

## *Montana Commission on Sentencing*

*Behavioral Health  
November 17*

**Council of State Governments Justice Center**

**Carl Reynolds, Senior Legal and Policy Advisor**

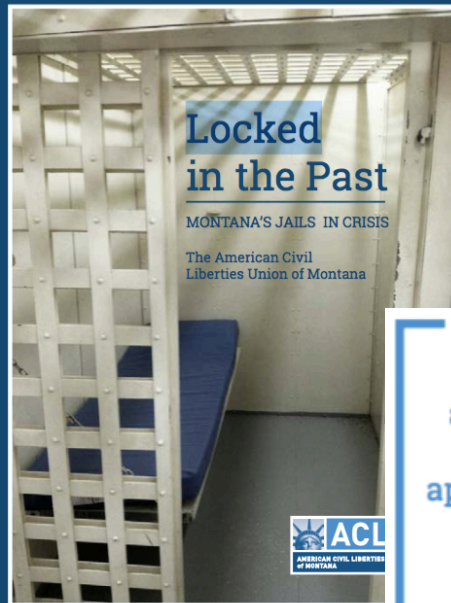
**Steve Allen, Senior Policy Advisor**

**Chris Fisher, Senior Policy Advisor**

**Karen Chung, Policy Analyst**

**David Sisk, Policy Analyst**

# Behavioral healthcare challenges in corrections are complex and involve multiple systems.



"So many people are in jail because they don't have appropriate services. It's just sad."

—Yellowstone County Detention Center Administrator



"You can't throw someone in jail for being crazy."

—Musselshell County Sheriff



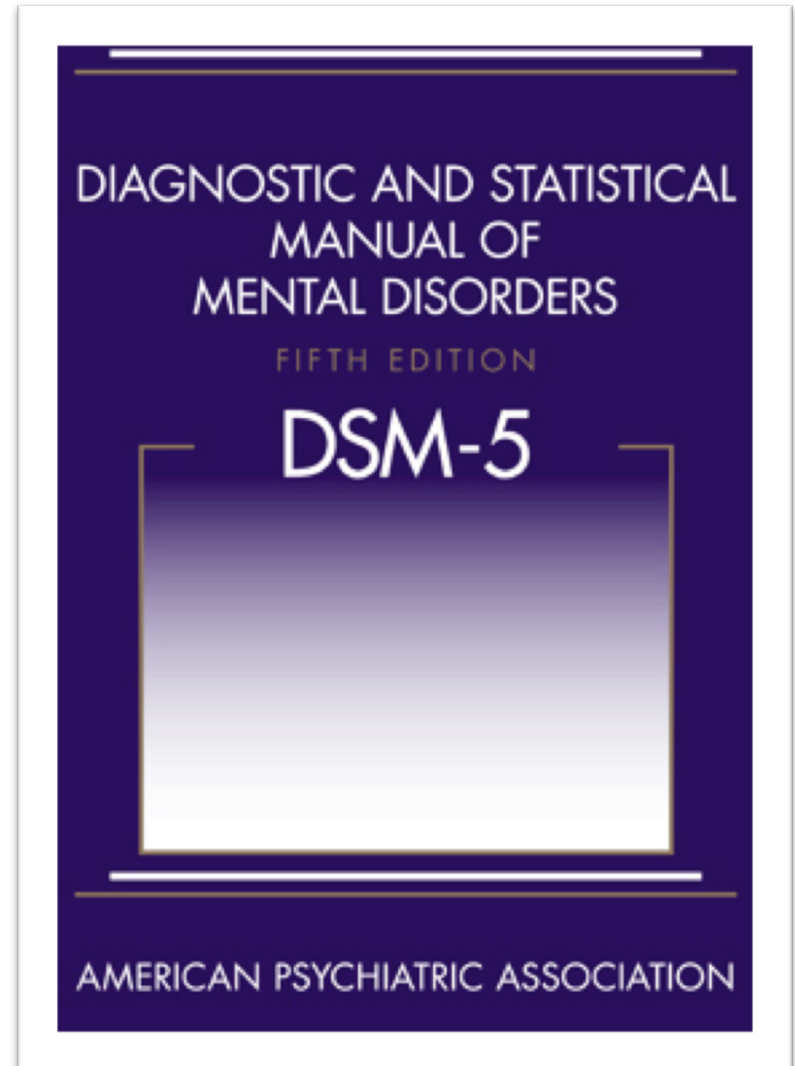
Most people in the justice system have multiple risks and needs.

