

5: CHALLENGES OF MENTAL DISORDERS FOR INCARCERATED PEOPLE

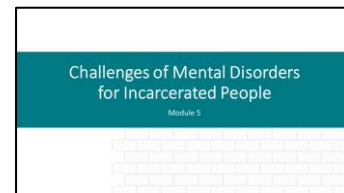
Time:	40 min.
Format:	Lecture, video, discussion
Materials:	PowerPoint, Video: "Meet Raymond Smith," Video: "Raymond Smith: Effectively Observing Life in Prison," Video: "Raymond Smith: Malingering," flip chart and markers
Competencies:	<ul style="list-style-type: none">• Recognize increased problems within correctional facilities for people with mental disorders.• Describe other aspects of correctional facilities that create challenges in responding to people with mental disorders.• Describe the consequences of inadequate responses to incarcerated persons with mental disorders.• Identify concerning behaviors to observe.

Description

This module will explore the specific challenges for people with mental disorders who are incarcerated. It is enriched with videos of a subject matter expert giving some practical advice for identifying mental health concerns in correctional facilities.

During Training

The Correctional Facility's Impact on Mental Health



Set Up

Present lecture:

Correctional facilities are not pleasant. They're meant to be restrictive and controlled environments. Most people find being incarcerated very challenging.



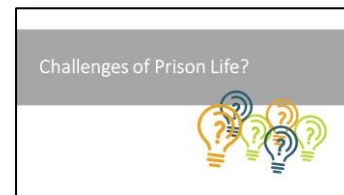
So we rarely expect incarcerated people to behave “normally,” as they would if living in freedom. In a general correctional population, you'll see a number of behaviors that may be byproducts of life inside that, on the outside, might seem abnormal—like trouble sleeping (either too much or too little), anxiety, agitation, and so forth.

But even in this unusual context, there are behaviors that are concerning and may be signs of deeper problems.

Discussion

Facilitate discussion with the following questions:

- What are some aspects of being in a correctional facility that are challenging for most people? (NOTE: Write a list on the board or flip chart.)
- What aspects of life inside may be particularly hard on someone with a mental disorder? (NOTE: Expect to hear or guide them to the following list: prolonged isolation, rigid schedules, strangers, uncertainty, use of restraints, continuous surveillance.)
- What do you think some consequences might be from an inadequate or inappropriate response to an incarcerated person's mental disorder?
 - Specifically, what about consequences to their own safety? To your safety? To the safety of those around them?

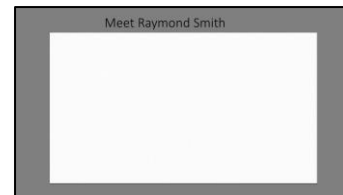


Transition by saying:

Let's meet subject matter expert Raymond Smith and then see what he can offer us about watching people for concerning behaviors.

Video: Raymond Smith

Play the video "Meet Raymond Smith."

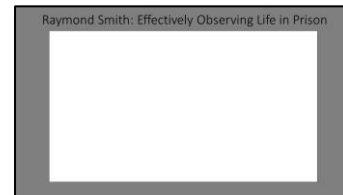


Video: Raymond Smith

Play the video "Raymond Smith: Effectively Observing Life in Prison."

Facilitate the discussion with the following questions:

- In your experience, have you witnessed behavior that disturbed you or other incarcerated people? Give examples.
- What do you think about Mr. Smith's suggestion to intervene early?
- What steps might you take if you saw a change in behavior that might diffuse trouble or allow you to refer a person to emergency care?
- How could you adapt some of his suggestions to your own workplace?



Transition by saying:

Now, let's focus more on behavior, mental disorders, and safety.

Safety and Behavior

Lecture

Present lecture:

Mental disorders can affect a person's self-control. This might include seemingly aggressive gestures, vocalizations, outbursts, and failure to follow directives (e.g., instructions, orders).

And routine disciplinary action may actually aggravate the behaviors instead of ending them.

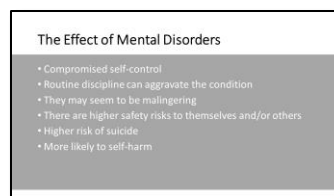
Mental disorders can affect energy and motivation. A person may seem to be “malingering,” which means intentionally producing false or exaggerated symptoms. It may seem that they are deliberately avoiding work or responsibilities, but they may be unable to function in daily life. You may have noticed this in your workplace: people who can't seem to stop acting out and people who can't seem to get up and function.

You can imagine the potential for higher safety risks with these populations—risks to themselves or to others.

In fact, incarcerated people with mental disorders are at higher risk of suicide than people without mental disorders. They may also be more likely to injure themselves, like cutting themselves with sharp objects, starving themselves, or other harmful behaviors.

And they can put others at risk. Disruptive behavior may trigger other incarcerated people to become disorderly as they respond by yelling or striking back.

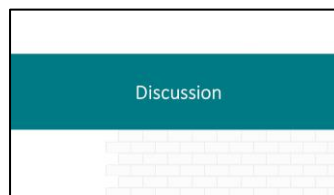
So, what can you do to plan for and maintain safety when things can be unpredictable?



Discussion

Facilitate discussion:

- How do you like things at work to go in order to have a safe shift?
- How might you use some of Mr. Smith's suggestions in order to help a shift go smoothly?



Transition to video by saying:

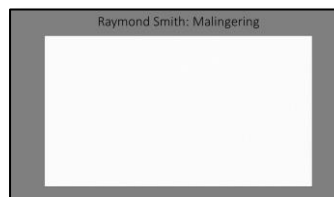
But perhaps you've been fooled by someone malingering and you don't want to be fooled again. Let's see what Mr. Smith suggests about things to look out for.

Video: Raymond Smith

Play the video "Raymond Smith: Malingering."

Facilitate discussion with questions:

- What about people mimicking symptoms to get special treatment—have you thought about this at work?
- What kind of special accommodations have you been asked for? Have you felt they've been legitimate?
- Do you worry about making a mistake, either letting someone off the hook when they're fine, or being too hard on someone who isn't ok?
- How might you approach these requests differently in light of today's information?



SOURCES

Module 5

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