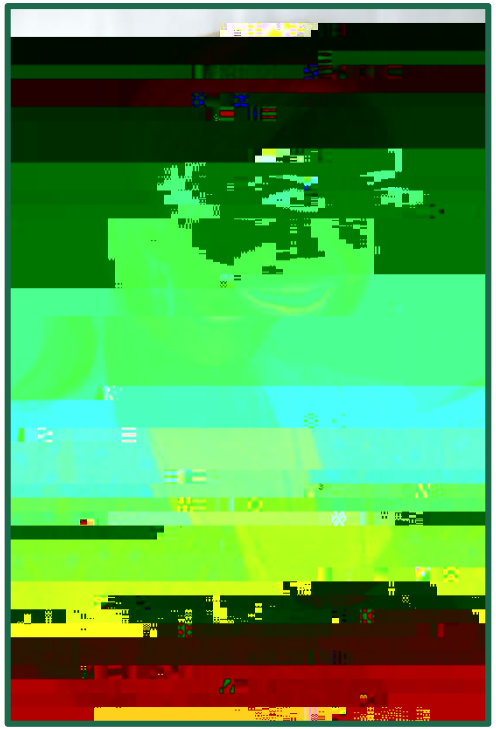
Welcome and Housekeeping



Melissa Stein, DrPH

Disclaimer

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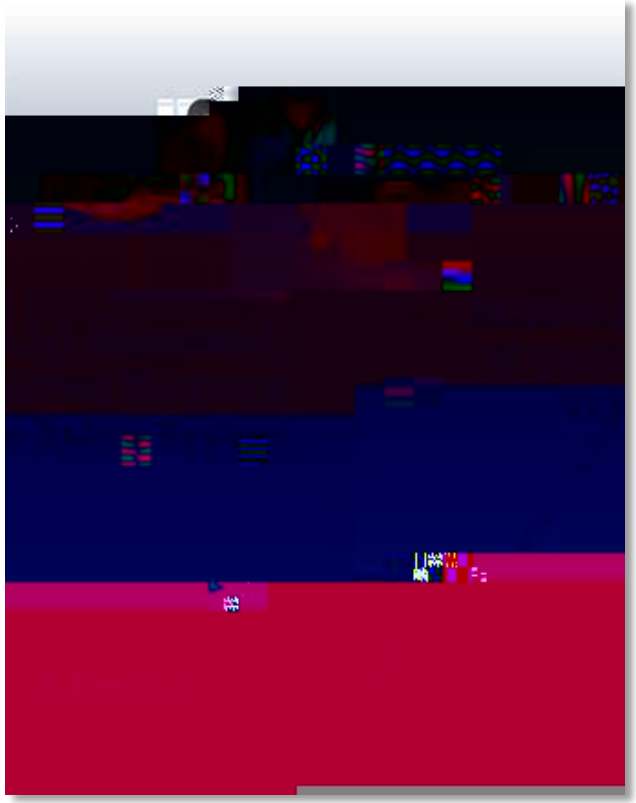
Agenda

Welcome	Melissa Stein, DrPH
Opening Remarks	Roxanne Castaneda, MS OTR/L, FAOTA
Presentation	Roger H. Peters, PhD
	Travis Parker, MS, LIMHP, CPC
Questions	Melissa Stein, DrPH