Objective	Public Safety ↔ Public Health	
<b>Risk</b>	<ul style="list-style-type: none"> <li>• Recidivism</li> <li>• Violence</li> </ul>	<ul style="list-style-type: none"> <li>• Relapse</li> <li>• Decompensation</li> </ul>
<b>Needs</b>	<ul style="list-style-type: none"> <li>• <b>Criminal Thinking*</b></li> <li>• Associates</li> <li>• Drugs &amp; Alcohol</li> <li>• Family &amp; Relationships</li> <li>• Work/School</li> <li>• Lifestyle</li> </ul>	<ul style="list-style-type: none"> <li>• Substance Abuse</li> <li>• Mental Illness</li> <li>• Co-occurring</li> <li>• Physical health</li> </ul>

\*Most predictive

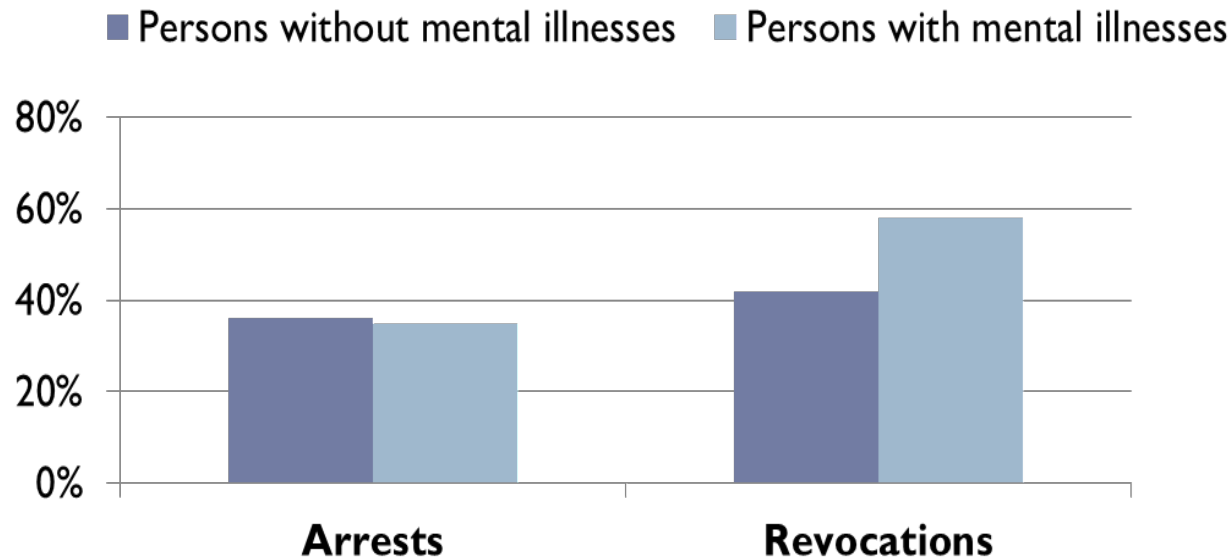
Behavioral health encompasses both mental health and substance use.

- Mental Illnesses
  - Psychotic Disorders
  - Mood Disorders
  - Bipolar
- Substance Use Disorders
  - Alcohol
  - Other drugs
- Severity
- Co-occurring disorders



# Behavioral health complexities impact successful re-entry and length of stay in jails and prisons.

## Criminal Justice Outcomes for Persons with and without Mental Illness



Screened 2,934 probationers for mental illness:

