When the Mentally Ill Encounter the Criminal Justice System

Summarized by Thomas T. Thomas

For varying reasons our mentally ill family members and friends may be approached by the police, arrested, and jailed. This process can be both frightening and disturbing for the client, and stressful for those who live with them. To help our members gain useful knowledge about the criminal justice system, the May 24 meeting heard from four experts in the process.

Irene Raby, PhD, MFCC, is Senior Mental Health Clinician with the Berkeley Mental Health Court Program. This program basically deals with people in the stages between arrest and sentencing. It has six parts, which Raby described.

Alcohol and Drug Group treats 25 to 30 men and women at a time with ten weekly sessions of about an hour and a half each. All of the participants have problems with substance abuse—often of a life-threatening nature—and some also have mental illness. The group considers a successful outcome to be placement in a residence or participation in a 12-step program.

Domestic Violence Group serves persons referred from the court. "The Berkeley court will not defer a defendant in a domestic violence case even if the victim doesn't press charges," Raby said. *Deferral* is a process whereby the court can recognize the defendant's mental illness and drop, or defer, minor charges such as a misdemeanor.

Mental Health Counseling evaluates and assigns a clinician to work with mentally disabled persons in the criminal justice system. Most people in the program do well, acquiring a stable living situation, usually on medication, with a low recidivism rate.

Medication provides a psychiatrist to make sure the prescribed medications are working.

South Berkeley Improvement Program is geared to low-income and African-American clients and provides programs on drug abuse, parenting, and schooling.

Indirect Services to the Court offers assessment of defendants and family consulting.

"Our program's accessibility means an increased likelihood that people under referral will get and stay on treatment," Raby said. The program's services are available to Berkeley-Albany residents, although it will sometimes treat clients from Oakland.

Chuck Meyers, PhD, is Chief of Alameda County Criminal Justice Programs. His group deals with people who are in jail. "We usually get people with minor infractions such as misdemeanors but with severe mental illness," he said.

The outpatient clinic in the Alameda County Jail will evaluate, treat, medicate, and monitor these clients. "We don't force medication on them," Meyers said, "but often they will take their meds in jail when they won't out on the street."

This helps to stabilize the client and prepare him or her for a treatment program upon release. The group also has a diversion component, in which a staff member arranges a "soft landing" for the inmate's release.

The North County Jail in Oakland provides basically emergency services, he said, while Santa Rita has 300 to 400 mentally ill inmates at any one time.

Myra Sherman, LCSW and MSW, is Psychiatric Social Worker Supervisor with Mental Health Criminal Justice Programs in Contra Costa County. She serves the jails in Martinez, Richmond, and Clayton—although at this time only Martinez has staffing for mental health services. They plan to move these services to the new medium-security facility in Richmond.

"Basically, if a person answers yes to any of the mental health questions at the booking," she said, "they will get evaluated and treated." Also, anyone who has been getting medications and treatment out in the community will get them jail.

She said that over the years her program has noticed several changes. Among them, that clients with mental health problems are now spending a longer time in jail. "Also, the people who get treatment in jail seem to be a separate group from those who are served in the community," Sherman said. Her program is also sending more people to Atascadero State Hospital, with more pleas of not guilty by reason of insanity.

Peter LaValle, MD, is Psychiatrist for the Inpatient Unit at North Alameda County Jail in Oakland. His program is administered by Prison Health Services, a private, for-profit company. It provides one psychiatrist and a staff of nurses and technicians to serve mentally ill inmates.

"We're not part of the jail," he said, "but a separate 'bubble' inside it, with guards on call if we need them."

His program gets 25 to 30 admissions a month, and the average stay is about twelve days. The program returns about half of its patients to the jail, with the rest being sent elsewhere for treatment.

LaValle said that just about everyone in his "bubble" is on some form of anti-psychotic medication. But he said—and this seemed to be the consensus of the four speakers—that, while most of his patients start off in a bad way, the structure of jail time seems to be helpful in getting them established in a stable pattern.