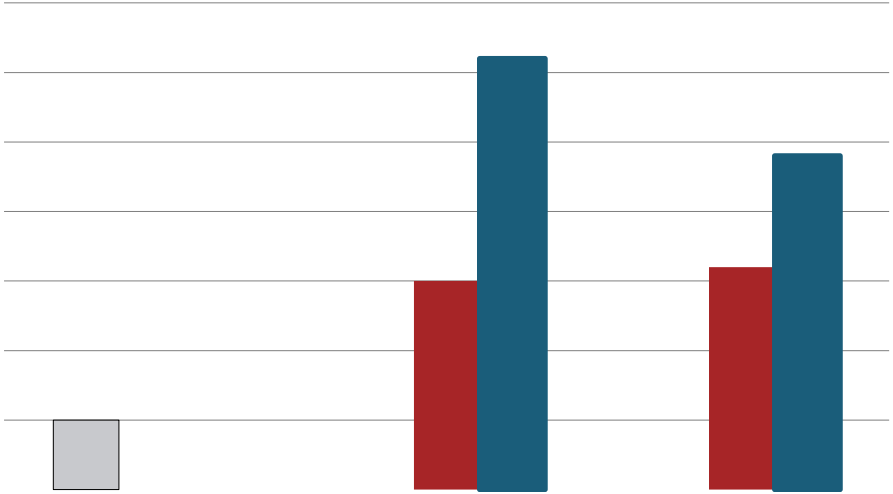
‡ Is Professor in the Department of Mental Health Law and Policy at the

The Publication

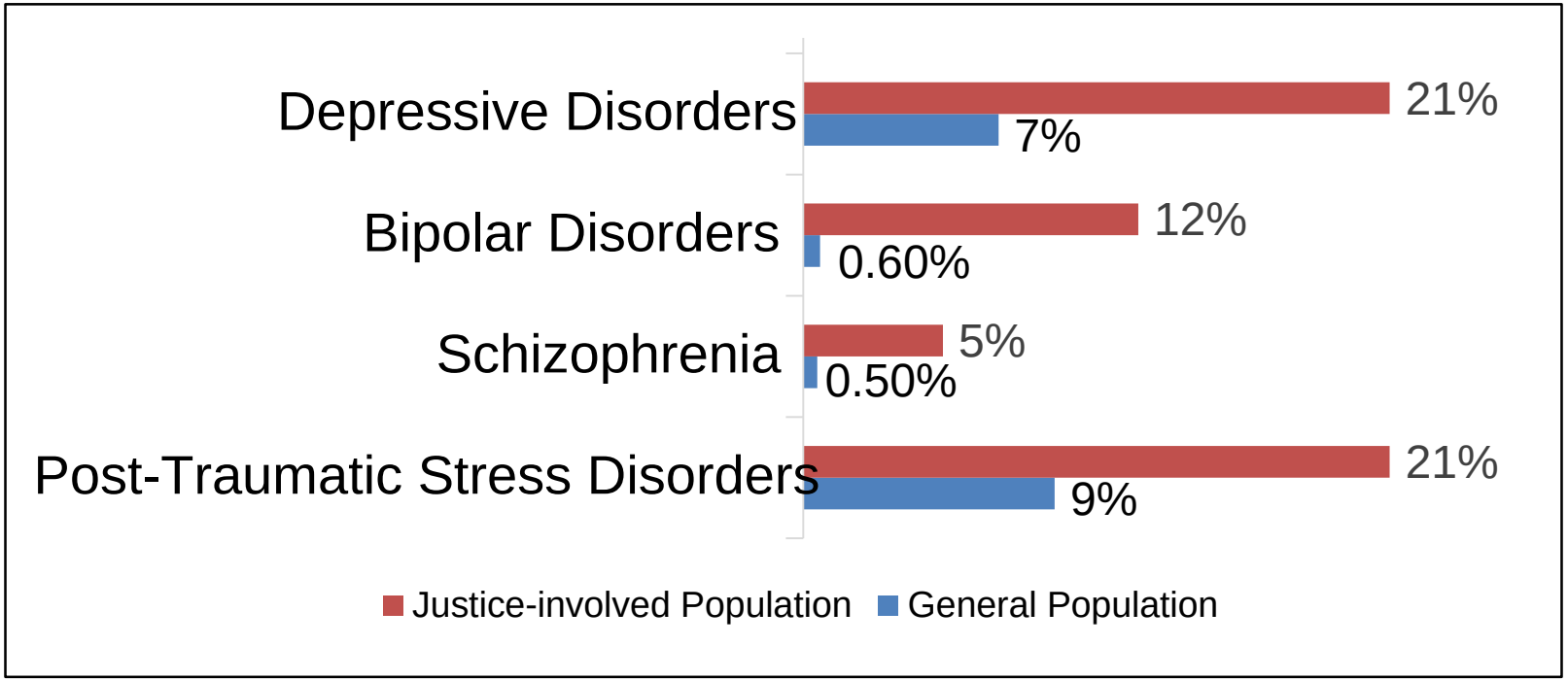


How common are mental and substance use disorders in the justice system?

