

# Conversations Between the Bars: The Criminal Treatment of Mental Illness in one Arizona Jail

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## Introduction

Three times more people with serious mental illnesses (SMI) are in American jails and prisons than in hospitals. This ratio balloons to almost ten times more in Arizona. Our state is among the worst for access to mental health care, as well as having one of the highest incarceration rates. However, since jails are meant to punish criminals rather than to care for patients, they often lack sufficient resources to effectively handle mentally ill offenders.

Federal Bureau of Justice Statistics (BJS) research shows that inmates with mental illnesses are likely to lack proper treatment, tend to become repeat offenders, and become victims of assault. However, jails are closed worlds where the treatment of inmates is often concealed from the rest of the public. The current study builds on existing literature by using qualitative methods to understand the lives that make up the data and changes that should be implemented to protect both the residents and the officers who live and work in custodial settings.

## Research Questions

**Central Question:** What are the experiences of individuals with mental illness in the Coconino County Jail?

- What challenges do they encounter in regards to conditions and treatment accessibility while in the detention facility and transitioning out?
- What are the experiences of detention staff when working with this population in the local jail?

## Methodology

**Sample:** Four formerly incarcerated individuals and two staff who worked in detention at the local county jail participated in this study. They were given a \$20 Target gift card in compensation for their time.

**Methods:** Individual semi-structured interviews were used to gain a deeper understanding of participants' experiences with mental health and substance use issues in jail. Interviews lasted at least an hour and were audio recorded. A thematic content analysis was conducted on the transcriptions of the interviews.

## Primary Preliminary Findings

### Theme One: Comorbidity of mental health & substance abuse disorders

- Most people in the jail have mental health and/or substance use disorders; all formerly incarcerated participants had both
- Many have suffered through trauma and used substances to self-medicate; three out of four participants had PTSD
- People with SMI who are a danger to themselves or others are locked in small individual cells

*"Very few people come into our facility sober, period."* — Detention Officer

*"People who are too dangerous to go to a hospital will end up in the jail in these observation pods, where it's basically a room not much bigger than this, with a small window, and a concrete bench. And they're stuck in that little cell, all day long, every day... screaming all day."* — Formerly incarcerated person

### Theme Two: There are barriers to treatment inside the jail

- Only one psychiatrist available through video call upon request
- Most reported the psychiatrist denying treatment due to liability
- Staff face barriers with inmates refusing to take medication
- Treatment programs often do not reach severe SMI/substance abuse population because they are unable to function in groups

*"Sometimes, they're either so far gone or they're so angry about something and it's not making sense in their own head. We say, 'hey do you want your medication today?' And they just fly off the rails, refuse to be taken care of, and then they get worse and worse."* — Detention Officer

### Theme Three: Release from jail — challenges surviving

- Many lose houses, jobs, and support systems while in jail
- Most are released without resources or shelter locations
- Mental health/substance use treatment is not easily accessible
- Some effective reintegration programs in jail upon request, but may not reach those who are mentally unable to seek them

*"Everyday people would talk about being released, and none of them had anywhere to go...a lot of guys had been in there so long, they had lost their house cause they couldn't pay rent. They don't have their job...so they have absolutely nothing."* — Formerly incarcerated individual

*"I didn't even have a jacket on and it was snowing outside. I told them, 'I don't have a phone, I don't have anything.' And they were like, 'see ya.'"* — Formerly incarcerated person

### Theme Four: The revolving door and issues in the community

- Our community is not meeting fundamental human needs → cycle of homelessness, substance abuse, and returning to jail
- Not enough long-term community mental health care & resources
- People often leave jail in a worse condition than when they arrived
- Changes needed not only in jails, but within the broader community

*"That area [that houses the severely mentally ill] is the biggest mental health care facility in Northern Arizona. That jail dorm is a...pillar of our community and our society's failure in actually helping people."* — Detention Officer

*"We want to say that there's rehabilitation involved, but they're going out [of jail] more of a criminal than what they went in."* — Formerly incarcerated person

### Theme Five: Suggested changes in the jail and community

- More thorough mental health screening at intake
- More mental health facilities equipped to provide long-term treatment and monitoring for severe mental illness
- On-site mental health professional(s) in the jail
- A release brochure with local resources (shelters and treatment)
- The option of seeing a social worker prior to release
- Shelter for formerly incarcerated individuals that accepts people 24/7, with treatment and employment services
- More mandatory staff conversations/trainings about mental health

*"If the resources and hospitals exist, if there's somewhere they can go be taken care of, have the therapy, the medication, rehab, then they won't be trespassing for food or digging in trash cans. They won't be fighting for what they think is survival. They'll be somewhere safe."* — Formerly incarcerated person

*"We don't need more resources for mental health subject offenders. We need more resources for people that have mental health problems, period."* — Detention Officer

### Theme Six: COVID-19 impacts on formerly incarcerated people

- Jail released 50+ non-violent offenders to limit spread of virus due to overcrowding, but there are delays in the court system
- Many are released into overcrowded homeless shelters
- Because employment opportunities are limited, many are stuck

*"Everything's crazy right now with this coronavirus stuff... I don't want to end up signing up for Front Door and then getting a house and not having a way to pay for it. It's like everything is on pause right now."* — Formerly incarcerated person

## Challenges Conducting Jail Research

**Two of the most closed worlds:** the mental health care and correctional systems in the U.S.

**Incarcerated individuals are a vulnerable population**

- Historical exploitation of prisoners in research
- Highly protected by IRB

**Jails are resistant to research within the walls**

- Fear of negative public exposure and lawsuits

**Recruitment is challenging**

- After a month, the Lieutenant took down my recruitment flyer in the staff room and warned them all to "stay guarded" about jail policies and procedures
- Reaching the formerly incarcerated population is difficult → it takes time to build connections within the community

## Discussion

**Limitations:**

- Small sample size (to date)
- Results are not generalizable to other jails and prisons, as there is considerable variation in correctional characteristics depending on size and funding.
- However, given that this is a qualitative study, it is more focused on the depth of the data than quantity.

**Future Directions:**

- To protect the health and safety of the participants during the COVID-19 pandemic, this study was put on pause.
- Once it commences, I plan to add questions about the impacts of COVID-19 on this population
- This research is extraordinarily important: increase in people being released from the jail, heightened risk of exposure, and limited resources available for this population

## References

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