

# TREATMENT ADVOCACY CENTER



## Eliminating Barriers to the Treatment of Severe Mental Illness



The Treatment Advocacy Center advocates for the **reform of laws, policies and practices** that prevent those with serious mental illness (SMI) from receiving adequate & timely treatment.

# Treatment Advocacy Center Office of Research & Policy

Conducts independent studies & policy analysis on major, often overlooked mental health issues.

## Emptying the 'New Asylums'



**A Beds Capacity Model to  
Reduce Mental Illness Behind Bars**

January 2017



A REPORT FROM THE  
**OFFICE OF RESEARCH  
& PUBLIC AFFAIRS**

TreatmentAdvocacyCenter.org/  
new-asylums

## RAISING CAIN



*The Role of Serious Mental Illness  
in Family Homicides*



A Report from the  
**Office of Research & Public Affairs**

June 2016

## Overlooked in the Undercounted



**The Role of Mental Illness in  
Fatal Law Enforcement Encounters**



A REPORT FROM THE  
**OFFICE OF RESEARCH  
& PUBLIC AFFAIRS**

# Severe mental illness

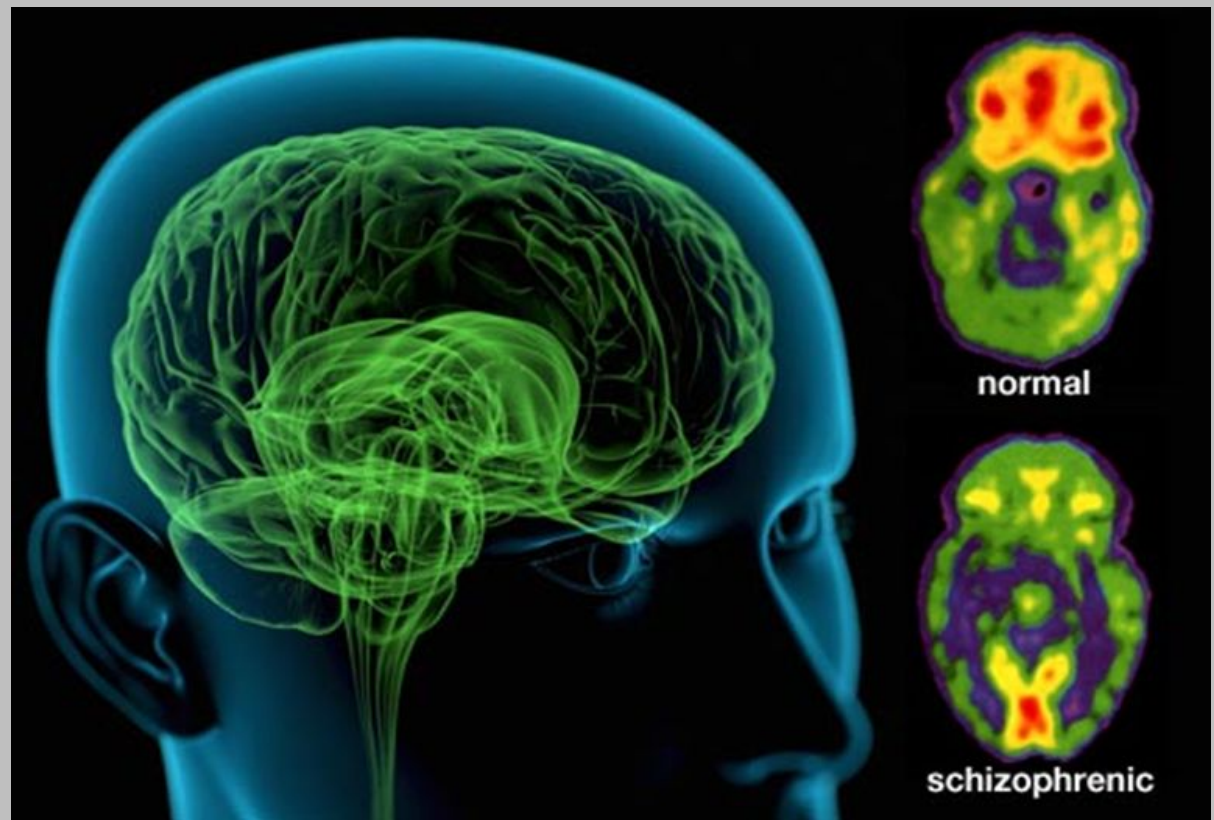


# Severe mental illnesses

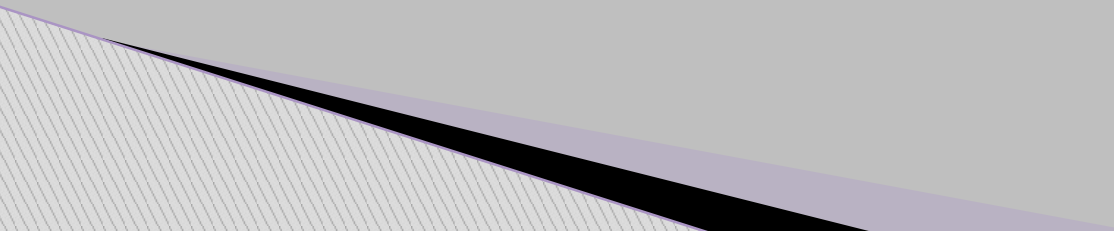
Chronic, currently incurable brain diseases

Cannot be prevented

ALL can benefit from timely treatment



# Psychotic Symptoms Can ...

- ▶ **Disorder** thinking
  - ▶ **Trigger** suspicion
  - ▶ **Reduce** memory
  - ▶ **Impair** communication
  - ▶ **Lead to failure** to follow instructions
  - ▶ **Cause** anxiety
  - ▶ **Create** a risk of violence
- 

# Anosognosia – impaired awareness of illness

**Anosognosia** impairs the ability to perceive one's own illness, seen in conditions like stroke, Alzheimer's and mental illness

Anatomically different than denial

Considered a primary factor in individuals with psychotic disorders not seeking or participating in treatment

