

Prisons as the new mental asylums: the example of Michigan

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Mentally ill people are increasingly being warehoused in the state prison system, according to reports delivered to a conference last month held by the Mental Health Association in Michigan and the Michigan Association for Children with Emotional Disorders.

Speakers at the Detroit-area conference, titled, "In Justice for All: A Conference on Incarceration/Detention of Persons Experiencing Mental Illness or Emotional Disorders," included many advocates who are seeking treatment instead of imprisonment for the mentally ill.

Jeff Gerritt, a journalist for the *Detroit Free Press*, pointed out that in 2000, prison medical care in Michigan was privatized and is run by Correctional Medical Services, a for-profit company.

Last year Gerritt wrote a series of articles on prison healthcare. One of the stories detailed the death in August 2006 of Timothy Souders, 21 years old, sentenced to a state prison in Jackson for shoplifting. Souders, who was mentally ill, died of heat exhaustion and dehydration after being strapped to a concrete table in a cell that reached 106 degrees for most of four days. He did not receive medical or psychiatric care.

Theresa Vaughn did not find out how her son died until she read Gerritt's story two weeks after Timothy's death. Inmates and relatives have no right to access prison medical records.

Gerritt said the deepening state budget crisis was driving efforts in Lansing to review the treatment of mentally ill prisoners. "There's a danger that some legislators will cut mental health programs and education and keep the number of prisons," he said.

Michigan has few residential treatment facilities for the mentally ill, but more prisons than any other state, with 58 prisons and correctional camps. The state has a far higher proportion of its population jailed than any neighboring state in the Great Lakes region. Of Michigan's General Fund, 20 percent or \$1.8 billion is spent on corrections.

Native Americans make up a significant minority in the Michigan prison population. Faye Givens, of American Indian Services, said, "Prisons make it very hard to visit and advocate for the prisoners." She saw one prisoner with an eye taken out who had been left untreated for so long that he was unable to wear a prosthesis.

Another speaker described how her 13-year-old son was charged as an adult, even though he had shown signs of severe mental illness for many years. "Now he is 15 and was just sentenced," she said. "The judge said he can't be declared mentally ill in court until he is an adult. But he can be charged and sentenced as an

adult."

The problem of mental illness in the prison population is nationwide in scope: A September 2006 US Department of Justice study found that more than 50 percent of inmates nationally reported mental health problems during the past year. The rate of reported mental health problems is five times higher in state prisons and jails than in the general population.

Patrick Gardner told the conference about conditions among foster youth in California. Gardner is deputy director of the National Center for Youth Law. He discussed his involvement in several lawsuits to guarantee children access to mental health treatment such as therapeutic foster care and intensive case management. "Children in out-of-home placements or who live below the poverty line are at risk," he said. "They should have a legal entitlement to adequate care."

Studies have found that of the more than 80,000 children in foster care in California, 70 to 80 percent experience a mental health problem. Gardner noted that without adequate community mental health services, the children's mental health deteriorates, and they end up in institutions such as group homes or the juvenile justice system. In addition, 75 percent of those who drop out of school are arrested in five years. Rather than being placed in prison, he proposed, teens should go before courts to get intensive mental health treatment.

The issue of lack of mental health services for children in foster care also came up during a panel discussion on the presentations. Stacy Hickox, a staff attorney with the Michigan Protection and Advocacy Service, referred to a federal lawsuit filed in August 2006 against Michigan's child welfare system by the advocacy group Children's Rights Inc.

There are 19,000 children in the state's child welfare system. The suit charges "serious systemic deficiencies that have been known to defendants for many years, including a lack of basic physical and mental health services for foster children."

Another problem, Hickox said, was that youth don't belong in adult prisons. Every year 1,000 youth under the age of 17 are waived into the adult system and more than half have not committed a crime that would mandate being in adult court. She referred to the conditions at the privately run youth prison in Baldwin, which had to be closed in 2005. It was Michigan's first privately run, for-profit prison. Soon after it opened, parents of teenaged boys convicted as adults alleged that their children had suffered physical, mental and sexual abuse at the maximum-

security prison.