Prevalence of Mental Disorders in Jails and Prisons



Prevalence of Mental Disorders in the Justice-involved Population



(Sources: Bureau of Justice Statistics 2007; American Psychological Association, 2013)

Co

Outcomes related to co6i 1 g /TT0

Adverse Outcomes: People with Mental Illness

- Tend to rapidly cycle through the justice system.
- Stay in jail longer than other arrestees.
- Serve longer sentences in jail and prison.
- Have higher rates of technical violations.
- Have high rates of victimization in custody.
- Experience more frequent use of force by correctional staff.
- Are often placed in administrative segregation or solitary confinement, which worsens disorders.

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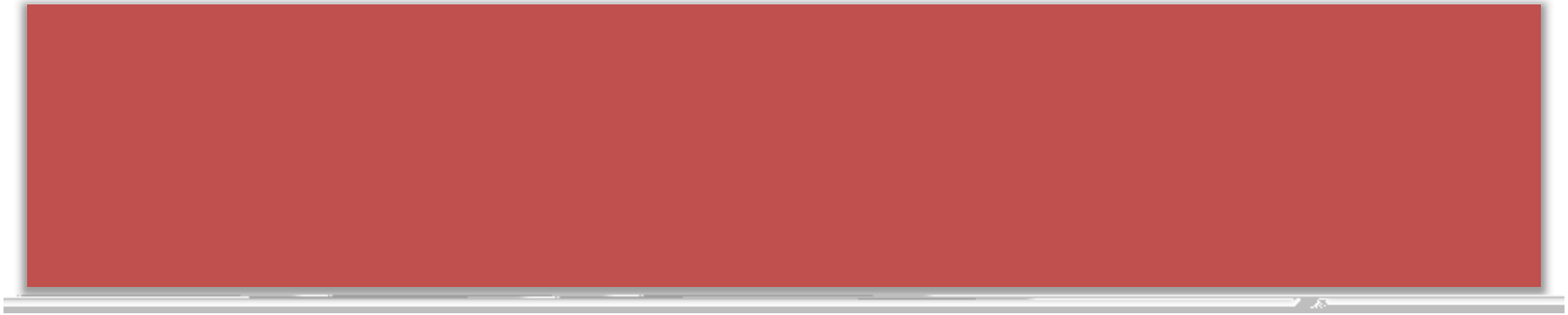
Factors Related to Poor Outcomes in the Justice System

- Few engaged in behavioral health treatment
- Lack of health insurance
- Few financial resources
- Homelessness
- Few social supports, vocational skills
- Similar levels of antisocial peers, beliefs, and behaviors as with other justice-involved people



Risk Factors for Criminal Recidivism

1. Antisocial attitudes
2. Antisocial friends and peers
3. Antisocial personality pattern
4. Substance use
5. Family and/or marital problems
6. Lack of education
7. Poor employment history
8. Lack of prosocial leisure activities
9. Post-Traumatic Stress Disorder (?)

(Source: Treatment Alternatives for Safe Communities (TASC) Center for Health and Justice and National Judicial College (NJC) , 2016)

Implications: Assessing and Treating CODs

1. Many justice-involved people need mental health and CODs treatment.

2. However, treating mental disorders is insufficient to reduce recidivism.

3. Assessment of CODs should examine a range of risk factors for recidivism.

4. CODs and mental health services should include a focus on major risk factors for recidivism.

Implications: Assessing and Treating ńg5ă ó ŏ2ƴű ΩŘ ú

5. All mental health treatment for justice-involved people should be designed as COD treatment.

    ‡Mental health courts

    ‡Residential treatment

    ‡Crisis stabilization and triage units

Functional aspects of COD

Cognitive and Behavioral Impairment related to CODs

- Short attention span and difficulty concentrating for extended periods of time
- Difficulty comprehending, remembering, and integrating information (e.g., verbal)
- Disorganization in major life activities (e.g., lack of structure in daily activities)