*If I'm not sick, why take medicine?*

**Very common with SMI:**

- Prevalence in schizophrenia is roughly 50%
- Prevalence in bipolar disorder is roughly 40%

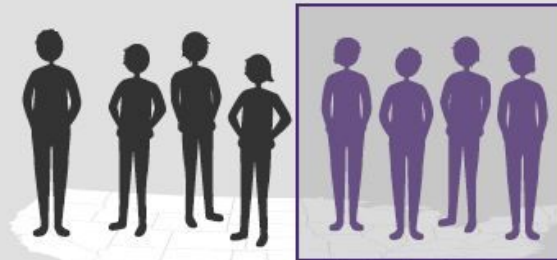
# The Mental Health Crisis





# What Happens When Serious Mental Illness Isn't Treated?

**8.1 million**  
people suffer from  
serious mental illness.



Every year,  
**3.9 million**  
people have **untreated**  
serious mental illness.

This leads to...

## POOR SHORT-TERM TREATMENT AND EMERGENCY ROOM BOARDING

**90%** of emergency physicians reported that patients with serious mental illness were being "held" in ERs for lack of hospital beds for psychiatric patients.



## VICTIMIZATION

Depending on the crime, individuals with severe mental illness are  
**2 - 140 times more likely to be victimized.**



# What Happens When Serious Mental Illness Isn't Treated?

## HOMELESSNESS

**169,000 homeless adults**

have untreated serious mental illness.



44 states and D.C. hold **more people with serious mental illness in jails and prisons** than the largest remaining psychiatric hospital.

## CRIMINALIZATION

Approximately **20%** of inmates in jails and **15%** of inmates in state prisons are now estimated to **have a serious mental illness.**

## FATAL LAW ENFORCEMENT ENCOUNTERS

People with untreated mental illness are **16 times more likely** to be killed during a police encounter.



Individuals with bipolar disorder have a suicide risk **15 times higher** than the general population, and suicide is the **most common** cause of death in schizophrenia.

## SUICIDE

44 states and D.C. hold **more people with serious mental illness in jails and prisons** than the largest remaining psychiatric hospital.