The Michigan Protection and Advocacy Service filed suit against Baldwin's neglect of inmates' physical and mental health and its failure to provide enough trained counselors for those suffering from mental illnesses and developmental disabilities. There was only one full-time social worker for 483 inmates, and low-level offenders were housed with convicted rapists and murderers. These conditions led to a significant increase in attempted suicides.

State Senator Liz Brater, a Democrat from Ann Arbor, spoke to the conference about her bill to create mental health courts for mentally ill individuals charged with petty crimes, to cut down on the number incarcerated. In the unlikely event such legislation was to pass, however, it would greatly increase the demand for community-based mental health services, which are already overwhelmed. Brater asked, "How do we get resources into the mental health system so people can get treatment?" But she did not answer the question, since it would mean a conflict with the priorities of Democratic Governor Jennifer Granholm and the Republicans and Democrats in the state legislature.

Judge Peter Lukevich, director of the Washington State and National Partners in Crisis Program, described the efforts of his coalition, including mental health advocacy groups, community-based mental health services, and professionals working in the criminal justice system, promoting treatment for those who committed crimes while mentally ill. He said it was critical to provide affordable housing and reentry programs to help those who leave prison get community mental health services and jobs.

In the discussion, a psychologist from a county jail told how absurd and destructive criminal justice policies can be. Officials send youthful offenders to boot camp, where inmates are prohibited from taking any medications. The result is that for mentally ill youth, their behavior worsens.

Many speakers at the conference mentioned the Michigan Mental Health Commission report. Governor Granholm established the commission in December 2003 to recommend improvements in the quality of mental health services in the state. In October 2004, the panel released its report and recommendations, which included many laudable goals: "a full array of high-quality mental health treatment, services and supports is accessible to improve the quality of life for individuals with mental illness and their families; no one enters the juvenile and criminal justice system because of inadequate mental health care; recovery is supported by access to integrated mental and physical health care, and housing, education, and employment services."

Needless to say, these goals have no chance of being realized under the profit system and in a social context where mental illness is stigmatized. The Granholm administration has not supported the commission's modest proposal for mental health parity, which would force health insurers to cover mental healthcare at the same level as care for other medical conditions. The United Auto Workers and several other unions have opposed mental health parity since it would mandate corporations spend more on healthcare.

In fact, spending for mental health treatment has been declining

under both Republican and Democratic state governments. Citizens' Research Council of Michigan's figures show the state's General Fund-General Purpose spending between fiscal years 2001 and 2005 dropped \$1.1 billion, or 11 percent. All major categories of GF-GP spending declined except the Department of Corrections. Corrections spending, currently one-fifth of GF spending, increased by \$93 million, 6.3 percent. The Department of Community Health, which provides community mental health programs, saw its GF-GP spending decline by \$137 million. The Department of Human Services lost \$145 million, 12.4 percent.

When state-run mental hospitals were closed beginning in the 1960s, supposedly so that patients could get treatment in the community, there were never adequate programs set up to provide care. States closed the mental hospitals, and cities across the country were flooded with former patients who were not receiving treatment, in many cases living on the streets. As part of "cleaning up" the cities, the mentally ill were thrown into prison by the thousands.

In the past six years, the number of mentally ill inmates, including those with major depression, bipolar disorder and psychotic disorders, has quadrupled, according to the Bureau of Justice Statistics report released in September. The BJS found that the number of prison and jail inmates with mental illness increased from 283,000 in 1998 to an estimated 1.5 million in 2006.

The latest BJS report found that state prisoners with mental illness were twice as likely to have been homeless and twice as likely to have lived in a foster home, agency or institution while growing up as those without mental illness.

These figures show the devastating toll that social problems take on the mental health of the population. Funding for social programs has been slashed, while increasing poverty and unemployment have led to dramatic increases in the numbers of mentally ill people becoming entangled in the criminal justice system and ending up in prison. Capitalism has no need or use for them, so the mentally ill are deemed criminals and locked away without treatment.

While the speakers at the conference advocate removing the mentally ill from prisons, they could offer no perspective on how funding can be obtained to provide necessary treatment and the support services needed, such as jobs and housing.

Humane care for the mentally ill, like many other necessary social services, requires the systematic reorganization of society along socialist lines to put human needs, including the needs of the most vulnerable, ahead of profit considerations.



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