- 13% identified as mentally ill
- Followed for average of two years

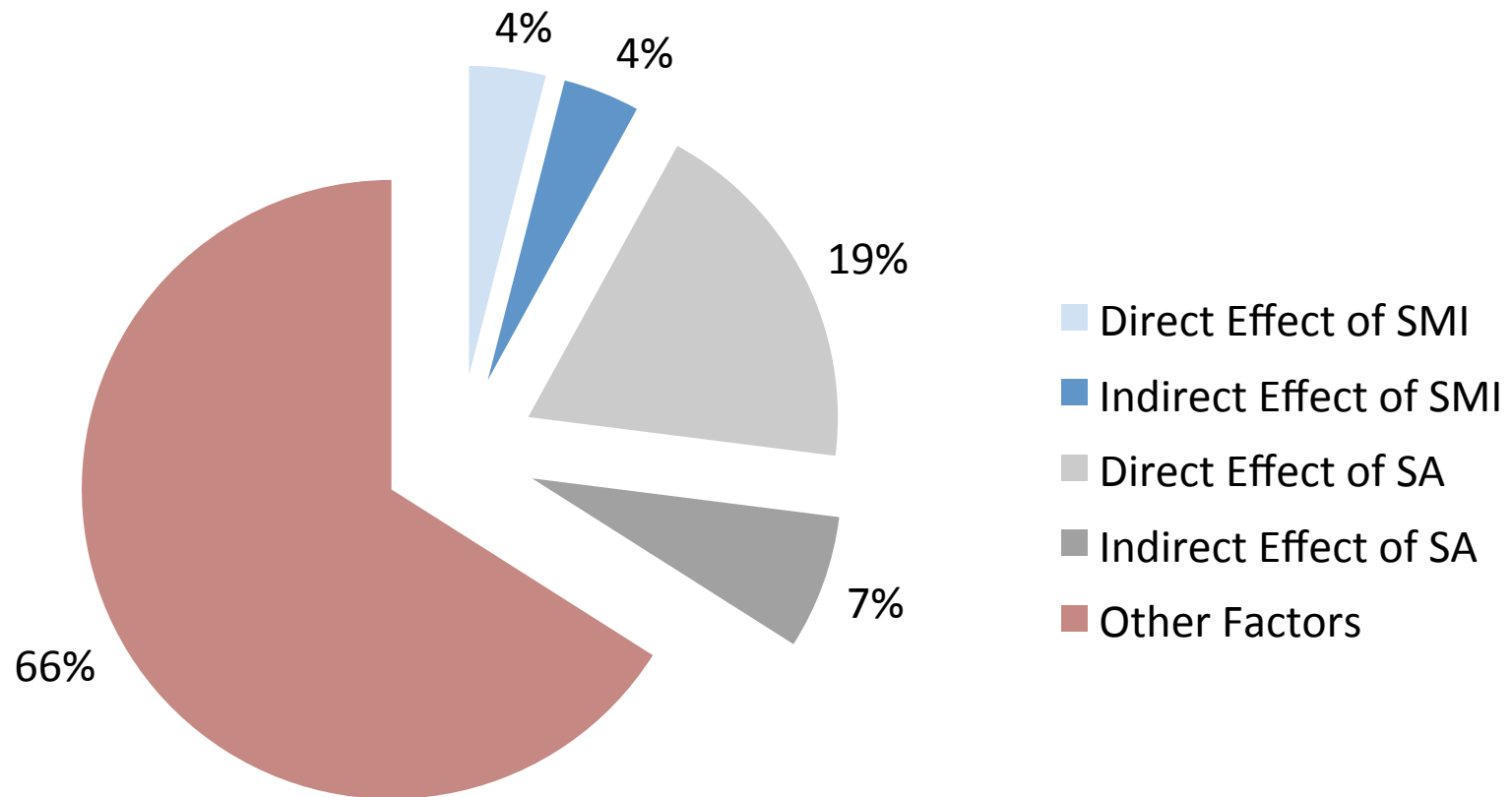
**No more likely to be arrested ...**

**... but 1.38 times more likely to be revoked**

Source: Vidal, Manchak, et al. (2009)

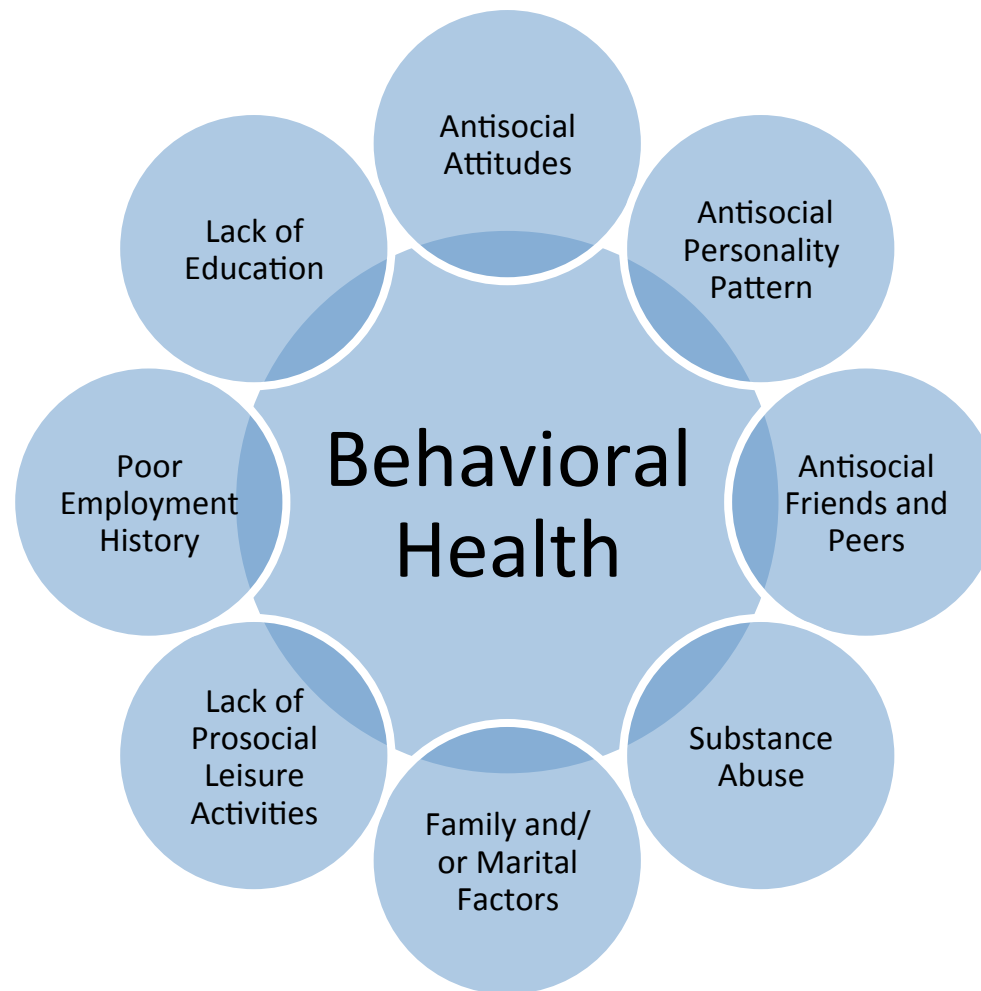
# Incarceration is not always a direct product of mental illness.

