

Reducing Criminal Justice Contact for People with Mental Illnesses

Criminal justice contact due to untreated mental illnesses is preventable and costly. It also creates significant barriers to finding treatment, employment and safe housing—key factors that prevent recidivism by helping people remain healthy and safe in the community.

People with mental illnesses are heavily overrepresented in the criminal justice system.

- About 75% of women and 25% of men in prison are receiving psychiatric or psychological care (Minnesota Department of Corrections, 2009), and more are likely undiagnosed and untreated.
- Nationwide, about 64% of jail inmates report symptoms of a mental illness (Bureau of Justice Statistics, 2006).
- By contrast, about 26% of people in the general population have a mental illness (National Institute of Mental Health, 2010).
- The lack of access to mental health treatment in the community and in corrections contributes to recidivism. Without the appropriate resources, ex-offenders with mental illnesses are likely to re-offend.

Collaborative, integrated responses can reduce criminal justice contact, allowing more effective use of scarce resources.

- Whether responding alone or with law enforcement, *mental health crisis teams* can reduce trips to jails and emergency departments for people with mental illnesses. Some Minnesota crisis teams report that they have prevented ED trips for about 50% of the calls they receive.
- The Stearns County *jail discharge planning team* has helped participants lower their recidivism by 79%, reducing demand for jail beds.
- My Home, Inc. in St. Paul provides *one-stop, culturally specific dual diagnosis treatment and transitional reentry housing* for African American men and women on supervised release, work release and probation. A 2008-09 study by the University of Minnesota and the Minnesota Department of Corrections found that only 12.75% of participants committed new crimes.

Policy responses

Minnesota should take steps to prevent criminal justice contact and divert people with mental illnesses from the criminal justice system into treatment when appropriate. The legislature should:

- Continue funding for mental health crisis teams and supportive housing.
- Require mental health crisis training for board and care homes and adult foster care facilities.
- Require pre-service mental health training for law enforcement officers.
- Fund crisis intervention team (CIT) training.
- Hire more public defenders.
- Fund mental health courts.

People returning to the community from incarceration are more likely to succeed if they have the necessary tools, such as treatment, housing, employment or income supports, identification, a reasonable supply of medication and health care benefits. The legislature should:

- Fund projects and develop standards for counties and community-based agencies to conduct jail discharge planning.
- Increase funding for release planning for inmates with serious mental illnesses.
- Address the loss of access to General Assistance Medical Care by expanding access to Medicaid.

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