- Poor problem-solving skills and planning abilities
- Poor response to confrontation and stressful situations
- Impaired social functioning
- Psychosocial functioning worsened by the presence of the other type of disorder

Screening and assessment of CODs in the justice system2

Importance of Screening and Assessment for CODs

- There are high prevalence rates of behavioral health and related disorders in justice settings.
- Persons with undetected disorders are likely to cycle back through the justice system.
- Screening and assessment allows for treatment planning and linking to appropriate treatment services.
- Programs for justice-involved people using comprehensive assessment have better outcomes.

Differences Between Screening and Assessment of CODs

Screening

- Is brief (5-8 mins.), can be self-administered, and no extensive training is required.
- Is typically inexpensive.
- Yields a yes/no determination (e.g., about the likely presence of a behavioral health disorder).
- Assists in early identification of problems and flags the need for a more comprehensive assessment.
- Does not yield adequate information to determine level of care.

Differences Between Screening and Assessment of CODs

Assessment

- Occurs after initial screening, usually via interview.
- Is lengthy (45-120 mins.) and clinical training is required.
- Costs to purchase evaluative software.
- Yields information to determine diagnosis, level of care, and to develop a case plan and/or treatment plan.
- Examines the interactive nature of mental and substance use disorders.

Screening for Withdrawal Severity

- Opiates
  - Clinical Opiate Withdrawal Scale (COWS)
- Alcohol
  - Clinical Institute Withdrawal Scale for Alcohol-Revised (CIWA-Ar)

‡ Usewelcoming and non-judgmental approach to offer that staff are

Differences between Risk Screening and Risk Assessment

Risk Screening

- Is brief to administer, does not require extensive training.
- Has single items Œ o š š } ^ • š š] _ v ^ Ç v u] _ (š
- Yields estimate of risk level (low, medium, high).

Risk Assessment

- Is lengthy, training is required, done typically via interview.
- Multiple items Œ Œ o š š } ^ • š š] _ v ^ Ç v u] _
- Yields profile scores in different areas contributing to criminal risk and an overall risk score.