**How likely is it that the inmates' offenses were a result of serious mental illness (SMI) or substance abuse (SA)?**



Source: Junginger, Claypoole, Laygo, & Cristina (2006)

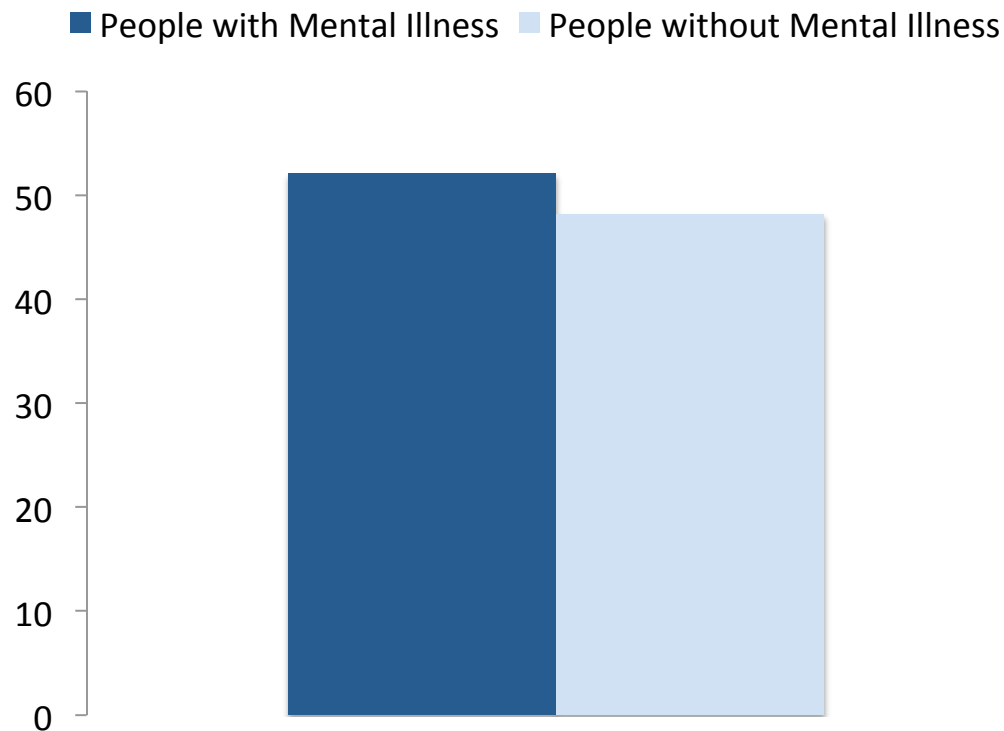
# Behavioral Health Risk and Responsivity Factors





# People with mental illnesses have more risk factors that predict recidivism.

## Average LS-CMI Risk Assessment Scores for Persons with and without Mental Illness



*Risk factors are more predictive of recidivism than the presence of a mental illness.*

Source: Skeem, Nicholson, & Kregg (2008)



