There will be fewer people with mental illnesses in our jails tomorrow than there are today.
National Partners Rally Around a Common Goal

Partners and Steering Committee Members

Federal Partners
About CSG Justice Center

National non-profit, non-partisan membership association of state government officials that engages members of all three branches of state government.

- Justice Center provides practical, nonpartisan advice informed by the best available evidence.
Overview

Scope of the issue: How did we get here?

Key challenges counties face: Why is it so hard to fix?

Effective Strategic Plans: How do we move forward?
01.
Mental Illnesses in the Criminal Justice System: How did we get here?
Millions of Adults Now Under Correctional Supervision

Bureau of Justice Statistics 1980 - 2014

- Total
- Probation
- Prison
- Parole
- Jail
Focus on where the volume is: Jails

Jail and Prison Admissions, 2015

1.85 million people with SMI admitted to jails annually
While Jail Populations Have Declined in Some Counties…

Inmates Confined in Local Jails at Midyear and Percent Change in the Jail Population, 2000-2013
Jails Report Increases in the Numbers of People Mental with Illnesses

NYC Jail Population (2005-2012)

Average Daily Jail Population (ADP) and ADP with Mental Health Diagnoses

<table>
<thead>
<tr>
<th>Year</th>
<th>Total</th>
<th>M Group</th>
<th>Non-M Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>2005</td>
<td>10,257</td>
<td>3,319</td>
<td>7,938</td>
</tr>
<tr>
<td>2012</td>
<td>7,557</td>
<td>4,391</td>
<td>3,166</td>
</tr>
</tbody>
</table>

2005: 24% M Group, 76% Non-M Group
2012: 37% M Group, 63% Non-M Group
Mental Illnesses: Overrepresented in Our Jails

General Population

4% Serious Mental Illness

Jail Population

17% Serious Mental Illness
72% Co-Occurring Substance Use Disorder
Disproportionate Representation

The graph illustrates the incarceration rate (per 100,000) for Non-Hispanic Whites, Non-Hispanic Blacks, and Hispanics over the years 1980 to 2010. The incarceration rate for Non-Hispanic Whites is represented by a blue line, Non-Hispanic Blacks by a red dashed line, and Hispanics by a brown dashed line. The data shows a significant increase in incarceration rates for Non-Hispanic Blacks and Hispanics compared to Non-Hispanic Whites.
Factors Driving the Crisis

- Disproportionately higher rates of arrest
- Longer stays in jail and prison
- Limited access to health care
- Higher recidivism rates
- Low utilization of EBPs
- Criminogenic risk factors
Factors Driving the Crisis

Disproportionately higher rates of arrest

- Ban on Sleeping in Public: 18%
- Ban on Panhandling: 27%
- Ban on Loitering, Loafing, and Vagrancy: 32%
- Ban on Public Camping: 33%
- Ban on Living in Vehicles: 39%
- Ban on Sitting and Lying Down: 47%

Factors Driving the Crisis

Longer stays in jail and prison
Longer Lengths of Incarceration

Source: The City of New York Department of Correction, 2008 Department of Correction Admission Cohort with Length of Stay > 3 Days (First 2008 Admission)
Factors Driving the Crisis

Limited access to healthcare
Limited Access to Health Care

Poor health status

Poor health access

Uninsured Rate for Hispanic, Black, and White Populations (2013)

- Hispanic: 33%
- Black: 22%
- White: 14%

Factors Driving the Crisis

Low utilizations of evidence-based practices (EBPs)
Individuals with SMI and CODs not always getting EBPs

Past Year Treatment for the **2.6 million** Adults, 18 or Older, with Both SMI and Substance Use Disorder

- **Mental Health Services and Specialty Substance Use Treatment**: 12%
- **Specialty Substance Use Treatment Only**: 2.3%
- **Mental Health Services Only**: 51.20%
- **No Treatment**: 34.4%

**NSDUH (2016)**
Factors Driving the Crisis

Higher rates of recidivism
High Recidivism Rates on Reentry

No more likely to be arrested ...

... but 1.38 times more likely to be revoked

Source: Vidal, Manchak, et al. (2009); see also: Eno Louden & Skeem (2009); Porporino & Motiuk (1995)
Factors Driving the Crisis

Criminogenic risk factors
Incarceration Is Not Always a Direct Product of Mental Illness

Source: Peterson, Skeem, Kennealy, Bray, and Zvonkovic (2014)
Those with Mental Illnesses Have Many “Central 8” Dynamic Risk Factors

...and these predict recidivism more strongly than mental illness

Source: Skeem, Nicholson, & Kregg (2008)
Recidivism Is Not Simply a Product of Mental Illness: Criminogenic Risk

**Risk**

≠ Crime type  
≠ Failure to appear  
≠ Dangerousness  
≠ Sentence or disposition  
≠ Custody or security classification level

**Risk** = How likely is a person to commit a crime or violate the conditions of supervision?
What Do We Measure to Determine Risk?

Conditions of an individual’s behavior that are associated with the risk of committing a crime.

