



Influence of Personal Attitudes on Support of Mental Health Services for Legal System and Prison Populations

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Introduction

Problem/Background

- 14% of state and federal prisoners and 26% of jail inmates met the threshold for serious psychological distress, compared to just 5% of demographically matched adults (Bureau of Justice Statistics, 2017).
- 40% of individuals with mental illness had been arrested due to psychiatric symptoms (National Alliance on Mental Illness, 2003).

Stigma

- Stigma surrounding mental illness has perpetuated systemic failures in mental health (MH) policy, impeding efforts to promote de-stigmatization and access to care (Link & Phelan, 2001). Racial disparities exist for poor mental health in prison settings (Porter, 2021; Primm, et al., 2005).

Ideology

- Social attitudes, education, professional role and training within the criminal justice system have been reported to be related to attitudes toward crime (Fielding & Fielding; 1991).

Objectives

1. Identify ideological beliefs that predict attitudes toward mental health issues within the legal system in general (LSMH).
2. Identify ideological beliefs that predict attitudes towards incarcerated people's mental health issues and pressing needs (PMH).
3. Policy Insights: Inform future mental health policies and interventions for incarcerated individuals.

Methods

Participants. $N = 117$. M age = 34.2 years. Males = 76%. White/European American = 90.6%.

Procedures. Participants volunteered through Amazon Mturk, an online research recruitment site. After a short description of the study, participants could follow a link to UNL Qualtrics, an online data collection site.

Once in UNL Qualtrics, participants provided demographic information and completed a series of questionnaires that related to general attitudes towards mental health (CAMI), empathy (EM), modern race bias (MRB), attitudes towards the legal system, and mental health issues (LSMH), and prisoners' mental health issues (PMH). After completion of measures, participants were paid \$2.00 and thanked.

Analyses were conducted in SPSS 29, with 1,000 sample bootstrapping.

Measures

CAMI – This measures general attitudes about mental illness (Taylor & Dear, 1981).

- “Locating mental health facilities in a residential area downgrades the neighborhood.”

EM – Empathy scale measured empathic beliefs and proclivities.

- “Seeing a person who is upset makes me feel sad.”

MRB – Modern Race Bias Scale is an indicator of race bias within various social contexts (Willis-Esqueda & Zita Araujo, 2022).

- “Minorities seem to be born to violate laws.”

LSMH – Attitudes about mental health issues within the legal system were measured (Parent & Willis-Esqueda, 2024).

- “I believe all prisons should have full-time mental health professionals on staff.”

PMH – Attitudes about incarcerated persons' mental health issues were assessed (Parent & Willis-Esqueda, 2024).

- “We provide too much care for prisoners who are in need of health services.”

Results

Cronbach's Alphas for all measures indicated good reliability. After examination of a correlation table for all variables, we conducted multiple regression analyses to address two models.

Model 1: **LSMH** was regressed onto predictor variables CAMI, EM, and MRB.

Model 2: **PMH** was regressed onto predictor variables CAMI, EM, and MRB.

Model 1: Results indicated $R^2 = .71$, $F(3, 113) = 90.44$, $p < .001$. As shown in Table 1, the higher one is in EM, the more you believe in prisoner mental health needs and treatment.

Model 2: Results indicated $R^2 = .29$, $F(1, 113) = 15.00$, $p < .001$. As shown in Table 2.

Simple linear regressions for PMH regressed onto LSMH, MRB, and EM, $p < .01$.



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Results

Table 1.

Effects of Predictor Variables for **LSMH**.

	β	t	p	LLCI	ULCI
CAMI	.15	2.32	.02	-.05	.62
EM	.78	10.22	.001	.79	1.20
MRB	.03	.37	.71	-.13	.17

Table 2.

Effects of Predictor Variables for **PMH**.

	β	t	p	LLCI	ULCI
CAMI	-.28	-2.79	.006	-.24	.03
EM	-.29	-2.51	.01	-.17	.001
MRB	-.21	-1.71	.08	-.10	.017



Discussion

Results. Results indicated empathy as a key predictor. Higher empathy levels correlate with more positive attitudes towards prisoner's mental health. With LSMH being correlated with PMH while EM and MRB are also correlated with PMH, indicates an intertwined perception amongst these ideologies.

Limitations. Future studies should examine regional differences to understand geographical variations in attitudes. Additionally, investigating how political conservatism and personal mental health status impact attitudes towards incarcerated individuals with mental illness.

Conclusions. We need to educate, increase awareness and educate the public about mental health issues among incarcerated individuals. By promoting empathy towards those with mental health issues we can improve support and resources allocated in correctional facilities. Overall, there's a necessity in advocating for policy reforms that prioritize mental health care for prison populations.

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