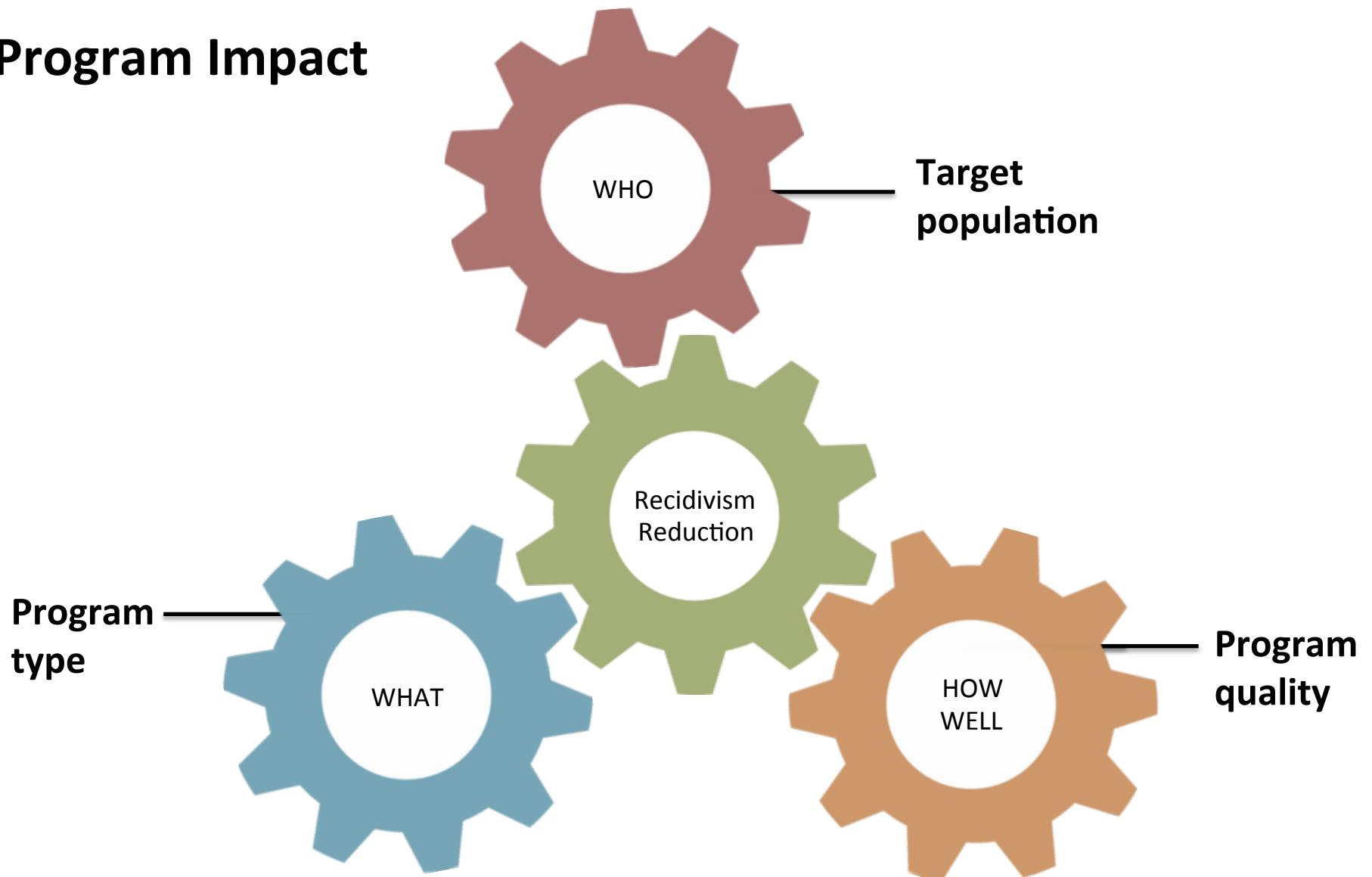
High rates of co-occurring substance use disorders in corrections further complicate effective treatment delivery.

**TABLE 1. Estimated Proportion of Adults with Mental Health, Substance Use, and Co-occurring Disorders in the U.S. Population and under Correctional Control and Supervision<sup>†</sup>**

	General Public	State Prisons	Jails	Probation and Parole
Serious Mental Illness	5.4% <sup>21</sup>	16% <sup>22</sup>	17% <sup>23</sup>	7–9% <sup>24</sup>
Substance Use Disorders (Alcohol and Drugs) — Abuse and/or Dependence	16% <sup>25</sup>	53% <sup>26</sup>	68% <sup>27</sup>	35–40% <sup>28</sup>
Drug Abuse Only <sup>29</sup>	1.4%	17%	18%	N/A
Drug Dependence Only <sup>30</sup>	0.6%	36%	36%	N/A
A Co-occurring Substance Use Disorder When Serious Mental Illness Is Diagnosed <sup>†</sup>	25% <sup>31</sup>	59% <sup>32</sup>	72% <sup>33</sup>	49% <sup>34</sup>