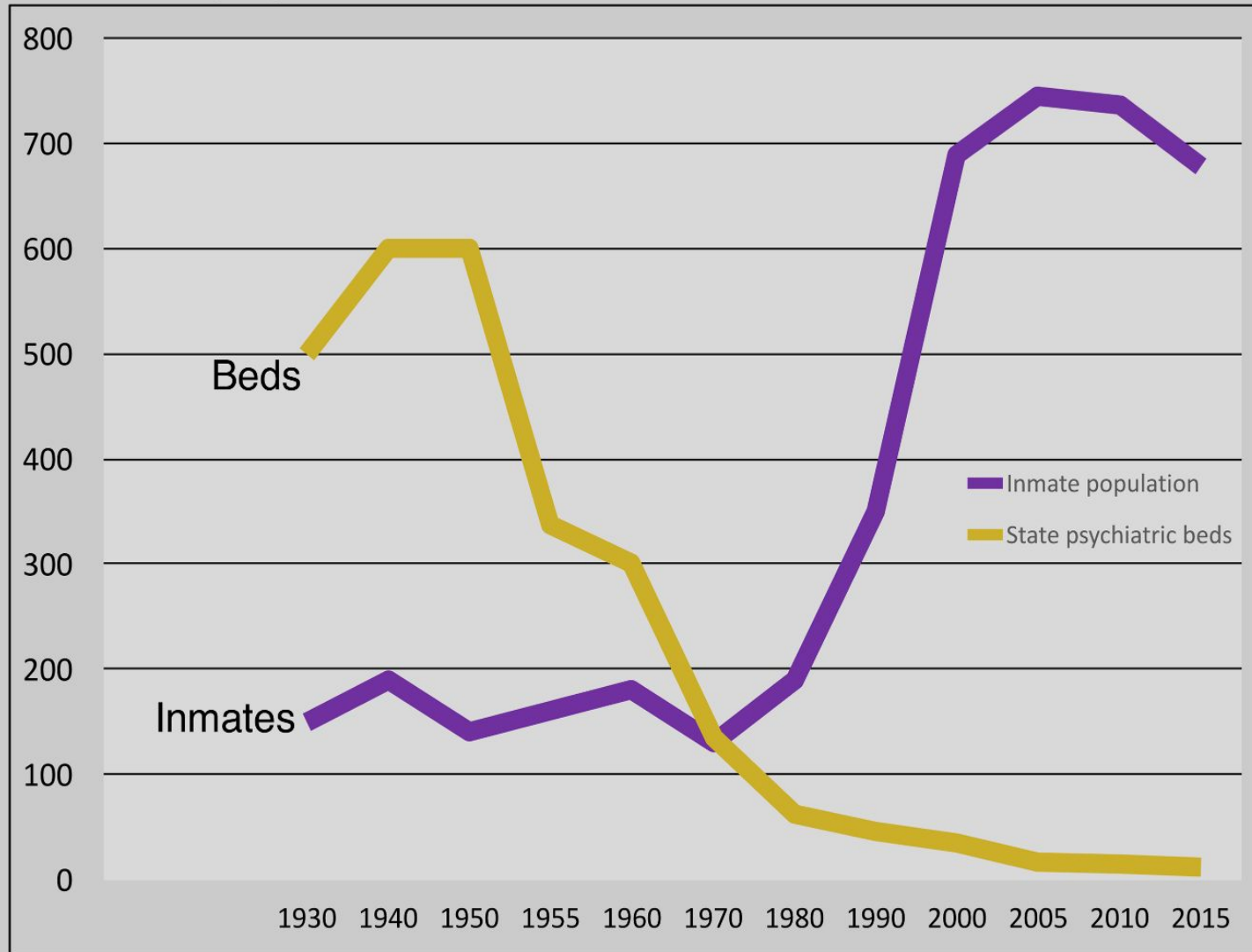
**95%**

of jails report having inmates with serious mental illness.



