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Opioid Users in Justice System Need Testing for Depression, Mood Disorders: Study

By **TCR Staff** | February 9, 2018



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Opioid users in the justice system are at high risk for depression and other mood disorders and need systematic testing and treatment to prevent them from harming themselves, according to a new study.

Researchers found that almost half of a sample group of individuals under community supervision in Washington DC had not been examined by a physician for signs of mental distress. But after testing, some 30 percent tested positive for moderate depression and 21 percent were diagnosed with bipolar disorder.

The study, published in the *Substance Use and Misuse Journal*, said the high prevalence of mood disorders among the predominantly black justice-involved populace in Washington D.C. highlights the pressing need to sufficiently identify and care for mood disorders in opioid-dependent correctional populations.

The paper noted that policy changes in the 1960s resulted in the deinstitutionalization of who were once formerly placed in mental health facilities , producing big surges in the U.S. criminal justice system of populations with mental health disorders—the bulk of whom reside in the community

Researchers based their conclusions on a sample of 258 opioid-dependent individuals living in Washington, D.C. who were on probation, parole, or other form of community supervision.

The sample primarily included unmarried African-American men aged 50 and over. Most those who screened positive for mood disorders were also found to face greater family, legal, and medical problems on the Addiction Severity Index-Lite (ASI-Lite) than those who didn't test positive.

Researchers said their findings made clear that there were major shortcomings in the treatment of opioid-dependent individuals in the justice system.

“Key issues related to screening and assessment of psychological conditions exist universally, “ the paper said, listing for example, “insufficient staff training, the use of ineffective and non-standardized screening/assessment instruments, and the separation of mental health substance use service systems.”

The authors said that proper diagnosis and wider access to treatment could “decrease the incidence of adverse psychosocial outcomes and repeated involvement in the criminal justice system.”

The paper was written by Mary Mbaba of George Washington University; Shan-Estelle Brown, Sandra A. Springer, and Frederick Altice of Yale University School of Medicine; Alese Wooditch of Temple University; Marissa Kiss, Faye Taxman and Amy Murphy of George Mason University; Suneeta Kumari of Howard University; and William B. Lawson of the University of Texas.

A copy of the study can be downloaded and purchased here. Journalists can get a free copy by contacting john@thecrimereport.org.

This summary was prepared by TCR news intern John Ramsey. Readers comments are welcome.