# What makes effective corrections programs?

## Program Impact

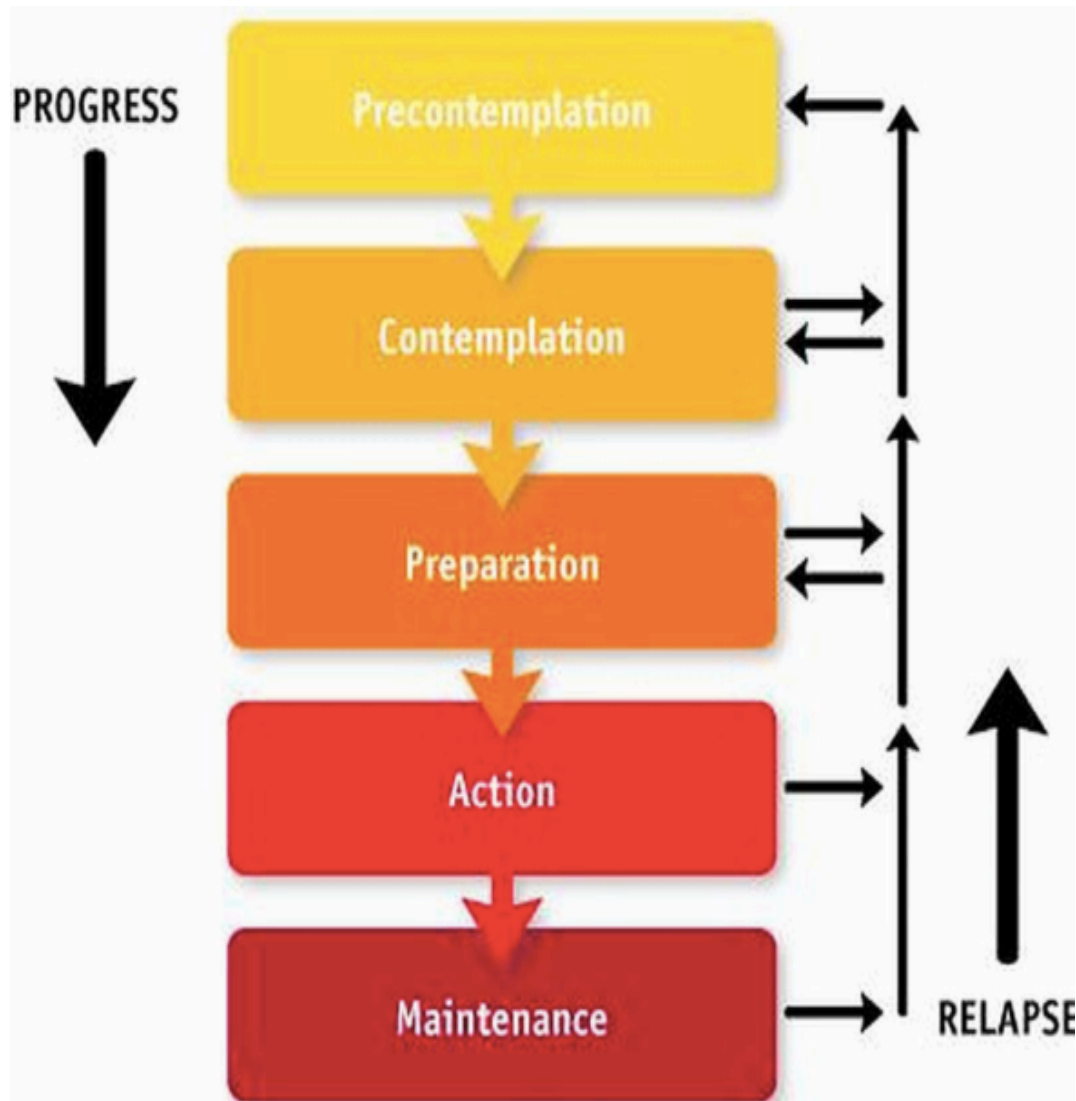


# National Institute on Drug Abuse

## Principles of Effective Substance Abuse Treatment

- Treat both the substance abuse and the criminality
- Treatment takes time
- Collaboration is critical
- Individualize treatment
- Address co-occurring disorders
- Mandatory treatment is effective

Effective behavioral health interventions enhance motivation to change.