# Mental Illness Behind Bars

Per 100,000 people

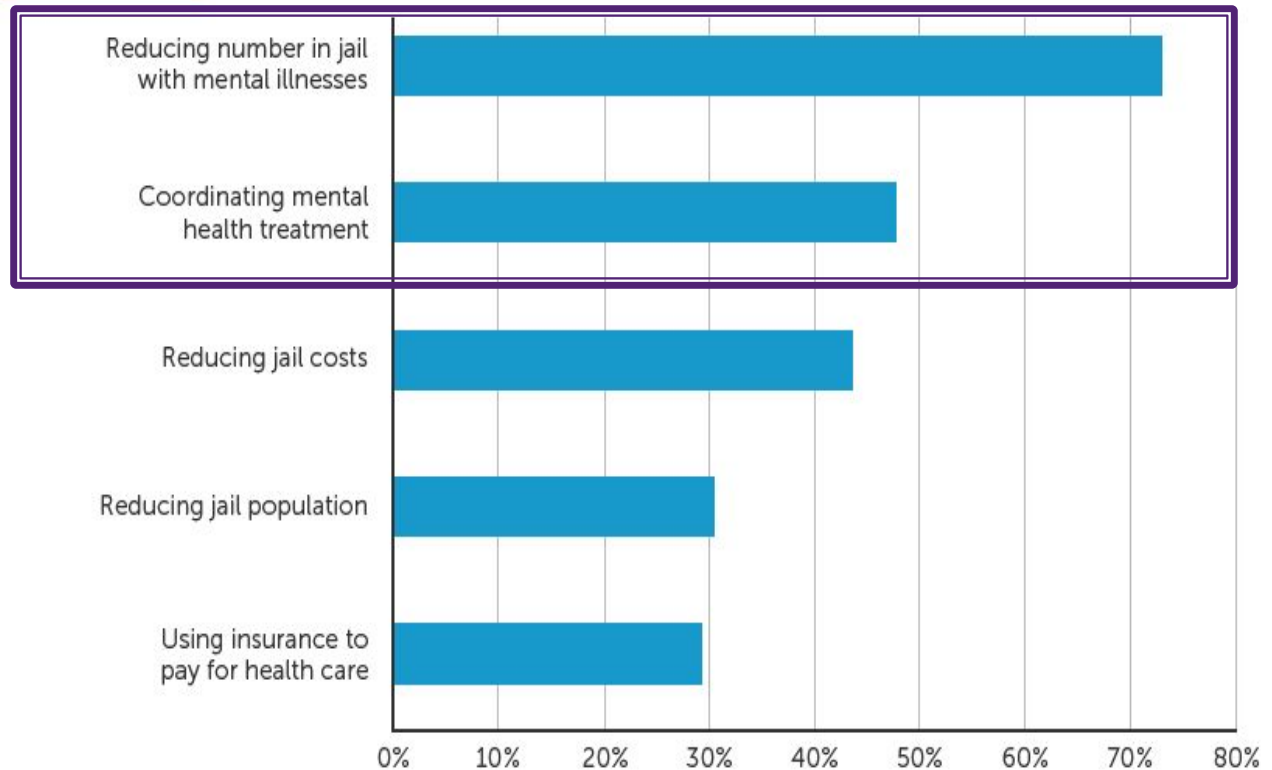


Bed data from Fuller, D. A., et al. June 2016. *Going going gone: Trends and consequences of eliminating state psychiatric beds*. Treatment Advocacy Center. & Harcourt, B. E. 2011. An institutionalization effect: The impact of mental hospitalization and imprisonment on homicide in the United States, 1934-2001. *The Journal of Legal Studies*. Incarceration data from Bureau of Justice Statistics. *Correctional Populations in the United States*.

# Impact on Corrections

**FIGURE 4.**

**TOP 5 CHALLENGES OF COUNTY JAILS, PERCENT OF RESPONDING COUNTIES, MARCH-APRIL 2015**



Source: NACo survey, March-April 2015.

