

Mental health care lacking in state and federal prisons

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A significant portion of state and federal prisoners are not receiving treatment for mental health conditions, according to research by The University of Texas Health Science Center at Houston (UTHealth) School of Public Health. The study was published recently in the *American Journal of Public Health*.

Mental health disorders among prisoners have consistently exceeded rates of disorders in the general population. Twenty six percent of prisoners reported a [mental health](#) diagnosis in the study, compared to 18 percent in the general population in 2012, according to the National Institutes of Health.

State and federal courts mandate that inmates must have access to adequate health services in [prison](#). However, that mandate usually covers only "severe or serious" [mental illnesses](#), according to the paper.

"Individuals with untreated [mental health conditions](#) may be at higher risk for correctional rehabilitation treatment failure and future recidivism after release from prison," said Jennifer Reingle, Ph.D., principal investigator and assistant professor in the Division of Epidemiology, Human Genetics and Environmental Sciences at UTHealth School of Public Health Dallas Regional Campus.

Data was obtained from a 2004 national sample of state and federal prisoners, which included 14,499 participants in state prisons and 3,686 in federal prisons. Participants self-reported whether they had been

taking medication for a mental [health condition](#) upon entering the facility and whether they were still taking medication while in prison, marking treatment continuity.

At the time of admission, 18 percent of each sample was taking medication for a mental health condition, but only 52 percent of that subset of the population in federal prisons and 42 percent in state prisons received medication during their sentence.

Depression was the most prevalent mental health condition, reported by 20 percent of inmates, followed by mania, anxiety and post-traumatic stress disorder.

"Screening tools are not consistent across prisons and inmates could be diagnosed with different conditions or not diagnosed at all when they get transferred to a new location," said Reingle. "A standardized mental health screening process could benefit the inmates and the prison system as a whole."

This study also found evidence of racial disparities in medication continuity. African American participants were 36 percent more likely than other inmates to have medication continuity in prison, regardless of their diagnosis. African Americans were also more likely to suffer from schizophrenia than Caucasians. Participants with schizophrenia were more than twice as likely to get medication in prison and have treatment continuity.

Since some [mental health disorders](#) such as schizophrenia influence behavior, those prisoners may receive medication to maintain security in the prison environment, Reingle said. Since depression does not pose a significant security risk, it's less likely that depressed prisoners will be easily identified and treated, she added.

Previous studies suggest that former offenders who were diagnosed with a mental health condition were 70 percent more likely to return to prison, whereas in the general prison population, the rate is about 50 percent.

In the study, researchers concluded that of the participants who were taking medication for a mental health condition in prison, 61 percent used no other form of treatment. A more holistic, multidimensional approach to treatment, such as counseling or group therapy, may lead to better outcomes and lower recidivism rates in this population, said Reingle.

Provided by University of Texas Health Science Center at Houston

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