

# **Mental Health Reforms ~ Long Overdue**

**By Carl R. ToersBijns**

Arizona lawmakers should heed the warning of the recent Newtown shooting and take immediate proactive steps to avoid such a mass shooting by a mentally ill person in our schools or other public places. The solution to this problem is multi-fold but we must be convinced by now those persons identified to be mentally disabled or ill must receive better treatment and this process must be addressed in a most effective and expedient manner.

This should be identified as a two step healing process and will require legislative reforms in order for the process to be effective and applied to those severely mentally ill persons that live in our communities and prisons, yes prisons.

The first step is the prevention of crime by convicted felons released from prison and not tracked or clinically maintained to be stable law-biding citizens so they don't pose a threat to our communities and their families.

The reason this is the first step is based on the fact legislators have more control over legislation covering convicted felons than free citizens within our community. They can in fact mandate certain procedures and process a convicted mentally ill felon much like they can a sex offender under Megan's Law and require them to register and maintain a treatment plan according to their parole conditions and release.

The second step is to address the void of severely mentally ill persons neglected or not placed within a therapeutic or clinical environment such as private or public funded outpatient treatment clinics, admission to the state hospital or other referred treatment based on professional diagnoses and treatment needs.

This will be more tedious in nature as it requires the commitment of community resources in the mental health field as well as the involvement of many groups of mental health advocate groups may recommend treatment alternatives to the legislative committee that in turn can pass legislation with minimum standards or treatment conditions to the mental health courts or superior courts for behavioral management purposes.

So ask the question – Where should the mentally ill be placed? Today most severely mentally ill persons that run afoul of the law are committed to state prisons. Society has released this responsibility to the prisons rather than mental health courts and every study made has revealed the mentally ill do not belong in prisons just because there is no other place to put them. Severely mentally ill (SMI) persons do not cope or function very well in prisons and often get worse because of lack of mental health services available or provided in most populations.

These SMI persons often become targets or predatory non-mentally ill persons and abused and assaulted repeatedly without any relief or protection from the prison system. Therefore they become more traumatized than when they entered the prison system and less likely to recover from such conditions resulting in suicides and other self-harm acts that puts them in a high risk classification.

There are other negative factors of putting SMI persons into prisons. Arizona has limited bed space for such SMI persons and must choose which SMI are housed within these diminutive

treatment centers and which ones are ignored. It has been projected up to 24 per cent of our prison population is in need for mental health treatment programs, medication and treatment needs.

These persons are subjected to lack of therapeutic environments that fosters healing and stabilization. They will risk being out of compliance of their medication because the side effects are detrimental to their coping skills and never talk to anyone about their choices or decisions thus basically left alone to cope the best they can.

They are often misunderstood by poorly trained correctional staff and classified to be behavioral misfits and placed into segregation for long periods of time while receiving either no treatment at all or worst, chemically restrained by psychotropic drugs that put them in a state of suspended functioning for the remainder of their time to serve until released from prisons.

Then upon their release date they are given a 30 day blister pack of medication and put out in the street or with families that have no means either financially or socially abilities to maintain such medication or treatment needs. One must realize there is strong evidence of the large crossover between mental illness, criminal behaviors, incarceration and treatment.

Today the SMI persons in our community do not received adequate services or treatment as they require thus are stigmatized by society for being abnormal and thereby cast into prisons. This makes it society's problem and often left unresolved because of funding or lack of services available in the demographics involved with such needs. Thus we have to ask a few more questions and glean the answers.

- Why severely mentally ill persons aren't hospitalized or offered outpatient treatment through the mental health court systems?
- Where do these criminal behaviors originate and what preventive measures are available within the community to help them?
- Where do these SMI persons obtain the guns they use to commit crimes and what are the traditional barriers of such activity?
- Are the laws in tune with our socio-political, economic and environmental systems functional or are there dire changes needed?
- What prompts the mass shooting mentality and where are the loopholes, the communication breakdowns and observation reports?
- Who is responsible for this problem; society, policy makers or lawmakers?
- When an SMI commits a crime, what do we do with them and what options does society have to avoid criminalizing the mentally ill persons?
- Can the courts order medication involuntarily and do we need to revisit the forced medication procedures to include more mandatory treatment inside our communities and keep them outside our prisons?

The problem has long been discussed and looked at for the past 40 years. Ever since the courts ruled an SMI had the right to refuse his medication. The problem is then multiplied by the number of mentally ill roaming the streets without medication. Not all are violent in nature but the fact is many do have drug or substance abuse addictions that exasperate their mental illness.

Thus the bottom line was the mentally ill persons were criminalized by their own means and the lack of protection for society by the laws passed and has withstood time after time tests in

court to be upheld. The homeless become victims of crime as they try to survive the environment without their treatment or medication needs.

Not all SMI persons are homeless or have alcohol or drug abuse habits. However, they are all stereotyped and classified into the same group regardless of their social backgrounds. Society has stigmatized them severely. The laws, in order to offset this stigmatizing created another factor that also added to the criminalization of the SMI.

Under the HIPAA Act, the government passed privacy laws restricting medical records. This has severely impaired the process of allowing this vital information to be recorded in the National Criminal Information System for firearms background checks. Thus the passage of the HIPAA Act basically thwarted this information to be made available to law enforcement or the licensed gun dealers that submit the forms for background checks.

Lawmakers must make a decision quickly how to handle the severely mentally ill persons within our community. The current process of sending them to jail or prison is not working and leaves one important fact in place. We would serve ourselves well to re-evaluate the way we deal with the mentally ill from beginning to end. It must make delicate decisions between the right of others and the rights of the SMI when it comes to treatment, incarceration or other preventive measures.

We must not take away someone's freedom just because society doesn't want to deal with the problem and thereby casting them into prisons with an out of sight, out of mind mentality. They are, after serving their time, released back into the community in a worst condition than when they were incarcerated. The cycle returns them to a life of crime, sometimes violent and they are returned to jail and eventually prison.

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