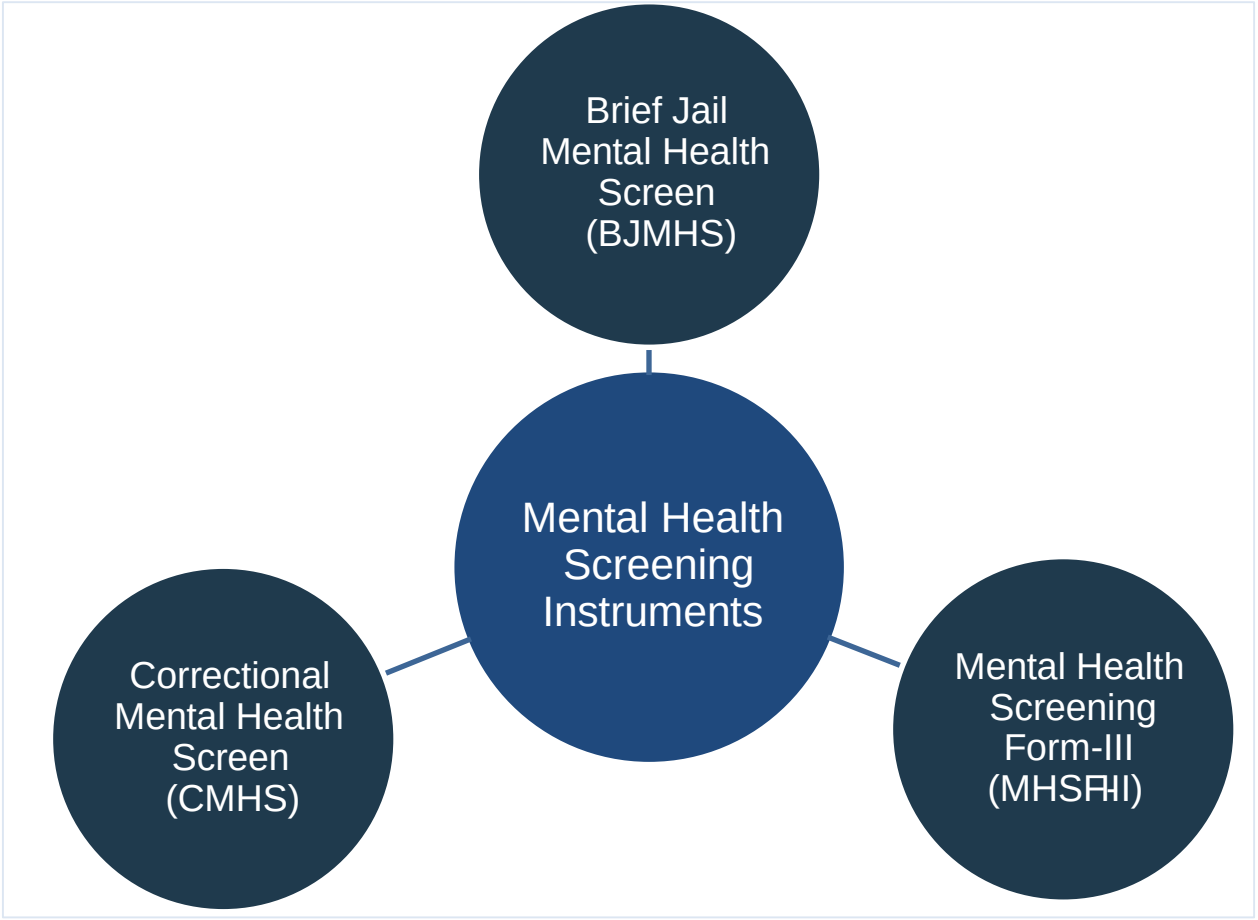
Considerations in Screening for Co-occurring Disorders

- } v [exclude from programs based on diagnosis of mental disorder or substance use.
-

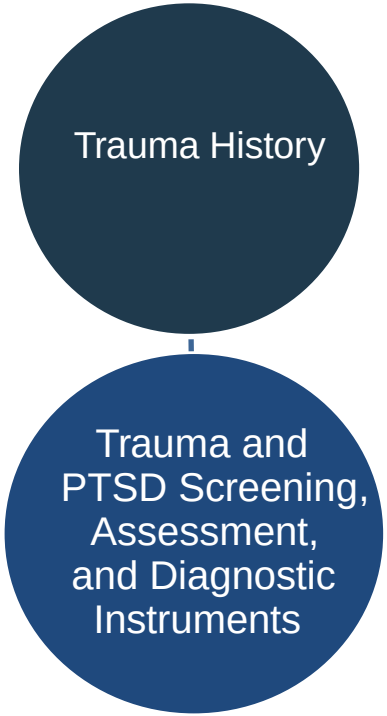
Considerations in Selecting Screening and Assessment Instrumen

- Use of standardized instruments
- Reliability and validity of instruments
- Ease of use and training requirements
- Cost and availability
- Use and psychometric properties in justice settings

Recommended screening and assessment instruments for use with justice-involved people


Brief Jail Mental Health Screen (BJMHS)
Mental Health Screening Instruments
Correctional Mental Health Screen (CMHS)
Mental Health Screening Form-III (MHSF-III)

Substance Use Screening


Trauma History
Trauma and PTSD Screening, Assessment, and Diagnostic Instruments

Monograph Describing Risk Assessment Instruments

Desmarais, S. L., & Singh, J. P. (2014). New York: Council of State Governments - Justice Center.

Available for download online.