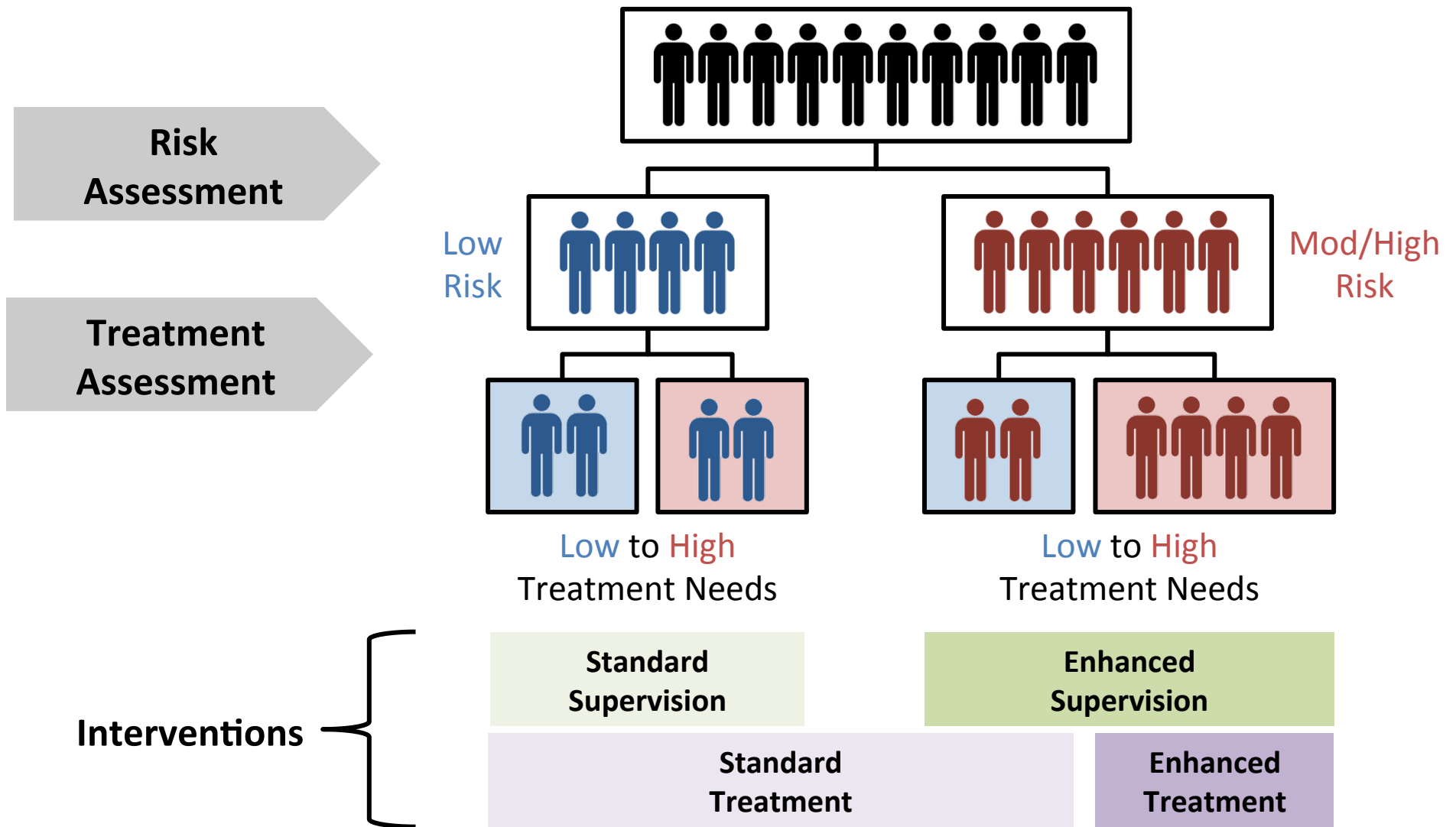


A simple truth...

“People are usually more convinced by reasons they discovered themselves than by those found by others.”

