Adults with Behavioral Health Needs under Criminal Justice Supervision: A Shared Framework to Reduce Recidivism and Promote Recovery

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Today’s Presentation

- Background and Context
- Framework for Developing Effective Responses
- Summary/Discussion
An Expanding Population

7 MILLION AND COUNTING

Led by probation, the correctional population has tripled in 25 years.

JAIL
780,581
PRISON
1,512,576
PAROLE
824,365
PROBATION
4,293,163

NOTE: Due to offenders with dual status, the sum of these four correctional categories slightly overstates the total correctional population.

One in 31: The Long Reach of American Corrections
5% of the world's population:

23% of the world's prisoners

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Substantially Higher Rates across Demographic Lines

WHO’S UNDER CORRECTIONAL CONTROL?

Correctional control rates vary drastically across demographic lines.

**TOTAL 1 IN 31**

**WHITE 1 IN 45**

**WOMEN 1 IN 89**

**HISPANIC 1 IN 27**

**MEN 1 IN 18**

**BLACK 1 IN 11**


Recent Decline in State Prison Population

The number of state inmates grew 708% between 1972 and 2008 before dropping in 2009.

Jan. 1, 2010: 1,404,503 prisoners -0.3%

1972: 174,379 prisoners -1.5%

1925: 85,239 prisoners

NOTE: Annual figures prior to 1977 reflect the total number of sentenced prisoners in state custody. Beginning in 1977, all figures reflect the state jurisdictional population as reported in the Bureau of Justice Statistics’ “Prisoners” series. Data for both sentenced prisoners in custody and the jurisdictional population are reported for 1977 to illustrate the transition.

First decline in state prison populations in 38 years

Source: The Pew Center on the States; Public Safety Performance Project
Serious Mental Illnesses (SMI): An Issue in Jails and Prisons Nationwide

Serious Mental Illnesses in General Population and Criminal Justice System

<table>
<thead>
<tr>
<th>Percentage of Population</th>
<th>General Population</th>
<th>Jail</th>
<th>State Prison</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total: female and male</td>
<td>5</td>
<td>31</td>
<td>24</td>
</tr>
<tr>
<td>Female</td>
<td></td>
<td>15</td>
<td>16</td>
</tr>
<tr>
<td>Male</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: General Population (Kessler et al. 1996), Jail (Steadman et al, 2009), Prison (Ditton 1999)
Alcohol and Drug Use Disorders: Household vs. Jail vs. State Prison

<table>
<thead>
<tr>
<th>Setting</th>
<th>Alcohol Use Disorder (%)</th>
<th>Drug Use Disorder (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Household</td>
<td>8%</td>
<td>2%</td>
</tr>
<tr>
<td>Jail</td>
<td>47%</td>
<td>54%</td>
</tr>
<tr>
<td>State Prison</td>
<td>44%</td>
<td>53%</td>
</tr>
</tbody>
</table>

Source: Abrams & Teplin, (2010)
Co-occurring Substance Use and Mental Health Disorders are Common

NUMBER OF PEOPLE IN PRISONS AND JAILS FOR DRUG OFFENSES, 1980 AND 2010

1980 = 41,000 drug offenders
2010 = 507,000 drug offenders

STATE EXPENDITURES ON CORRECTIONS, 1985-2010

State Budgets in the Tank

42 States Have Faced Budget Shortfalls in FY12

Source: CBPP survey.
Cuts to Mental Health Services 2010-2011

Source: Chart courtesy Ted Lutterman, NASMHPD Research Institute, Inc. (NRI), Oct. 12, 2010 as published in National Alliance on Mental Illness, State Mental Health Cuts: A National Crisis
San Mateo County is set to sign off on a contract with San Jose mental health specialists to care for its seriously-mentally ill jail inmates.

The cost? $1.7 million. This right after the county pulled $49 million out of its reserves and slashed other services by $27.3 million to balance its budget.

Source: NBC Bay Area (Jun 27th, 2011)
“We have no drug treatment programs at medium security or above (facilities),” says Justin Jones, director of the Oklahoma Department of Corrections. “We eliminated all sex offender treatment, even though it was mandated by statute.”
Today’s Presentation

- Background and Context
- Framework for Developing Effective Responses
- Summary/Discussion
DEPARTMENT OF JUSTICE
National Institute Of Corrections


AGENCY: National Institute of Corrections, Department of Justice

ACTION: Solicitation for a Cooperative Agreement

SUMMARY: The National Institute of Corrections (NIC) is soliciting proposals from organizations, groups of individuals to enter into a cooperative agreement for the development of a document to provide exceptional administrators and practitioners in jails, prisons and community corrections a framework/model and guide to implement best strategies and practices to work with offenders diagnosed with mental illness or demonstrate mental health problems.