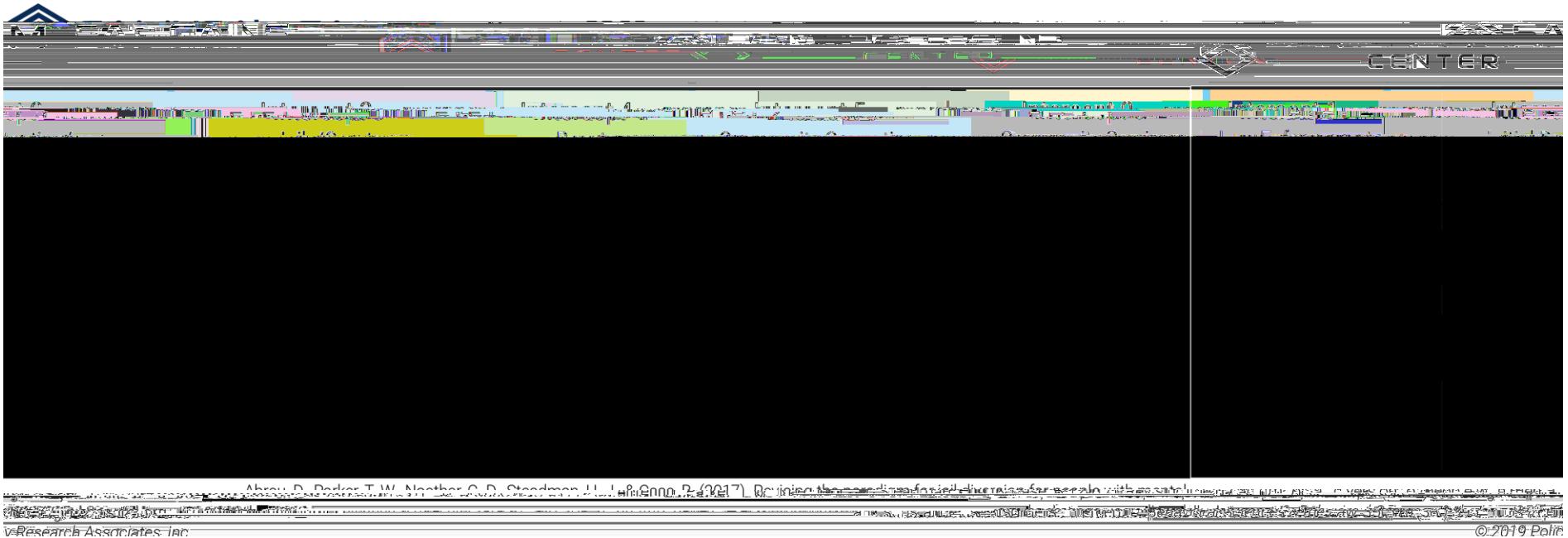

Substance Use Disorders
Mental Disorders
Interactive Nature of Disorders
Functional Impairment
Risk Assessment
Psychosocial Background and History
SU and COD Assessment Domains


Instruments
to Assess and
Diagnose
Co-Occurring
Co-Occurring

Detecting Co-Occurring Disorders in the Justice System

- Early detection is key.
- : Provide screening at each

Sequential Intercept Model



Intercept 0: Community Services

‡

Intercept 1: Law Enforcement

‡ Fluid Screening Process
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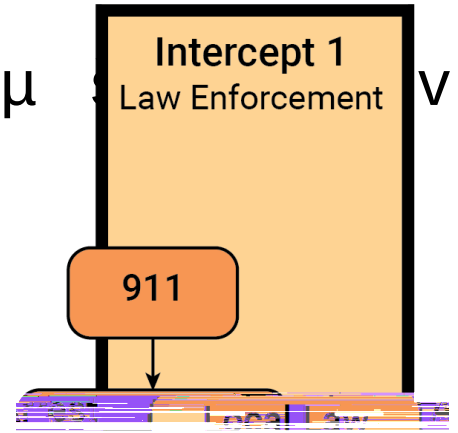
  - ƒ Observation of acute symptoms
  - ƒ Referral to acute care settings

