

Executive Summary

Since 2001 California, through the Council on Mentally Ill Offenders (COMIO), has recognized that individuals living with mental illness are at risk of becoming criminally involved without access to support and needed services. As a 12-member council chaired by the Secretary of the Department of Corrections and Rehabilitation (CDCR), COMIO is charged with investigating, identifying, and promoting cost-effective strategies that:

- Prevent adults and juveniles with mental health needs from becoming offenders,
- Improve services for adults and juveniles with mental health needs who have a history of offending, and
- Identify incentives to encourage state and local criminal justice, juvenile justice, and mental health programs to adopt such approaches.

Priorities for 2016

COMIO elected to continue to work on the three priority areas identified in 2015 with enhanced focus:

- ❖ Diversion – Overcoming Barriers to Build Capacity for Effective Interventions,
- ❖ Training – Supporting Skills and Competencies Beyond First Responders, and
- ❖ Juvenile Justice – Understanding and Addressing the Needs of a Changing Population.

Key Themes

Individuals with mental illness are a growing proportion of the jail and prison population putting at risk resources needed to support community alternatives. Waiting to address behavioral health needs due to incarceration will pull scarce resources towards the wrong end of the system. The time to invest in strategies that divert individuals from incarceration and enhance service and housing capacity for those with high needs and risks is now. Difficult decisions are ahead for local and state policymakers. This report provides guidance and encourages decision-making that supports the individual living with behavioral health needs, as well as, the various systems trying to serve that individual and fulfill their own obligations and duties.

Appendix A lists all key findings and recommendations from each of the three priority sections. Below is a summary of the most pertinent themes raised that influenced specific findings and recommendations:

- The stigma associated with mental illness, substance use disorder, and justice status must be recognized and not tolerated to ensure that policies and practices do not perpetuate inequities.
- Assumptions about what works and does not work must be challenged by insisting on measuring both reductions in recidivism and behavioral health symptoms.

- The majority of justice-involved individuals with mental illness have a co-occurring substance use disorder which complicates treatment and recovery. Access to adequate services for co-occurring disorders and medical conditions with qualified staff is necessary.
- Sharing sensitive information, both health and justice data, is essential to target efforts to prevent incarceration.
- Assessment tools must be utilized to identify the level of risk and need of each justice-involved individual with mental illness to assure that appropriate treatment and services are provided and directed towards reducing recidivism.
- Maximize the use of federally supported Medi-Cal funding in all diversion efforts.
- The housing crisis, high cost and accessibility of housing, and stigma towards justice-involved individuals with mental illness are real and present barriers to efforts to build and provide community alternatives to incarceration whether it be inpatient facilities, crisis residential, group homes, or independent living. Broad, comprehensive, and creative efforts beyond addressing the needs of the homeless or at-risk of homelessness are needed.
- Support expanded efforts to keep individuals with mental illness out of jails through examining bail and pre-trial detention policies that have a disproportional impact on individuals with mental illness.
- Consider how mental illness as a basis for diversion could be expanded. Review which offenses could be additionally considered for authorization of diversion.
- Crisis response is not just about trained first responders. What is needed is a planned response that goes beyond the initial contact and leads to ongoing treatment in the community. Without developing these capacities, no amount of training can resolve law enforcement's current burden.
- Law enforcement and community correctional officers are faced with an increasingly challenging mental health population. They need opportunities to build skills and support their own well-being so they can perform an increasingly demanding job.
- High-risk and high need justice-involved youth are congregating in detention facilities. Continued efforts to ensure the "difficult" to serve youth get the services they need, especially substance use treatment.

- At the state and local level prioritize support for data infrastructure, with the state only collecting data needed to monitor trends to inform policies and practices. Support local entities gain the capacity and access to further research and evaluation efforts on best practices.

Future Directions

2016 represented a year of change for COMIO with the addition of new leadership, members, and staff. COMIO embarked on efforts to strengthen our relationships with key partners across criminal justice and behavioral health systems. During this process we recognized a need to focus efforts on building bridges across systems to improve understanding of different perspectives and promote problem-solving to prevent incarceration.

Change has many positive outcomes, including an opportunity to look at COMIO's priorities and accomplishments and adjust to seize existing opportunities and tackle challenges. 2017 will be a year of further change by re-structuring committee and council meetings. This will allow for more intensive issue-specific work in fewer areas with more input from state and local experts and stakeholders.

To follow COMIO's work and to receive information about workshops and meetings, please visit our website at www.CDCR.ca.gov/COMIO/ and subscribe to our monthly newsletter by emailing comionews@gmail.com.