

## Why a Law Is Needed

Dramatizing the results of mental health systems' failure are reports showing that the incidence of mental illness in state prisons and local jails is from three to eight times that in the general population.<sup>1</sup> Corrections officials are overwhelmed. James Turpin, spokesman for the American Correctional Association in Maryland, argues that "correctional officials are not hired to be mental health caseworkers, and its not fair or appropriate to expect them to perform that role."<sup>2</sup>

Reports outlining the connection between mental illness and homelessness are equally sobering. The National Law Center on Homelessness and Poverty reports that approximately 25% of homeless individuals have a mental illness.<sup>3</sup> A 1996 article by researcher Paul Koegel found that "between 20% and 25% of those homeless people studied have at some time experienced severe and often extremely disabling mental illnesses such as schizophrenia and the major affective disorders (clinical depression or bipolar disorder)."<sup>4</sup>

Furthermore, the lack of recovery-oriented mental health services has deprived people with serious mental illnesses of opportunities for self-sufficiency, leading instead to their increased reliance on governmental programs. As the Surgeon General of the United States has pointed out, "people with serious mental illnesses often become dependent on public assistance shortly after their initial hospitalization."<sup>5</sup> An article by del Vecchio, Fricks and Johnson states, "unfortunately, medication-focused funding incentives usually deter systems from promoting employment as a key goal and indicator of recovery."<sup>6</sup> The National Alliance for the Mentally Ill conducted a comprehensive study of the federal-state vocational rehabilitation program and concluded that the system "has, for the most part, been an abject failure as a viable source of vocational rehabilitation services for people with severe mental illness."<sup>7</sup> As a result, the unemployment rate for this population is approximately 90%, exceeding any other group of people with disabilities,<sup>8</sup> although at least 70% of mental health consumers have indicated a desire to work.<sup>9</sup> Compounding the human tragedy, such a level of lost productivity imposes heavy costs on federal and state governments—funds that could be redirected to promoting recovery and economic independence.

Fortunately, such grim statistics are not the end of the story. We know that services directed at helping people achieve independence and employment can alleviate institutionalization, homelessness and involvement with criminal justice. For example, a program in three California counties that provides housing, counseling, drug rehabilitation and assistance in employment to nearly 1,000 homeless mentally ill individuals shows a 75% drop in hospitalization and an 85% reduction in arrests.<sup>10</sup> The National Mental Health Association notes that "just as significant [as the reduction in bad outcomes] are the improvements in the members' living, working and social lives."<sup>11</sup> California recently passed legislation (see Appendix 1) expanding the program.

Although we know that such programs work, states continue to limit services that would promote recovery for people with mental illnesses. Even in California, it is sobering that some 50,000 homeless people with mental illnesses don't have access to any help, and the increased funding for the demonstration projects will still leave many without assistance.<sup>12</sup>

1. Dilton, P.M.(1999). *Mental Health and Treatment of Inmates and Probationers* (Bureau of Justice Statistics, NCJ-174463) Washington D.C. U.S. Department of Justice.
2. American Federation of State, County and Municipal Employees Corrections United, Vol. 6, No. 2, Summer 1999.
3. The center's website reports that between 25% and 30% of the homeless are mentally disabled. See [www.nlchp.org/h&pusa.htm](http://www.nlchp.org/h&pusa.htm).
4. Paul Koegel, *Causes of Homelessness, Homelessness in America* (1996) at 31.
5. U.S. Department of Health and Human Services, *Mental Health: A Report of the Surgeon General*. Rockville, MD (1999) at 293, citing Ho, et al., (1997).
6. del Vecchio, Paolo, Fricks, Larry and J. Rock Johnson, *Issues of Daily Living for Persons with Mental Illness, Psychiatric Rehabilitation Skills*, Vol. 4, No. 3, 410-423 at 413 (2000).
7. Noble, John, Honberg, Ron, Hall, Laura Lee & Laurie Flynn, *National Alliance for the Mentally Ill, A Legacy of Failure: The Inability of the Federal-State Vocational Rehabilitation System to Serve People with Mental Illness* (1997).
8. Id. at 413, citing National Institute on Disability and Rehabilitation Research (1992) for the percentage who are unemployed.
9. Id. at 413, citing Rogers, Danley, & Anthony (1992).
10. Sanders, Jim, *Programs Aid Homeless Mentally Ill: With Pilot Initiatives Boasting Tremendous Successes, Further Funding Is Sought, Sacramento Bee*, April 17, 2001.
11. *Integrated Service Agencies: Building on the California Success*, National Mental Health Association (2000).
12. Sanders, *Sacramento Bee*, note 10.