

**THE CRIMINALIZATION  
OF MENTAL ILLNESS**



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CRISIS & OPPORTUNITY  
FOR THE JUSTICE SYSTEM

Risdon N. Slate  
and  
W. Wesley Johnson

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# DEDICATION

To Claudia and Virginia Slate for your love and support

and

To Dean Shoe for helping me find my voice

and

To Ron Vogel for assisting me in finding the confidence to use it

and

To every person who has ever been knocked down

and

To those, such as Ron Hudson, who have extended a hand to help them up.

Also

To Candy and Arretta Johnson

for riding the roller coaster of life with me and doing it in style

and

To Joe Jacoby, Ben Wright, and Dennis Longmire

who opened doors for me and changed my life

and

To my brothers, Barry and Gerrald and my youngest brother Alan,

who tried his best to fight the demons that haunted his life

and

To the many caring professionals in the mental health and criminal justice systems that are dedicated to people that are troubled by their own thoughts.



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# FOREWORD

*By Henry J. Steadman, Ph.D.*

In 2008, one in every 100 Americans was in jail or prison. In recent years, U.S. jails booked in approximately 14 million people. Just about five million U.S. citizens were under community correctional supervision in the last U.S. Bureau of Justice Statistics census.

Within these groups, rates of major depression are four times higher than national general population rates for men and 10 times higher for women. For schizophrenia, these rates for justice-involved people are two to three times higher and 10 times higher for bipolar disorders. Further, 75-80% of all these people with serious mental illness have co-occurring substance use disorders.

So what are we going to do? What will provide the groundwork to develop the political will, to equip advocates for the fight, and to frame strategies for adequate response? The answer lies in the content of this comprehensive and timely book by Drs. Slate and Johnson. As the 1999 Surgeon General's Report on Mental Health clearly demonstrated, we have many technologies to effectively respond to the clinical conditions in question. We know much about what makes people better. Getting it to the people in need in a timely manner is what we are bad about.

A roadmap of where we have been and where we need to get is embedded in this book. There are no simple solutions. Law enforcement can be less confrontational and divert to community-based alternatives. Mental health courts can facilitate the reduction of unnecessary jail detentions. Discharge planning can be implemented to help with continuity of care. However, unless there is a greater commitment to provide the comprehensive and appropriate services these justice-involved people need in the community, all the CIT programs, mental health courts, and discharge planning initiatives will be in vain.

With the framework this book provides, the needs are clear. How we got here is apparent. The complexities of the solutions are starkly visible. In the face of these complexities, we cannot afford to be overwhelmed by the challenges. We must move forward. But how?

Again, the thinking encompassed here blazes the way. Responding to headline events makes for bad public policy. Instead, "... policymakers need to be provided not only with the reasons for implementing policies but also with the numbers to justify their existence" (Slate & Johnson, p. 369). The exceptional, high profile event, while often a catalyst for political action, usually posits the wrong premise on which to build effective policy and practice. The more informed approach, the one taken here by Slate and Johnson, is to look at history and recent data to move towards the thoughtful resolution of competing ideas. As Slate and Johnson emphasize, "... the cost to 'do it right' will be enormous, but the cost of not doing so, both in terms of human suffering and financially, is even greater" (p. 370).

In the end, doing right for justice-involved persons with mental illness, for the administrators of the systems of care and detention, for the caring clinicians who are all too often overwhelmed by inadequate resources, and for the general public is made much more likely by an understanding of these issues as laid out in this book. What is "right" really does benefit all the relevant parties; this is eminently clear from the ideas and information included in this book. Kudos!

# PREFACE

Wesley Johnson and Risdon Slate met in a South Carolina prison in 1985. Wes was a professor bringing students for a tour, and Ris was the prison administrator who served as tour guide. It would be some nine years later in a strip cell in the Richland County South Carolina Jail that the seeds for this book would be planted.

For a myriad of reasons the criminal justice system has become the de facto mental health system, with the three largest inpatient psychiatric institutions in America being jails - not hospitals. This book explores how and why this is the case. Too often crises have driven missives in the interface between the mental health and criminal justice systems. Waiting for sensationalized cases to influence policy can lead to impulsively enacted and misguided interventions.

Persons with mental illnesses are disproportionately coming into contact with the criminal justice system, a system that has been largely ill equipped to deal with such individuals. Many in both the mental health and criminal justice systems don't see it as their job or responsibility to intervene. However, today some criminal justice practitioners, often faced with inadequate treatment resources, are taking the lead in seeking innovative alternatives for linking justice involved persons with mental illnesses to mental health treatment. These initiatives are taking place in both pre and post booking formats and may engage law enforcement, the courts, corrections, and/or probation/parole authorities in collaborative partnerships that often involve persons with mental illnesses, their family members, and mental health treatment providers. Various examples are presented in this book.

Topics covered in the book run the gamut from specialized law enforcement responses, to mental health courts, to jails and prisons, to discharge planning, diversion, re-entry, and outpatient commitment. An examination of criminal justice practitioners who become mentally ill is also considered, and the standard topics of insanity and competency are addressed. The balance between preserving civil liberties and maintaining public safety is emphasized. The need

for adequate mental health treatment services and the compilation of outcome data to establish evidence-based practices while maintaining allegiance to the concept of therapeutic jurisprudence is stressed. Real-life illustrative vignettes from professionals engaged in dispensing justice to persons with mental illnesses are included throughout.

It is our belief that this book can serve a multitude of purposes. We hope it educates college students who may one day act as positive change agents in this interface of the mental health and criminal justice systems. We also believe this book can be of benefit to training academies, criminal justice practitioners and mental health providers in identifying and assessing what feasible alternatives are in existence and how to develop comprehensive services. This book also provides guidance for advocates, persons with mental illnesses and their family members to use in their advocacy. Lastly, this book should be used to inform policymakers.

*Risdon N. Slate*  
*W. Wesley Johnson*



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We are pleased to have expert contributions by distinguished professionals, as one chapter was written by Ron Honberg, and Dick Lamb, Anand Pandya, and Suzanne Vogel-Scibilia contributed another chapter. Also, various professionals when asked submitted significant input regarding their personal experiences with the interface of the mental health and criminal justice systems, and we are pleased to include these offerings from Sam Cochran, Ginger Lerner-Wren, Stephanie Rhoades, Angela Cowden, Mark Heath, Michele Saunders, Barbara Lewis, Tony Rolón, John Thomason, Paul Michaud, Kendall Wiley,

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