DEADLINE: Applications must be received by 4:00 p.m. EST on Friday, February 13, 2010.

ADDRESSES: Mailed applications must be sent to: Director, National Institute of Corrections, 820 First Street, NW, Room 5007, Washington, D.C. 20534. Applicants are encouraged to use Federal Express, UPS, or similar service to ensure delivery by the due date.

Hand delivered applications should be brought to 820 First Street, NW, Washington, D.C. 20534. At the front desk, dial 7-8106, extension 0 for pickup.

Faxed applications will not be accepted. Electronic applications can be submitted via www.grants.gov.

FOR FURTHER INFORMATION: A copy of this announcement and a link to the required application forms can be downloaded from the NIC web page at www.nicic.gov. All technical vs programmatic questions concerning this announcement should be directed to Michael Dooley, Correctional Program Specialist (CPS), National Institute of Corrections (NIC) at mdooley@nicic.gov.

1
What do we Mean by Criminogenic Risk?

We mean...“How likely is a person to commit a crime?”

<table>
<thead>
<tr>
<th>RISK</th>
<th>≠ Crime Type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>≠ Sentence or Disposition</td>
</tr>
<tr>
<td></td>
<td>≠ Custody/Security Classification Level</td>
</tr>
</tbody>
</table>
Can Criminogenic Risk be Predicted?

- How do we know how likely a person is to commit a crime?

- Assessment instruments
  - Use algorithms to determine the probability that someone will commit a crime.
  - BUT they must be normed and validated to be predictive.
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 of an individual that change over time and are amenable to treatment interventions.
Static Risk Factors

- **Criminal history**
  - number of arrests
  - number of convictions
  - type of offenses

- **Current charges**
- **Age at first arrest**
- **Current age**
- **Gender**
Dynamic Risk Factors

1. Anti-social attitudes
2. Anti-social friends and peers
3. Anti-social personality pattern
4. Substance abuse
5. Family and/or marital factors
6. Lack of education
7. Poor employment history
8. Lack of pro-social leisure activities
Addressing Criminogenic Risk Factors as Part of Supervision and Treatment

### Individual Risk Factors for Criminal Recidivism

<table>
<thead>
<tr>
<th>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 attitudes</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>

Source: Andrews (2006)
Key Finding: Programs May Not Reduce Recidivism

Impact of Ohio Community Based Correctional Facility Program on New Felony Conviction Rate Compared with Probation Supervision

Overall, the program increased new felony conviction rate by 3 percentage points.

*2010 Evaluation of Ohio Community Based Correctional Facilities & Halfway Houses. University of Cincinnati
Risk-Need-Responsivity Model as a Guide to Best Practices

• Focus resources on high **RISK** cases

• Target criminogenic **NEEDS** antisocial behavior, substance abuse, antisocial attitudes, and criminogenic peers

• **RESPONSIVITY** – Tailor the intervention to the learning style, motivation, culture, demographics, and abilities of the offender. Address the issues that affect responsivity (e.g. mental illnesses).
Framework for Addressing Population with Co-occurring Disorders

(NASMHPD-NASADAD, 2002)
Framework to Address SA and MH Needs of Individuals under CJ Supervision

Group 1
I – L
CR: low
SA: low
MI: low

Group 2
II – L
CR: low
SA: low
MI: med/high

Group 3
III – L
CR: low
SA: med/high
MI: med/high

Group 4
IV – L
CR: med/high
SA: med/high
MI: med/high

Group 5
I – H
CR: med/high
SA: low
MI: med/high

Group 6
II – H
CR: med/high
SA: med/high
MI: med/high

Group 7
III – H
CR: med/high
SA: med/high
MI: low

Group 8
IV – H
CR: med/high
SA: med/high
MI: med/high
Two Critical Components

Target Population

Comprehensive Effective Community-based Services
Today’s Presentation

Background and Context

Framework for Developing Effective Responses

Summary/Discussion
The Time is Right

- Enormous financial and human resources spent on this population; often without positive outcomes

- Downsizing jail/prison systems is occurring
  - Opportunity for reinvestment in the public health system
  - ACA opportunities to expand MH and SA treatment

- A stronger commitment to cross-system collaboration and partnerships
  - NASMHPDs historic role cross-system collaboration
  - CSG Justice Center desire to continue partner with State MH leaders

- Opportunity to contribute to safe community environments
The Goals of the Framework and The Support of NASMHPD

- Advance collaboration and communication
  - Develop a shared language around risk of criminal activity and public health need
  - Create a “starting point” for cross-systems policies and practices
  - Ensure that scarce resources are used efficiently
  - Promote effective practices

- A joint letter from NASMHPD-NASADAD-ASCA-APPA
  - To support the framework in principle
  - To demonstrate collaboration among state leaders
  - To encourage dialogue at the state and local levels
Thank you!