**Static factors** – Unchanging conditions

**Dynamic factors** – Conditions that change over time and are amenable to treatment interventions
Criminogenic Risk Factors

Static
- Criminal History
  - Number of arrests
  - Number of convictions
  - Type of Offenses
- Current Charges
- Age at first arrest
- Current age
- Gender

Dynamic (the “Central 8”)
1. Substance abuse
2. History of antisocial behavior
3. Antisocial personality pattern
4. Antisocial cognition
5. Antisocial associates
6. Family and/or marital discord
7. Poor school and/or work output
8. Few leisure/recreation outlets
Risk-Need-Responsivity Model as a Guide to Best Practices

<table>
<thead>
<tr>
<th>Principle</th>
<th>Implications for Supervision and Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Risk Principle</td>
<td>Focus resources on high <strong>RISK</strong> cases; limited supervision of lower RISK people</td>
</tr>
<tr>
<td>Needs Principle</td>
<td>Target the <strong>NEEDS</strong> associated with recidivism such as antisocial attitudes, unemployment, substance use</td>
</tr>
<tr>
<td>Responsivity Principle</td>
<td>General and specific factors impact the effectiveness of treatment. Be <strong>RESPONSIVE</strong> to learning style, motivation, culture, demographics, and abilities of the offender</td>
</tr>
</tbody>
</table>
Responsivity: You Can’t Address Dynamic Risk Factors without Attending to Mental Illness
Knitting Together Available Research ...
...To Create A Framework for Prioritizing Target Population

Low Criminogenic Risk (low)

- Severity of Substance Abuse (low)
- Serious Mental Illness (med/high)
- Severity of Mental Illness (low)

- Group 1
  - I-L
  - CR: low
  - SUD: low
  - MI: low

- Group 2
  - II-L
  - CR: low
  - SUD: low
  - MI: med/high

- Group 3
  - III-L
  - CR: low
  - SUD: med/high
  - MI: low

- Group 4
  - IV-L
  - CR: low
  - SUD: med/high
  - MI: med/high

Medium to High Criminogenic Risk (med/high)

- Severity of Substance Abuse (low)
- Substance Dependence (med/high)
- Serious Mental Illness (med/high)
- Severity of Mental Illness (low)

- Group 5
  - I-H
  - CR: med/high
  - SUD: low
  - MI: low

- Group 6
  - II-H
  - CR: med/high
  - SUD: low
  - MI: med/high

- Group 7
  - III-H
  - CR: med/high
  - SUD: med/high
  - MI: low

- Group 8
  - IV-H
  - CR: med/high
  - SUD: med/high
  - MI: med/high
So .......
we arrest them more often, we keep them incarcerated longer, we fail to connect them to effective treatment, and they recidivate more frequently.

...... and despite significant innovations and investments over the past decade, there are more people with SMI in our jails today than yesterday.
02.
Counties Step Up but Face Key Challenges:
Why is it so hard to fix?
Key Challenges Counties Face: Observations from the Field

1. Being data driven
2. Using best practices
3. Continuity of care
4. Measuring results
Challenge 1 - Being data driven: Policymakers Face Complex Systems with Limited Information
Challenge 1 - Being Data Driven: Not Appreciating the Scale of the Problem
Challenge 1 - Being Data Driven:
Not Knowing the Target Population

<table>
<thead>
<tr>
<th></th>
<th>County A</th>
<th>County B</th>
<th>County C</th>
<th>County D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health Assessment</td>
<td>✔</td>
<td>✗</td>
<td>✔</td>
<td>✔ -</td>
</tr>
<tr>
<td>Substance Abuse Assessment</td>
<td>✗</td>
<td>✔</td>
<td>✔ -</td>
<td>✗</td>
</tr>
<tr>
<td>Risk Assessment</td>
<td>✔ -</td>
<td>✗</td>
<td>✗</td>
<td>✗</td>
</tr>
</tbody>
</table>
Challenge 1 - Being data driven: 
Inconsistent Definitions; Not All Mental Illnesses are Alike

Portion of M Group Meeting Criteria for Serious Mental Illness (SMI)

Non-M Group 79%
M Group 21%

M Group, SMI 43%
M Group, Non-SMI 57%

Source: The City of New York Department of Correction & New York City Department of Health and Mental Hygiene 2008 Department of Correction Admission Cohort with Length of Stay > 3 Days (First 2008 Admission)
Challenge 2 – Using Best Practices: Applying Results of Screening and Assessment:

Without Risk Assessment...

With Risk Assessment...

