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Mental Hospital Care Is Little Better than Prison

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"Inpatient care ... has declined so much that it matches the service provided by prisons, institutions notorious for medical and psychological neglect."

Chandra Bozelko is a poet and writer. In the following viewpoint, she argues that treatment in mental health facilities is poor and does little to rehabilitate inmates. She says that prisons are sometimes marginally better for the mentally ill, since prisons encourage inmates to work, which can be therapeutic. Bozelko concludes that moving mentally ill people from prisons to hospitals will have little beneficial effect unless the care in mental health institutions is significantly improved.

As you read, consider the following questions:

1. According to Bozelko, who was Adam Lanza?
2. What message does Bozelko say that prison work requirements send to patients?
3. What does Bozelko conclude is the problem with modern mental health care?

As someone who was involuntarily committed for psychiatric treatment seven times in four years and served six years at York Correctional Institution in Niantic [Connecticut], I know every angle of commitment. The times I was taken to the hospital were like kidnappings; I couldn't stop to put on shoes, turn off the lights or grab a jacket.

No Treatment

The public seems convinced that the perceived link between mental illness and violence justifies essentially imprisoning someone for a medical condition. Involuntary hospitalization will become even more popular now that Connecticut's child advocate issued a report on Adam Lanza's history in November [2014]. The report revealed that treatment opportunities were missed and theorized that the shooting of 20 students and six educators at Sandy Hook Elementary School [in Newtown, Connecticut] could have been prevented if someone had intervened to force Lanza into treatment. If he went through the same experience that I did, I doubt Lanza would have warmed to psychiatric care.

Many people see Newtown as a symbol of failed mental health policy, not just for the Sandy Hook shootings but because the town saw resources shift as the Fairfield Hills Hospital for mental illness closed and Garner Correctional Institution was built in town around the same time in the mid-1990s. Deinstitutionalization just shifted patients from one type of institution to another. In fact, prisons are called the new asylums and house more mentally ill people than hospitals do.

Critics of the hyper-incarceration happening in the United States want to shift the mentally ill population back to hospitals, places where they can at least receive treatment. But, based on my experiences, there is virtually no treatment going on inside psychiatric hospitals; they provide little more than medication, the same pills delivered by prison nurses to inmates.

During my time in psychiatric hospitals, psychiatrists saw patients for about seven minutes as they did rounds with interns and residents. Patients received no individual psychotherapy. After the fleeting meeting with the doctor, patients spent the rest of the day wandering or watching TV. Social workers hired to run "groups"—group therapy sessions—were so overloaded setting up social

services for discharging patients who had no support that the sessions never happened.

I received the same subpar mental health care at a prison but the atmosphere was unexpectedly more therapeutic behind bars than it was in a psych ward. Unlike hospitals, prisons require their wards to work and contribute to the correctional facility's daily upkeep. Inmates work in the kitchen preparing meals, cleaning, maintaining the grounds, shelving books in the library, unpacking commissary wares or sewing.

Prison work requirements often face criticism because the pay is so low and the jobs often unglamorous; people compare it to slavery. But work requirements send a message to prisoners: You have a responsibility, a duty to your community and you can fulfill it. You can be reliable, diligent and valuable to others even when you don't feel that way, even when everyone says you are not. I worked for almost five years loading crushed tomatoes into 200-gallon kettles because of this message.

Working in Prison

I felt useless in the hospital. Psychiatrists encourage committed hospital patients to apply for Social Security Disability, to stay out of the workforce. The social workers who should have been conducting group therapy came at me repeatedly with disability applications. I never applied but many do. In 2012, of the 10 million people receiving Social Security Disability payments, 35.5 percent or nearly 3.6 million people reportedly received it for a mental disorder. The lesson this imparts to patients is that they have little to contribute and should be sidelined—have no role in society. The message itself is stigmatizing; it tells people with mental illness that they are different, defective. Prison's work requirements make a clear impression on inmates: You are no different than anyone else and you can do it. Prison—with its innumerable faults—is a community when inmates work. Psychiatric hospitals are depositories where patients idle.

Of course, even if care in psychiatric hospitals is weak, involuntarily hospitalizing someone does incapacitate them. No one murders 26 people from a locked ward, so involuntary hospitalization might have prevented the Sandy Hook tragedy. But incapacitation is temporary and people like Adam Lanza, whose real affliction appears to have been rage, can emerge angrier because the process of being admitted is so traumatic. And if the only reason for admission is to pull someone out of society—which Lanza had done well for himself until Dec. 14, 2012—then there really is no difference between hospitals and prisons. Unless the quality of psychiatric care improves, fighting for hospital treatment over incarceration becomes a debate over geography, where these individuals should go rather than why they should be held anywhere.

This cannot mean that we should incarcerate people who have not committed crimes because prison offers the same opportunity for psychotropic medication as a hospital but more opportunities for self-edification through menial labor. Instead it highlights the fact that the inpatient care, which advocates tout and the public wants forced on certain people, has declined so much that it matches the service provided by prisons, institutions notorious for medical and psychological neglect.

The problem with modern mental health care is not that people who want it can't get it or that those who need it won't take it, but that the services they receive in the inpatient setting are inferior. Unfortunately, inpatient psychiatric care would have had little effect on Adam Lanza even if it had been forced on him.

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