Globally, there has been an increase in reports of individuals in the criminal justice system with mental illnesses, whether they had an illness prior to their incarceration or developed one during their sentence. Much of the research that has been conducted, however, is segmented to a specific period within the incarceration process. This being said, the links between mental illness and incarceration affect individuals before the sentencing, during the time in prison, as well as after the release. Research regarding mental illness and incarceration, therefore, should reflect all points in the process for a more complete look at the structural problems within the prison system.

The American Psychological Association (2014) reports that sixty four percent of all incarcerated individuals—on a local, federal, and state level—in the United States have mental health or behavioral disorders. This is a result of a lack of legal, financial, and political support in regards to mental health services. The high rate of incarcerated persons with mental disorders can also be attributed to systemic factors within prisons that damage prisoners’ mental health.

A country’s history with mental health institutions and psychiatric institutes also plays a large role in the connections between mental illness and incarceration. Due to the lack of financial support from governmental systems, many professionals in psychiatric hospitals report feeling pressured to reduce patients’ lengths of stay, resulting in an increase of individuals with mental disorders entering into the criminal justice system.

Both the United States and Ireland have reported this as an increasing occurrence. The psychiatric beds in Ireland are reported to have fallen to below 20 per 100,000 people since 2011, although the rest of Europe averages over 40 per 100,000 people (Kennedy, 2016). It is
important to consider the collective impact of this data on the observable increase of individuals
with mental illnesses not receiving the proper treatment. Many of these individuals, in turn, enter
the prison system.

Not only are many individuals with mental illnesses incarcerated, but many both with and
without documented behavioral disorders develop them or exacerbate existing disorders as a
result of the structural problems with the criminal justice system. Blitz, Wolff, and Shi (2008)
examined the rates and effects of physical victimization in the prison system on incarcerated
individuals, specifically those with mental illnesses. The research found that male prisoners with
documented mental disorders are 1.6 times more likely to be engaged in inmate-on-inmate
violence and 1.2 times more likely to be involved in staff-on-inmate violence than males without
mental disorders. Female inmates with documented mental disorders, on the other hand, are 1.7
times more likely to report being victims of physical inmate-on-inmate violence than those
without mental disorders (p. 385).

Lastly, experiences of extreme isolation during their prison sentences have also
negatively impacted the mental health of many incarcerated individuals. In Irish prisons,
prisoners are often unable to interact with others within the prisons when placed in solitary
confinement and Care and Supervision Units (CSU), let alone visit with those residing outside.
In the United States, studies show that prisoners with low visitation numbers have higher rates of
misconduct, while incarcerated individuals who receive visitors at the beginning of their
sentence followed by lower to no visits results in even higher rates of misconduct and mental
health problems. In order to more effectively advocate for change within the prison system, it is
important to connect this data to other research regarding the experiences of incarcerated
individuals and present a holistic view of the structures in place.
While much research has been done and there are certain support systems in place, there are not enough holistic support systems for individuals with mental illnesses prior to, during, and after prison sentences. The links between mental illness and incarceration must be addressed at all points in the incarceration process, as they affect incarcerated individuals at all points in their life. This research paper serves to provide a more comprehensive look at the factors and systems in place that increase the likelihood of individuals with mental illnesses to be incarcerated, that exacerbate mental illnesses during an individual’s prison sentence, and that make re-entry more difficult after they have completed their sentences.
References