Risk of Re-offending

- **LOW**: 10% re-arrested
- **MODERATE**: 35% re-arrested
- **HIGH**: 70% re-arrested

<table>
<thead>
<tr>
<th>Dynamic Risk Factor</th>
<th>Need</th>
</tr>
</thead>
<tbody>
<tr>
<td>History of antisocial behavior</td>
<td>Build alternative behaviors</td>
</tr>
<tr>
<td>Antisocial personality pattern</td>
<td>Problem solving skills, anger management</td>
</tr>
<tr>
<td>Antisocial cognition</td>
<td>Develop less risky thinking</td>
</tr>
<tr>
<td>Antisocial associates</td>
<td>Reduce association with criminal others</td>
</tr>
<tr>
<td>Family and/or marital discord</td>
<td>Reduce conflict, build positive relationships</td>
</tr>
<tr>
<td>Poor school and/or work performance</td>
<td>Enhance performance, rewards</td>
</tr>
<tr>
<td>Few leisure or recreation activities</td>
<td>Enhance outside involvement</td>
</tr>
<tr>
<td>Substance abuse</td>
<td>Reduce use through integrated treatment</td>
</tr>
</tbody>
</table>

Andrews (2006)
Challenge 3 – Continuity of Care
Existing Services Only Reach a Small Fraction of Those in Need

Example from Franklin County, OH
Challenge 4 – Tracking Progress: Focusing County Leaders on Key Outcomes Measures

Outcome measures needed to evaluate impact and prioritize scarce resources

1. **Reduce**
   the number of people with mental illness booked into jail

2. **Shorten**
   the length of stay for people with mental illnesses in jails

3. **Increase**
   the percentage of people with mental illnesses in jail connected to the right services and supports

4. **Lower**
   rates of recidivism
03. Effective Strategic Plans: How do we move forward?
More than **400** counties across **43** states, representing **140 million** Americans, have resolved to reduce the number of people with mental illnesses in jails.
17 Counties in Pennsylvania Have Passed a Stepping Up Resolution
### Dauphin County: Action-Oriented Technical Assistance Approach

<table>
<thead>
<tr>
<th>Committed Leadership</th>
<th>Data-Driven Analysis</th>
<th>Comprehensive Process Analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>County selection dependent upon commitment by county leaders to act on findings</td>
<td>Objective findings on system strengths and limitations to promote consensus on reform priorities</td>
<td>Identify gaps in services and the flow of people moving through the criminal justice system</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Develop Findings &amp; Recommendations</th>
<th>Set Actionable Targets</th>
<th>Track Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Based on qualitative and quantitative findings, identify ways to improve outcomes</td>
<td>Set realistic goals and identify persons accountable for implementation</td>
<td>Track the progress of county initiatives and investments along the four key measures</td>
</tr>
</tbody>
</table>
State Support for Local Action

- Initiatives being launched, consist of:
  - Coordinating peer to peer learning among counties
  - Aligning state policy and funding to support county efforts
  - TA and resource support for improved data collection
  - Addressing gaps in treatment and services capacity

Ohio, June 2016
California, January 2017

State Project Sites
- Arizona
- Arkansas
- California
- Maryland
- Michigan
- North Carolina
- Ohio
- Oregon
- Pennsylvania
- Texas
On April 4th, 2017 at the CJAB Conference, Pennsylvania became the third state to launch a statewide Stepping Up initiative to tackle mental illness in county jails.
Reducing the Number of People with Mental Illnesses in Jail
Six Questions County Leaders Need to Ask

Is your leadership committed?

Do you have timely screening and assessment?

Do you have baseline data?

Have you conducted a comprehensive process analysis and service inventory?

Have you prioritized policy, practice, and funding?

Do you track progress?
Resources Toolkit & Webinars

One-stop-shop for key resources, webinars, network calls, and more at stepuptogether.org/toolkit
**Action Step:** County leaders have passed a resolution or proclamation mandating system reform to reduce the number of people with mental illnesses in jail.

- **Fully Implemented:** □
- **Partially Implemented:** □
- **Not Implemented:** ✗

**Next Steps and/or Notes:**

Our County Commission still needs to pass a Stepping Up resolution.

---

**Sample Automatic Response**

A mandate from leadership for this work from leaders responsible for the county budget is critical to the success of your initiative.

Since you marked “not implemented” then you can go to the following resources for guidance in fully implementing this action step:

- There is guidance on the [Stepping Up webpage](https://steppingup.org/) on how to pass a resolution in your county.
- For examples of resolutions other counties have passed, you can go to [National Association of Counties’ (NACo) webpage](https://naco.org/).
Coming soon: Project coordinator’s handbook

Complements the *Six Questions* framework as a step-by-step guide for project coordinators and includes:

- **A summary** of the question and its related **objectives** for the planning team
- **Facilitation tips** to assist the project coordinator in managing the planning process
- **Facilitation exercises** designed to achieve the question’s objectives and provide an efficient process for capturing the work of the planning team
Foci for 2018

➢ Increase the number of counties that track accurate data on the prevalence of SMI in jails?

➢ Increase the number of counties that share data and use data to guide their strategies and bring solutions to scale?

➢ Support county and state policy innovation to fill gaps in community-based treatment, services, and housing?
THANK YOU

For more information, contact: Fred Osher (fosher@csg.org)

The American Psychiatric Association Foundation: americanpsychiatricfoundation.org
The National Association of Counties: naco.org
The Council of State Governments Justice Center: csgjusticecenter.org