*-Blaise Pascal*

# Higher risk and higher complexity cases require specialized interventions



# Effective systems ensure a continuum of services to provide the right services at the right time

**High Risk, High Need  
High Level of Supports**

**Residential Treatment**



**Intensive Outpatient**

**Outpatient**

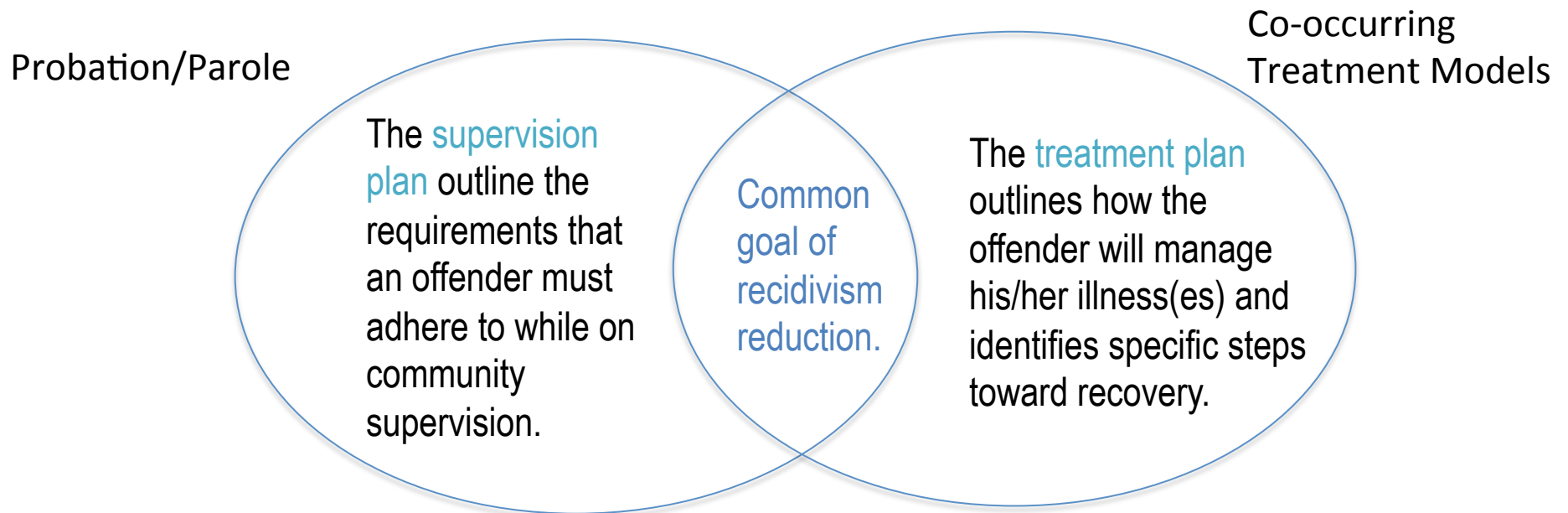
**Maintenance & Recovery**

**Low Risk, Low Need  
Low Level of Supports**

While people should start at the level of supports they initially need to address their risk and needs, they should “step down” into lower intensity and lower cost interventions

# Coordinated system responses are more effective at reducing recidivism.

Research suggests that for adults with mental illnesses, **combined supervision and treatment are more effective** at reducing recidivism than supervision alone.



Ideally, behavioral health and community corrections stakeholders should **come together to develop integrated treatment and supervision plans** for offenders.



# 1. Who is receiving services?



**The goal:** prioritize resources for individuals who are most likely to reoffend.

Research indicates that targeting moderate and high risk individuals for programming can have a substantial impact on recidivism reduction. Targeting low risk individuals for programming has the potential to increase recidivism.<sup>1</sup>

Addressing multiple criminogenic needs will have a greater impact on reducing recidivism for moderate and high risk individuals than only addressing one criminogenic need, or multiple non-criminogenic needs.<sup>2</sup>

1. Christopher T. Lowenkamp, Edward J. Latessa and Alexander M. Holsinger, "The Risk Principle in Action: What Have We Learned from 13,676 Offenders and 97 Correctional Programs?" *Crime and Delinquency* 52, no.1 (2006): 77-93.

2. D. A. Andrews and James Bonta, *The Psychology of Criminal Conduct*, 5<sup>th</sup> ed. (New Providence, NJ: Mathew and Bender & Company, Inc., 2010).

## 2. What types of services and supports are provided?



**The goal:** rely on approaches that have a demonstrated impact on reducing recidivism while enhancing recovery.

### 3. How well are programs are programs being delivered?



**The goal:** ensure that programs are being implemented with quality and fidelity, and that outcomes are being evaluated.

#### **Assessment**

- Programs are routinely assessed for quality & effectiveness
- Programs that fall short of expected standards are improved.

#### **Training**

- Facilitators are trained regularly in evidence-based practices
- Program evaluators are trained to evaluate programs

#### **Data Monitoring**

- Program attendance and quality of participation are tracked, by individual
- Program completion is tracked, by individual
- Recidivism measures are adopted and tracked, by individual and by type of program

# Diagnosing Current Practices in Montana

## **CSG Justice Center staff will:**

- Take stock of different types of programs in institutional and community settings
- Conduct a review of program curricula
- Review administrative policies on risk assessments and programs
- Analyze risk assessment and and program placement practices
- Visit with treatment providers
- Observe programs and current practice on site
- Analyze program outcomes with available data