



March 27, 2015

RE: LB 654

Dear Senator Mello:

Disability Rights Nebraska is the designated Protection and Advocacy organization for individuals with disabilities in Nebraska. Our research into the interrelationship between mental health and corrections has identified the importance of not only recognizing that there is a significant need for mental health treatment and services once an individual is in Nebraska's correctional system, from admission to release. Collaboration between the corrections system and other human service systems will be vital. We are neutral regarding LB 654.

There is a great need to improve the mental health services both in and out of Nebraska's Corrections system--that is not in question. The importance of identifying inmates with mental health needs and providing quality mental health services is obvious; however supportive services targeted at inmates during the end of their sentences are equally important:

"Reentry/Discharge Planning— The vast majority of persons incarcerated in U.S. prisons and jails will eventually be released. The immediate period after release is an especially vulnerable time for released inmates: in the first two weeks of release, former inmates are over twelve times more likely to die from health problems than the general population as well as at a heightened risk to recidivate.

Navigating a successful transition is often uniquely difficult for former inmates with mental illness, especially without assistance in preparing for their release and figuring out what services are needed or how to access those services. Assisting inmates with mental illness with reentry planning (long-term, admissions) and discharge planning (short-term, imminent release) is a key component of a successful transition from corrections to the community.

Community-based Services— A released prisoner's unmet need for mental health care often precipitates arrest. Many former inmates with mental illness will need support to successfully make this transition, yet will often have few informal support systems (e.g., family or friends) or formal support systems (e.g., private or public health insurance,

restrictions on federal housing benefits). They often face additional barriers unique to their mental illness (e.g., waiting for application approval for federal or other benefits, proving mental illness is their primary diagnosis for public benefits programs, and stigma associated with mental illness). An adequate and responsive public mental health system will work to prevent involvement with criminal justice by persons with mental illness, to treat and plan for release once in the system, and to maintain independent living for prisoners with mental illness upon release. Medicaid and the Affordable Care Act have been used by many states to finance reforms.”¹

We support the improvements that LB 654 identifies— the treatment and services for inmates who have mental illness, the importance of those services and treatment, and the paucity of treatment and/or services provided in the existing corrections system—we would caution that Hastings Treatment Center should not be utilized to release existing correctional facilities from their responsibility to provide mental health treatment services and programs within their walls. Additionally, we would caution that the development of this treatment center must not trade off with resources and funding for community-based mental health treatment and services. Furthermore, the legislature must resist any temptation to return to an institutional structure for mental health treatment and service delivery for individuals with mental illness in the community; for if LB 654 builds the capacity for community-based mental health services for inmates, and a consequential reduction of inmates placed at the Hastings Treatment Center, there could be an inclination to repurpose the facility as a mental health institution for other individuals not involved with Corrections. Perhaps the legislature could insert a sunset clause in this bill so that after a certain time, the outcomes and continued necessity could be assessed in light of improved community-based mental health services.

If you have any further questions or comment, please do not hesitate to contact me: brad@drne.org, or 402-474-3183.

Sincerely,

Bradley A. Meurrens

Public Policy Specialist

BAM/jrm

cc: Sen. Bolz; Sen. Haar; Sen. Hilkemann; Sen. Kintner; Sen. Kuehn; Sen. Nordquist; Sen. Stinner; Sen. Watermeier

¹ Disability Rights Nebraska (2014), “Selected Issues in Mental Health and Corrections: A Collection and Summary of Research” available at <http://www.disabilityrightsnebraska.org/resources/publications.html>, p. 2