



Introduction

The President's New Freedom Commission (PNFC) called for a transformation of existing mental health care to develop a consumer-centered and recovery-focused system that delivers excellent mental health care. In 2005, Washington State was one of seven states (now expanded to nine) to receive a five-year Mental Health Transformation-State Incentive Grant from the Substance Abuse and Mental Health Services Administration (SAMHSA) to transform services towards that goal.

Many states are now focusing on facilitating the community reintegration of persons from institutions such as jails, psychiatric hospitals and prisons. Washington State's Prison Reentry Initiative, which is well-aligned with the PNFC, is focused on reintegration for persons with mental health and alcohol or drug (AOD) abuse disorders who are released from prison.

This FACT SHEET presents preliminary findings from a study of persons with mental illness and substance abuse disorders released from Washington State Department of Corrections (DOC) facilities.¹ Data from the DOC (1998 – 2006) were linked to the Department of Social and Health Services (DSHS) Research and Data Analysis Consumer Outcomes Database (CODB). Policy implications for Washington State are highlighted.

Findings

A total of 78,224 DOC admissions over eight years (1998 – 2006) were examined: 73.49% represented single admissions and 26.51% were re-admissions. There is significant overlap between the DOC and

DSHS systems, which ranged from about 66% in 1998 to 80% in 2006 (see **Figure 1**).

DOC admissions for persons with mental health and/or AOD disorders are increasing over time but this increase is proportionate to the overall prison population growth (see **Figure 2**). Similarly, DOC releases for those with mental illness and/or AOD disorders are increasing over time (see **Figure 3**).

Approximately 13% (n=139) of person with mental illness (i.e., no co-occurring AOD) were jailed within six months of their DOC release and 21% (n=219) were jailed within 12 months (see **Figure 4**). For those with AOD disorders, 32% (n=10,338) were jailed at six months and 47% (n=15,187) at 12 months. Among those with mental health and AOD disorders, 33% (n=5,568) were jailed at six months and 49% (n=8,242) were jailed at 12 months.

Recommendations

The high degree of overlap among public health and welfare and DOC systems, the increasing trends of DOC admissions and releases of persons with mental health and AOD disorders and the jail recidivism rates of these individuals underscore the need for integration, collaboration and information sharing among public sectors.

The policies and operational and financial barriers that inhibit the cross-system coordination of community reintegration for persons with mental health and AOD disorders who are released from prisons should continue to be addressed. Also, more knowledge needs to be developed about risk factors for recidivism for these individuals and the role of restored benefits, access to housing, supported employment and quality services toward facilitating successful community reintegration.

¹ Details and references available in Morrissey JP, & Cuddeback GS (2008). Using DSHS's Integrated Database to Examine Criminal Justice – Mental Health Issues, Chapel Hill, NC, Cecil G. Sheps Center for Health Services Research, University of North Carolina at Chapel Hill.

Figure 1: DOC – DSHS Admissions
(1998 – 2006)

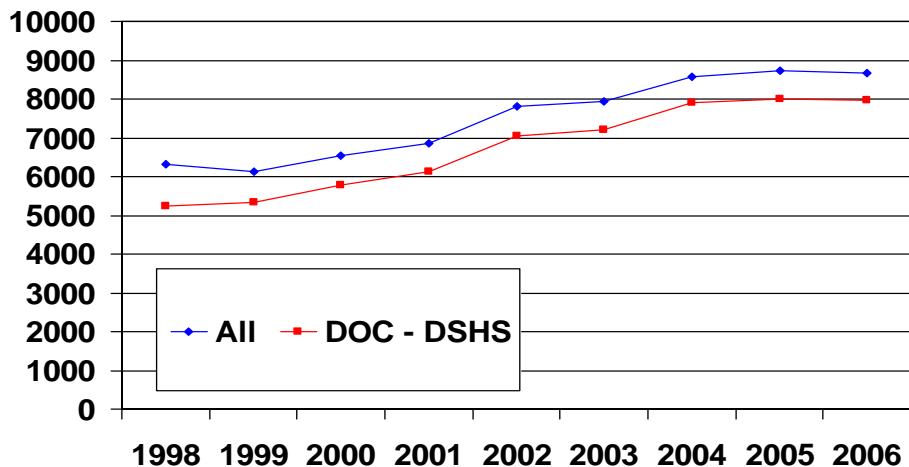


Figure 2: DOC Admissions
(1998 – 2006)

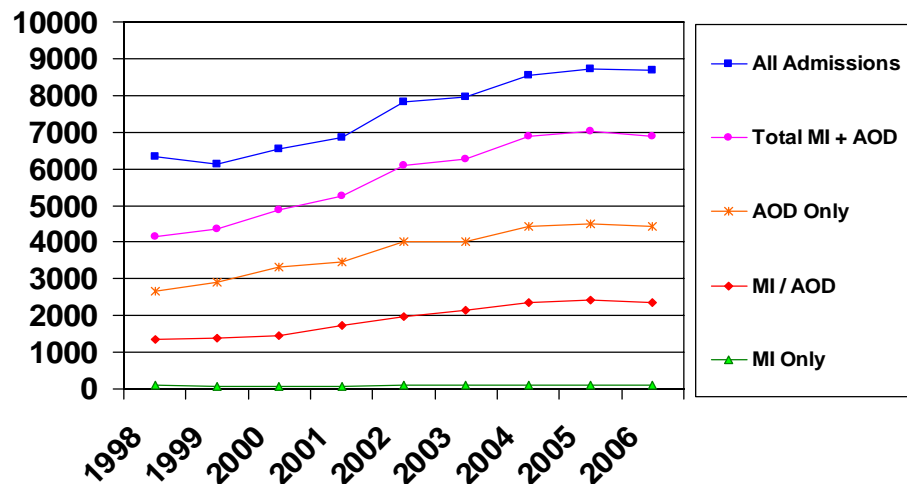


Figure 3: DOC Releases
(1998 – 2006)

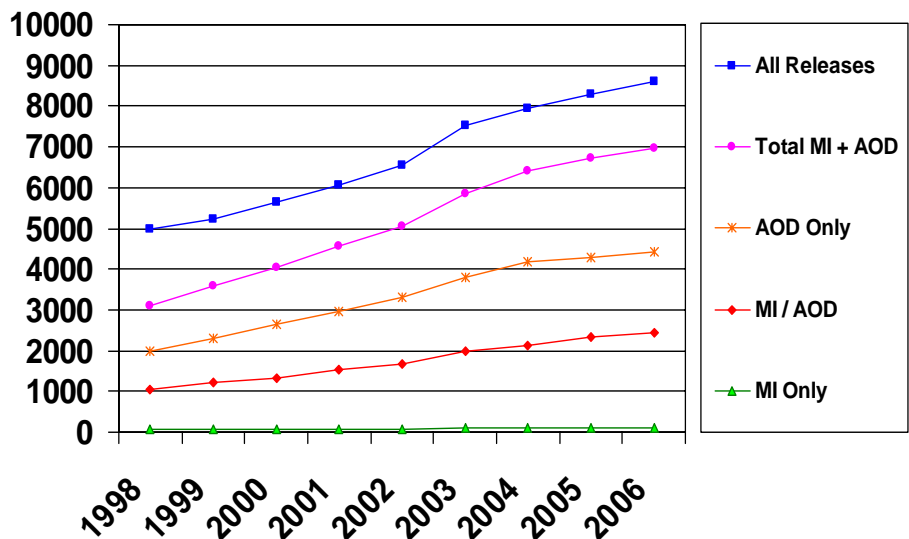


Figure 4: Percent DOC-DSHS Releasees w/Jail
Recidivism

