

## **Mentally ill ex-cons need help -- or jail**

By Eugene O'Donnell

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The crisis in mental health that the nation faces has been hidden for years behind penitentiary walls. That is changing quickly: New York is in the process of drastically reducing its prison population, driven in part by gaping budget shortfalls and by second thoughts about whether incarcerating some drug offenders makes sense.

While most mentally ill people are not dangerous - they tend to be more victimized than victimizers - we are in the midst of a serious mental health meltdown reflected dramatically in recent headlines. In New York this weekend, a 9-year-old boy was killed by a parolee who may have heard voices telling him to kill. In Times Square last month, police shot and killed a man who fired on them; afterward, they found a note indicating his apparent willingness to gun down any officer who got in his way.

Sunday's "America's Most Wanted" television show led to the apprehension of a man who killed four people in Florida, including a 6-year-old, on Thanksgiving Day; he had previously attempted suicide and was off his anti-psychotic medications.

During New York's crime crackdown in the 1990s, the number of state prisoners reached almost 72,000; today, it is 59,000 and falling.

Reducing the number of costly prison beds is a welcome development, at least for nonviolent offenders. In an increasingly safe city, this can be a watershed event, the triumph of redemption over the ruination that prison brings to people - but only if we adopt sensible policies to handle early release and consider investing some of the money saved in the correction budget for mental health services.

We must be honest: Some releasees will rejoin their families and contribute to society. Others pose threats. Even for those with no explicit record of violence, some releasees may have a history that signals potential trouble, such as weapons possession and fights. Some drug offenders have serious mental health issues; an estimated one out of two struggles with an addiction and a co-diagnosed mental illness.

For those going on parole, there should be easily accessed, reliable mental health support services. Where there is a potential that an offender could harm innocent people, parole supervision must be intensive. And there should be no hesitation - budgets be damned - about sending back to prison anyone who hurts someone else.

For ex-convicts not under parole supervision, it is vital that they have reliable care available and access to an advocate who can do "aggressive outreach," as mental health experts call it. Too often, mental health problems reach crisis proportions either because

there is no one looking after an afflicted person, or those looking after them are at wit's end. This is when the police enter the picture and the shadow of incarceration begins to loom.

Imagine the challenges that many former prisoners are facing as they try to stitch their lives together in these dire economic times. For many, the stresses must be enormous.

It is in difficult times, with money tight, that the wisest investments are often most needed. We have an opportunity to reshape our treatment of those who need help and to steer them away from a life back behind bars.

So far, New York's early prisoner release seems to be working. But officials must do everything possible to keep the door closed to the violence of yesteryear.

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