Informing public policy development through research; Investigating who should be in charge of mental health services in prisons?

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Overview

• Research needed to inform a policy direction
• Summary of my research and methods
• Findings and recommendations
• Informing policy analysis and development
Background

• Why pursue this study?

• How was it conducted?

• Why is it of significance?

Background

• Literature Review
  • Human rights lens - Equivalence

Research approach

• Revelatory case study
  • Design, implementation, and results

Results and Recommendations

• Key findings
  • Implications
Literature review
Prisons are our new asylums

Rising prison populations worldwide
Increase of inmates with mental illnesses
Prison administrators are responsible, but lack resources
Alternatives?
Changing profile of prison populations

• Increase of prisoners with mental illnesses and other mental disorders

• Attributed, in part, to impact of policy changes, i.e., deinstitutionalization

• Result: criminalization of persons with mental illnesses
Delivery of prison mental health services

• Prison administrators employed, or have Ks with, health care providers
• New types of regimes introduced in some countries
• Varying models in four of ten Canadian provinces (not NL)
Research focus
Meeting the needs of inmates with mental illnesses

• How should mental health services be organized and delivered to meet inmates’ needs? (Livingston, 2009)

• Viewed through a human rights lens

• The principle of equivalence (Basic Principles for the Treatment of Prisoners, 1990)

• How does one measure equivalence? (Exworthy, Samele, Urquia, & Forrester, 2012)

• Equivalence = Right to health (Commission on Economic, Social, and Cultural Rights, 2000)
Conceptual framework

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Equivalence = the right to health
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- Available
- Accessible
- Acceptable
- Good quality
Population sample

• Prison administrators and staff
• Prison mental health providers
• Community-based organizations
• Mental health care system

• Participants relatively evenly distributed across groups

Data collection

• Document review
• Observations
  - medical clinic
  - committee in APP
• Interviews n = 31
  - one on one (n = 24)
  - focus groups (n = 2)
Understanding the setting

Prison system

- Focus on security
- Paramilitary
- High school with training

Mental health care system

- Focus on patient care
- Multi-disciplinary team work
- Licensed professionals

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Mental health services in APP

• Inter-relationships

Provincial forensic unit

APP Administration

Prison mental health services

Community-based organizations
Findings

Organization and delivery of prison mental health services to best meet the needs of inmates with mental illnesses

Need for health leadership and administration, and
- Health standards
- Integration with health system
- Collaboration with prison administrators
Findings

Weak to limited evidence if meeting the needs of inmates

- Absence of health data base at APP
- Absence of individual health care plans
- Absence of aggregated data re health status of inmates
Findings

Need to invest in correctional officers

- Role in mental health services
- Not prepared for this role
- Need ongoing education
Comparison of practices

Best practices (Livingston, 2009)

Practices at APP

- Multiple assessments
- Limited mental health care services
- Reliance on facilities not designed for care
- Link APP and community-based organizations
- Limited community involvement
Comparison with the right to health framework

- Services exist
- Resources are limited
- Licensed providers
- Absence of program

Available
Accessible
Good quality
Appropriate

- Limited understanding of inmate population
- Need for further research
Limitations

- Observation of interdisciplinary committee at APP - no security personnel in attendance
- Focus group at forensic unit - relatively small attendance

Significance

- Unique application of Right to Health framework in a prison mental health service setting
- Affirms that access to services alone is not enough/Right to Health framework is relevant
- Inmates are Canadian residents
- Inmates should be included under the universal health care system
How equivalence can be achieved

• Prison mental health care services must be part of the universal health care system to satisfy **the right to health**

• Prison mental health services need to be **integrated** with our mental health care system

• Prison system and the mental health care system must work in **collaboration** with one another
Dissemination of research results

Knowledge transfer

- Present to senior officials
- Present to All Party Committee
- Develop research proposals
Thank-you for attending my presentation!