‡ Specialized Training and Teams
  - ƒ Mental Health First Aid training
  - ƒ Crisis Intervention Teams

‡ Community Triage Centers



Intercept 2: Initial Detention and Initial Court Hearings

- Goal: Quickly determine eligibility for early exit from custody and acute needs.
- Brief standardized screening
  - For CODs and criminal risk
- Settings
  - Jail booking
  - Pre-trial services
  - Court clinics and diversion programs

Intercept 3: Jails/Courts

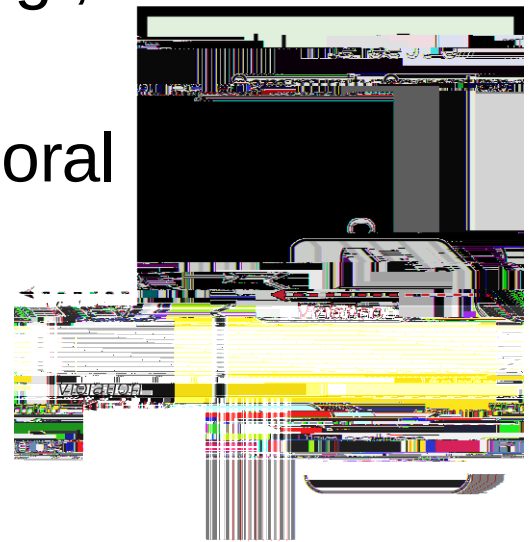
‡ At jail booking:Identify

Intercept 4: Reentry

- At prison reception: Identify need for in-prison services and further assessment.
- Reentry planning
  - Ongoing service needs
  - Reassess criminal risk
  - Coordination with community supervision and treatment to develop service plans

Intercept 5: Community Corrections

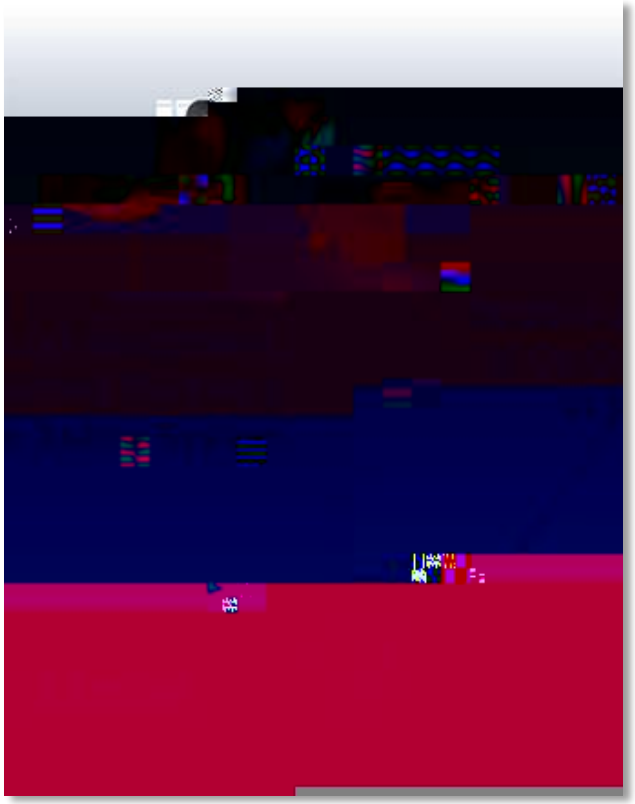
- Goal: Determine type and intensity of supervision and services needed (e.g., specialized supervision caseloads)
- Use standardized screens for behavioral health disorders.
- Conduct standardized needs/risk assessment and develop case plan.



Summary of Key Points

- High rates of co-occurring disorders exist in the justice system.
- Universal screening for mental and substance use disorders, trauma/PTSD, and criminal risk is needed.
- Many evidence-based screening and assessment instruments are available.
- Early detection and triage is key.
- There are multiple intercepts for screening and assessment.

Additional Materials for Download



Available on the SAMHSA store!