

## Outcome of Mental Health Treatment in Correctional Settings

It is not uncommon for correctional workers to believe that mental health treatment is largely unsuccessful, that mentally ill offenders should be housed in specialized psychiatric units until completion of their sentence, and that soon after their discharge from such units these offenders will be readmitted.

In order to investigate the validity of these beliefs, M.A. Conroy, a researcher and Chief of Forensics at a federal correctional institution in the United States, conducted a two-phase study from November 1980 to May 1987 to assess the functioning of inmates who had been discharged from the Medical Centre for Federal Prisoners (MCFP).

The MCFP, located in Springfield, Missouri, is the largest of three major mental health units for male offenders in the U.S. federal prison system. It houses a 294-bed mental health service, which is divided into two units - a 178-bed acute inpatient unit and a 116-bed out-patient unit. The centre performs forensic assessments for the federal courts and pre-admission evaluations for the federal system.

Offenders sent to the Medical Centre are carefully screened before being admitted to the in-patient treatment unit. For an offender to be admitted, two of the three clinicians performing the evaluation must agree that the offender suffers from a serious mental illness as defined in the *Diagnostic and Statistical Manual of Mental Disorders* (DSM III), that the offender would be amenable to treatment in an in-patient psychiatric setting and that he could not be treated successfully as an out-patient.

Between November 1979 and May 1987, a total of 2,744 offenders were transferred to the MCFP for evaluation, pending possible treatment. Only 47.3% of those referred for psychiatric treatment were admitted to the psychiatric in-patient unit. The other 52.7% were housed in the out-patient unit for 30 days after the initial assessment, in case additional symptoms should surface. If the offenders showed no further mental difficulties by the end of that time, they were transferred back to the prison.

The majority of the offenders admitted to the psychiatric wing of the MCFP were totally non-functional in the regular offender population prior to their transfer. Others who were transferred to the MCFP were described by the referring institution simply as "too bizarre and disruptive to be allowed in population."

At the time of admission, approximately 75% of the offenders were diagnosed as acutely psychotic. The remainder were situationally depressed, anxious, or suffering from organic disorders.

In phase one of Conroy's study, questionnaires were sent to the receiving institution 60 days after an inmate's discharge from the MCFP. Staff were asked to evaluate the offender's mental health stability and his response to the surroundings.

The results of phase one show that over the 7 1/2-year period studied, 78% to 90% of those who were reintegrated into a regular correctional setting after receiving treatment at the MCFP were considered by the staff to be functioning well in the institutional setting. Similarly, according to assessments by the institutional psychologists, 88% to 98% remained mentally stable or improved their mental health

condition.

The second phase of the study, conducted between 1984 and 1987, evaluated the effectiveness of the treatment received at the MCFP inpatient unit. Questionnaires were sent to the prison six months after the offender's discharge. Questions were asked about the offender's job performance, maintenance of quarters, social interaction with other inmates, behavioural records, follow-up care if applicable, and ability to remain in the regular population.

Results for the four-year follow-up period indicate that 87% to 100% of the discharged patients received average or above-average work appraisals; between 90% and 96% were considered average or above average with respect to the tidiness of their cells; 63% to 79% were rated by their case managers as average or above average in social skills; only 8% to 9% were convicted of two or fewer disciplinary offences, with the majority receiving none; and 73.9% of the offenders were undergoing follow-up care in the six months after their discharge.

An interesting observation, especially in view of the fact that most of the offenders treated at the MCFP had been segregated from the rest of the offender population prior to their transfer, is that the majority did not request or require to be isolated in the six months following their discharge from the MCFP

Another interesting finding is that, of the 2,744 offenders transferred for evaluation or treatment at the MCFP during the 7 1/2 years of the study, only 173 were readmitted.

The general findings of the Conroy study indicate that after treatment in a psychiatric facility, offenders suffering from mental and behavioural disorders can benefit further from continued treatment for the remainder of their sentence in a regular correctional setting.

Over the past year, Conroy has extended his research to include a follow-up of offenders who were released to other agencies or to the community after receiving treatment.

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Conroy, M.A. (1990). Mental Health Treatment in the Federal Prison System:An Outcome Study. *Federal Probation*, March, 44-47.