before incarceration.

Lisa De La Rue examines the intersection of trauma and contact with judicial and correctional systems, with a focus on examining the victim and offender overlap. She advocates for increased access to prevention and intervention services as a way to prevent incarceration and punitive discipline. She recently co-authored an article with A.J. Forber-Pratt entitled "When Gangs Are in Schools: Expectations for Administration and Challenges for Youth," in The Wiley Handbook on Violence in Education: Forms, Factors, and Preventions.