Reducing the Prevalence of People with Mental Illnesses in Prisons and Jails

Millions of people with mental illnesses are incarcerated in U.S. prisons and jails. In many counties across the country, jails provide more treatment for people with mental illnesses than community-based mental health providers do. Once incarcerated, people with mental illnesses tend to stay longer in jail and, upon release, have a higher likelihood of being reincarcerated than those without mental illnesses. Due to limited resources and a lack of coordination between corrections, mental health, and other agencies, a significant number of people with mental illnesses will continue to cycle through the criminal justice system, which may lead to negative outcomes for them and their families—as well as a failure to improve public safety.

Almost 2 million times each year, people with serious mental illnesses are booked into county jails.¹

5% of the general population has a serious mental illness.²

17% of people entering jails has a serious mental illness.³

Jails spend 2 to 3 times more on adults with mental illnesses, compared to those without treatment needs.⁴

Addressing Common Misconceptions
The majority of people with mental illnesses are not violent and do not commit crimes. Further, the majority of violent crimes are not committed by people with mental illnesses. But misconceptions about the criminal activity of people with mental illnesses have led to stigmatization.⁵
**What Policymakers Can Do**

1. **Establish an interagency group** with state and local leadership, criminal justice and mental health professionals, people with mental illnesses and their families, and victim advocates to develop systems-level, data-driven plans that can lead to measurable reductions in the number of people with mental illnesses in prisons and jails.

2. **Require criminal justice agencies to report the prevalence rate** of mental illness in jails and prisons, as well as conduct ongoing evaluations of the impact of programs and policies that seek to reduce the number of people with mental illnesses in prisons and jails.

3. **Support policies that facilitate information sharing** between criminal justice and behavioral health agencies.

4. **Designate funding** to incentivize the adoption of policies and programs with the greatest potential for positive outcomes, such as crisis response services, diversion programs, community-based mental health treatment and services, and specialized probation supervision.

5. **Promote the use of uniform, validated screening and assessment** to systematically identify people with mental illnesses upon entry into jails and prisons.

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2. Ibid.

3. Ibid.
