

Service Needs of Offenders with Co-Occurring Substance Abuse and Mental Health Problems



Nitisha Burkhead, College of Social Work

Introduction

In 2009, over 2 million people were held in the nation's jails, prisons, and community based correctional facilities/CBCFs (Glaze, Lauren, 2010; Scott, et al., 2006). At least 70% of inmates in prison report substance abuse issues (Hartwell, 2004). Furthermore, at least 50% in prison and 64% in jail have reported mental health problems (James & Glaze, 2006). Over a third of prisoners with mental health problems also have a co-occurring substance abuse problem which is disproportionately higher than in the general population (James & Glaze, 2006). Recent studies suggest that the rate for these to co-occur among offenders is 14.5% for men and 31.0% for women. This study focuses on the service needs and barriers experienced by this population upon reentry in the community compared to those with no mental health or substance abuse problems, mental health problems only, and substance abuse only problems, and how the experiences might differ for men and women during reentry.

Research Questions

- (1) Will prisoners with co-occurring substance abuse and mental health problems face more barriers during reentry than those with neither or only one of the problems?
- (2) Will women with co-occurring substance abuse and mental health problems face more barriers than their male counterparts?
- (3) Will prisoners with both problems spend more time incarcerated than the other groups and are they more likely to be on post-release control?

Methods

Participants: A total of 309 incarcerated participants were initially interviewed the month before reentering the community; 22% (n=69) in jail, 48% (n=147) in prison, and 30% (n=92) in CBCFs. Men accounted for 77% (n=54) of participants in jails, 45% (n=66) in prisons, and 59% (n=54) in CBCFs; women represented 23% (n=16) of those in jails, 55% (n=80) in prisons, and 41% (n=37) in CBCFs. All participants were adults aged 18-63 ($M=33.8$, $std. dev.=9.89$ years).

Measures: The initial interview included (1) demographics, (2) questions about mental health and substance abuse, (3) the Alcohol Use Disorders Identification Test (AUDIT-12), and (4) mental health, substance abuse treatment, healthcare and housing barriers. The AUDIT has been shown to be more accurate than the other screening tests because of its sensitivity and specificity in detecting substance use among the mentally ill population (O'Hare, Sherrer, Labutti, Emrick, 2004).

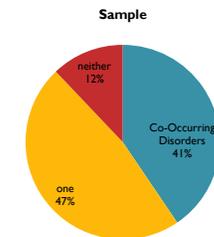
Research Design: The present secondary analyses come from a repeated measures longitudinal study, Project RISE.

Key Variables: The Mental Health Score (MHS) was derived from two questions: a mental health screening question concerning how much help they think they might need for these services, using a scale from 1-5 (Not at all to Extremely much) and a "yes/no" question pertaining to past MH services. These two scores were summed, then recoded as 0 or 1+ (positive for MH problems). The Alcohol and Other Drug Score (AODS) was based on the AUDIT score; individuals with scores ≥ 8 have a potential substance abuse disorder. Therefore, those persons with 8 or higher became a 1 and those with 0-7 became 0 (no AODS). Participants' AODS and MHS scores were then summed, fitting categories of 0 problems, 1 problem (MH or AOD), or 2 problems (dual diagnosis).

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Results



- There were no significant differences on one-way ANOVAs for number of service barriers actually encountered at post-release between individuals with one, both, or neither problem: AOD barriers, Mental Health Barriers, Health Barriers, and Housing Barriers ($p>.05$).
- There were no significant differences for number of service barriers actually encountered at post-release between women and men who experienced co-occurring problems: Mental Health, AOD treatment, Housing and Health barriers ($p>.05$).
- No significant differences were found for types of barriers encountered at post-release between co-occurring men and women: Stigma; Ability to Pay and Readiness to Change ($p>.05$).
- Men with co-occurring problems faced fewer barriers to AOD treatment than anticipated, $M=4.5$, $M=7.7$, respectively: paired $t(12)=-2.82$, $p\leq .01$.
- Persons with neither problem were more likely to be incarcerated for longer periods of time than individuals with one problem or both problems. $F(2,147)=9.189$, $p=.00$; neither problems $M=4.1$ years; one problem $M=1.3$; and both problems $M=.86$.
- Persons with co-occurring problems were more likely to have a higher number of previous jail incarcerations, $F(2,299)=4.239$, $p=.015$, ($M=11.34$) than individuals with one problem ($M=10.20$) or neither problem ($M=4.80$).
- Individuals with one or both problems are more likely than people with neither problem to be expecting mandated treatment at release: $\chi^2(2)=11.65$, $p=.003$.

Implications

Increasing access to substance abuse services in the community appropriately for individuals with both mental health and substance abuse treatment needs is important. Future analyses on the Project RISE data should address types of treatment received at reentry to determine actual patterns of service utilization.