TECHNICAL NOTE

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Mental Health Service Recipients and Prison Work Release: How Do the Mentally III Fare Compared to Other Inmates in Prison Work Release Programs?

ABSTRACT: The objective of this study was to compare the success rate of the mentally ill and other inmates on prison work release within gender groups. Mentally ill (MI) men (n = 42) had a higher success rate (79%) than other men (NMI) (61%) (n = 49), but this difference only approached statistical significance (p = 0.07), and mental illness did not distinguish male success/failures in regression analyses. Mentally ill women (n = 51) had a statistically significant lower success rate (58%) than other women inmates (n = 49) (83%) on work release. The difference in rates, however, only occurred in the group of women who were currently in prison due to a parole violation, not new court commitments. Regression analysis confirmed the importance of mental illness and current commitment as a parole violator. A greater number of MI men should be allowed to participate in work release. Women with mental health issues who had prior trouble on parole may need enhanced services.

KEYWORDS: forensic science, mental illness, work release, female offenders

The New York State Department of Correctional Services (NYSDOCS) operates work release (WR) programs for prison inmates to help smooth the transition from the prison to the community. Selected inmates are transferred to a minimum-security prison to participate in work release programs before their release onto parole. Work release inmates are released during the day to their jobs and return to the prison in the evening, or they may live at home and report on a scheduled basis to the prison. Until 1998 inmates who received mental health treatment services in prison were precluded by NYSDOCS policy from work release participation.

No prior study could be found that examined outcomes of mentally ill on work release. Only two studies could be found that compared mental health recipients and non-recipients released from prison onto parole supervision (1,2). They each reported equal success rates between mentally ill and not mentally ill, but only included men. The objective of the current study is to compare the success rates of mentally ill and non-mentally ill and within gender groups.

There have been studies of work release (3), and they report improved employment, but not criminal recidivism. Mawhorr (4) discussed that prison work release programs should be particularly useful for mentally ill inmates as they provide extra assistance and structure rather than being directly released onto parole.

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Methods

A sampling design of inmates participating in work release, stratified on mental illness and gender, was to include: 50 mentally ill men (MI), 50 non mentally men (NMI), 50 MI women, and 50 NMI women. Only inmates sent to two New York City work release state prisons were included, each of which exclusively served men or women. The MI sample was nearly all the MI inmates released to these two prisons in 1998, 1999, and 2000. For the NMI, a random proportionate sample in each of the three years was taken to match the MI yearly proportion. Follow-up time was 18 months, and all inmates in sample were successfully released on parole or removed from work release — returned to prison or absconded.

Several variables were available to compare the sample groups. From a NYSDOCS quality assurance data base were: age, ethnicity, marital status, substance use, Michigan Alcohol Screening Test, prior substance abuse treatment, type of commitment crime, minimum sentence, maximum sentence, current commitment type (new court commitment or parole/conditional release violator), and number of prior felony arrests, as well as the dependent variable — successful completion of work release. This data was matched with a CNYPC quality assurance database of all inmates receiving mental health services in prison. The CNYPC database had DSM-IV-TR psychiatric diagnosis. On admission to mental health service the examining psychiatrist makes diagnoses and they are entered into a database. As needed, diagnoses are modified and the database updated.

Prior to any analysis all identifiers were stripped from the file and destroyed. This data de-identification process has been reviewed with the IRB.

Tests of significance and regression analysis were conducted with SPSS (5).

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³New York State Department of Correctional Services (NYSDOCS); 845 Central Avenue, Albany, NY 12212.

Results

The final sample included 49 NMI men on work release (WR) and 42 MI men, and 49 NMI women and 51 MI. Seventy-nine percent of the MI men successfully completed WR and were released onto parole, whereas 61% of the NMI men were successful. This difference approached significance with a *p*-value of 0.07. Regression analysis confirmed that mental illness did not distinguish male success and failures on work release.

Female MI (n = 51) had a statistically significant lower success rate (58%) than NMI women (n = 49) (83%) on work release. The difference in rates between women, however, only occurred in the group who were in prison due to a parole violation. MI and NMI women who had been in prison due to a new court commitment had similar work release success rates. Among women that were sent to prison due to a parole violation, the MI women had a success rate of 33% (n = 22) compared to 67% (n = 15) for NMI women (p = 0.002). Regression analysis confirmed the importance of mental illness and current commitment as a parole violator (i.e., prior parole failure) in predicting success/failure on work release for women.

There were sample differences between MI and NMI men and women in the study, but based on regression analyses they did not account for observed work release success rates. The MI men were significantly younger than the NMI men (35.8 years vs. 39.9 years), more likely to have a Michigan Alcohol Screening Test (MAST) score in the Alcoholic range (38.9% vs. 19.1%), and a lower mean minimum sentence (29.3 months vs. 39.9 months). MI women were more likely to be identified with both an alcohol and drug problem than NMI women (58.8% vs. 32.7%), and be scored as Alcoholic on the MAST test (42.9% vs. 23.3%).

The most frequent primary psychiatric diagnoses for both MI men and MI women, respectively, were Psychotic disorders (26.5%; 20.9%), Major Mood disorders (Bipolar disorder or Major Depressive disorder) (11.8%; 16.3%), Dysthymic disorder (38.2%; 25.6%) and Adjustment disorder (11.8%; 14.0%). Almost 80% (79.2; 77.1%) had a co-occurring substance abuse disorder diagnosis. Almost all (93.8%; 100.0%) were receiving a psychiatric medication on WR.

Discussion

Participation in work release for all inmates is a step towards home, and with it increased responsibility and independence, exposure to temptations and de-stabilizers such as substance use, and reengagement with family, which can be supportive and/or stressful. For MI individuals there is increased responsibility for maintaining involvement with mental health treatment and for independently taking psychiatric medications. This life change can be difficult and may produce strong emotional reactions (6,7).

Despite these strains, we found that MI men had better or at least equal success rates on work release as NMI men. This result suggests that the number of MI men, especially those with major mental illnesses, participating in WR could be increased.

MI women on work release, however, had lower success rates than their NMI counterparts. This difference, however, was only found for women that had been serving sentences due to parole failure

There has been recent research that has reported numerous differences between men and women offenders (8,9). One potential reason for the difference between MI and NMI women found in our study is what Brown, Huba, and Meichior (10) discuss as "over burden." All inmates re-entering the community from prison are overstressed, and many women have the additional stress of resuming their role as custodial parent — a role male offenders less often have to resume. Then adding the strain of mental illness, which may comprise their coping skills to begin with, may overwhelm MI women.

We did obtain additional data about the reason for failure on work release for the women in this study. Sixty-three percent of the MI women that failed (12 of 19 with valid data) *absconded* as compared to 25% of NMI women (two of eight), and this difference approaches statistical significance (p = 0.07) despite the very low sample size. Additional support for these women should be a priority.

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