

After the Crisis: Criminal Justice System Issue Brief

Issue Overview

Individuals with mental health or substance abuse problems and severe trauma histories are as likely to end up in jail or prison as in the mental health system. In fact, rates of prior trauma are as high or higher for individuals in the criminal justice system as for individuals in the mental health system.¹ Some research has shown the rate of serious mental illness is two to four times higher among prisoners than among those in the general population.² Prevalence rates of mental illness in jails and prisons range from 8 percent to 16 percent.^{3 4 5 6} In addition, co-occurring substance use disorders are common among people with mental illness who are in correctional facilities. Research shows that more than 70 percent of justice-involved individuals with serious mental disorders also have substance abuse problems.

When a disaster strikes, individuals with prior traumatic experiences and mental health concerns and who are involved in the justice system face added stresses, including a lack of information, disconnection, and interrupted or unavailable services. While mental health professionals agree that establishing a sense of normalcy helps traumatized individuals, this is much more difficult to achieve with people in jail and prison. The lack of behavioral health protocols to address the psychological impact of disaster creates a tenuous situation for inmates and staff alike. A number of key areas in emergency preparedness need to be addressed to ensure adequate attention to the stress and trauma experienced by those involved in the justice system.

This resource paper addresses the need for behavioral health programs and services to be included in disaster response plans and protocols, particularly for individuals incarcerated in the criminal justice system.

Key Concerns

- Individuals with mental health or substance abuse problems and severe trauma histories are as likely to end up in jail or prison as in the mental health system. For these individuals, the stress and trauma of disasters can be triggering and re-traumatizing.
- Demand for mental health services in jails or prisons increases following disaster.
- There is no emergency management behavioral health protocol for addressing the psychological impact of a disaster on incarcerated individuals.
- Continuity of care for justice-involved individuals is a concern, as medical records and related treatments may not accompany an inmate during an evacuation, posing a potentially critical setback in treatment at a particularly difficult time.

¹ Jennings, A. (2005). The damaging consequences of violence and trauma: Facts, discussion points, and recommendations for the behavioral health system. Alexandria, VA: National Association of State Mental Health Program Directors.

² Hammet, T. M., Roberts, C., & Kennedy, S. (2001). Health-related issues in prisoner re-entry. *Crime and Delinquency*, *47*(3), 446-461

Abram, K. M., & Teplin, L. A. (1991). Co-occurring disorders among mentally ill jail detainees. *American Psychologist*, *46*(10), 1036-1035.
 Teplin, L. A. (1990). The prevalence of severe mental disorders among urban male detainees: Comparison with the

⁴ Teplin, L. A. (1990). The prevalence of severe mental disorders among urban male detainees: Comparison with the Epidemiologic Catchment Area Program. *American Journal of Public Health, 80*(6), 663-669. ⁵ Teplin, L. A. (1994). Psychiatric and substance abuse disorders among male urban jail detainees. *American Journal*

⁵ Teplin, L. A. (1994). Psychiatric and substance abuse disorders among male urban jail detainees. *American Journal of Public Health*, 84(2), 290-293.

⁶ Teplin, L. A., Abram, K. M., & McClelland, G. M. (1996). Prevalence of psychiatric disorders among incarcerated women. *Archives of General Psychiatry*, *53*, 505-512.

⁷ United States Department of Veterans Affairs. *Effects of traumatic stress in a disaster situation*. Retrieved from http://www.ncptsd.va.gov/facts/disasters/fs_effects_disaster.html.

- Incarcerated individuals are disconnected from the outside world and may not have access to
 information about the disaster at hand and how the situation is affecting their loved ones outside
 the jail or prison. Inmates may also be displaced and disconnected from family members during
 and after disasters.
- Responders work long hours and this puts added strain on staff and families. This stress may adversely affect staff treatment of justice-involved people.
- In communities taking in large numbers of evacuees, demands on criminal justice systems also increase.
- In New Orleans following Hurricane Katrina, there was a breakdown in the criminal justice system that had not been previously anticipated.

Potential Solutions and Recommendations

- Create responder family assistance centers to help individuals manage stress.
- Involve peer representatives on emergency management planning teams for the criminal justice system.
- Encourage states to include a detailed criminal justice annex in their state emergency management plans that can be tailored and replicated by local jurisdictions.
- Identify resources to assist justice-involved individuals.
- Assist inmate evacuees in connecting with family or other supporters.
- Establish a clear evacuation protocol for prisoners.
- Advocate for establishment or continuity of benefits and care.
- Develop protocols to govern re-entry from prison.
- Provide peer-run training for criminal justice professionals, and raise awareness of the behavioral health needs of justice-involved people and related emergency protocols.
- Establish a means for registered sex offenders and parolees to easily register their locations.
- Develop a task force to interview and observe how the New Orleans criminal justice system and inmate population is recovering, and collect data for use in improving emergency preparedness protocols and procedures.

Key Resources

<u>A Guide to Preparing for and Responding to Prison Emergencies</u>, Schwartz, J.A., Barry, C., U.S. Department of Justice, National Institute of Corrections NIC#020293 (June 2005)

American Correctional Association

American Correctional Health Services Association

<u>Association of State Correctional Administrators</u>

Correctional Education Association

National Institute of Corrections

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