# Impact on Taxpayers

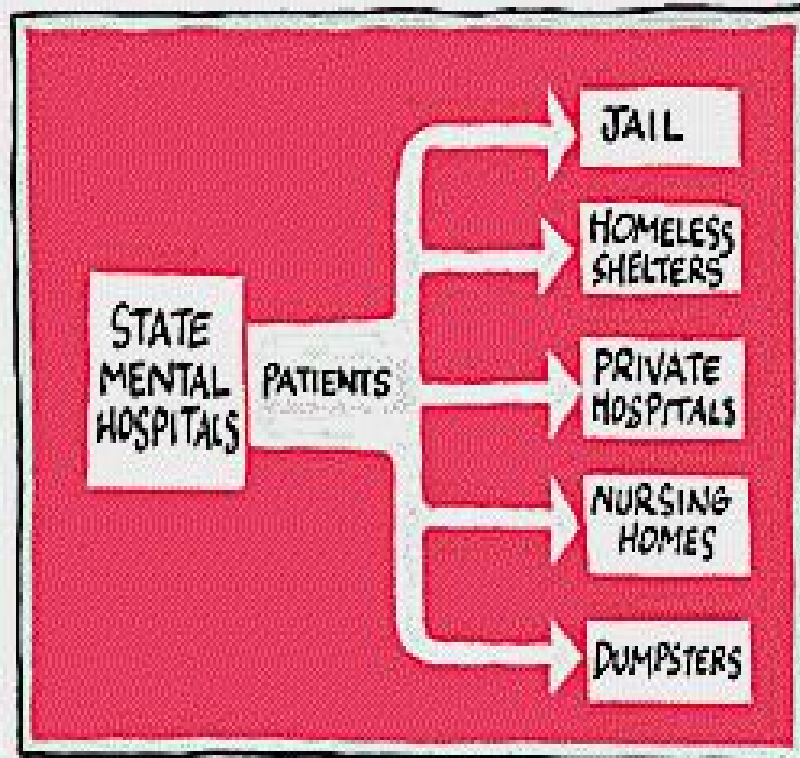
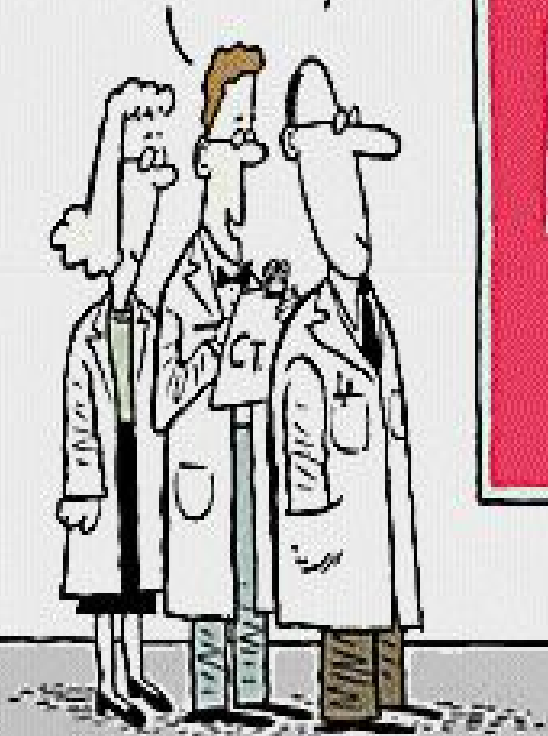
- ▶ Adults with SMI cost the criminal justice system **2 times** more than other adults
- ▶ County governments spend **\$9 billion** to jail pretrial defendants
- ▶ Individuals with SMI use **87%** more law enforcement resources
- ▶ Hospitalization of those with SMI costs **\$28 billion** per year



# How did we get here?




WE HAVE A  
PLAN THAT WILL  
SAVE EVEN  
MORE MONEY!



*Frederick* © 2008  
Frederick@comcast.com



# How did we get here?

- ▶ Treatment was previously provided to those with severe mental illness in psychiatric facilities that could offer appropriate care.
  - ▶ We shut down psychiatric hospitals and never created sufficient community services as promised.
  - ▶ Our policies failed to keep up with scientific research:
    - *Some* level of inpatient care will always be needed
    - Over-emphasis on violence as determinant for treatment & reliance on law enforcement to address system failures
    - Failure to account for anosognosia & overreliance on entirely voluntary participation
- 

# What can be done?



# Increase supply of psychiatric beds

- ▶ A good ratio of accessible, appropriate inpatient beds to population benefits the entire system.
  - Helps establish a full continuity of care
  - Allows individuals to become stable and allows for more effective transition to community
  - Reduces pressure on ERs, jails and law enforcement
  - Makes it possible to have more effective outpatient and community programs.
- ▶ IMD Exclusion – movement & opportunity
  - Regulatory relief
  - 1115 waivers
  - Federal movement

# Don't Put Me in a Box, Give Me a Bed Instead

## REAL PEOPLE. REAL STORIES.

There's no straightforward path when it comes to treating serious mental illness. What's far more common is a downward spiral from difficulty getting a diagnosis to the consequences of no treatment.



### Locked Out of My Brother's Care

After being in crisis for over nine months, our family was finally able to secure a bed in effective, supportive housing for Michael.

[Read more](#)



### Trapped by Devils and Evil Spirits

The evil spirits are after her again, telling her she's ugly and old, sabotaging her search for a job, telling her that she should kill herself.

[Read more](#)



### The Call That Everyone Dreads

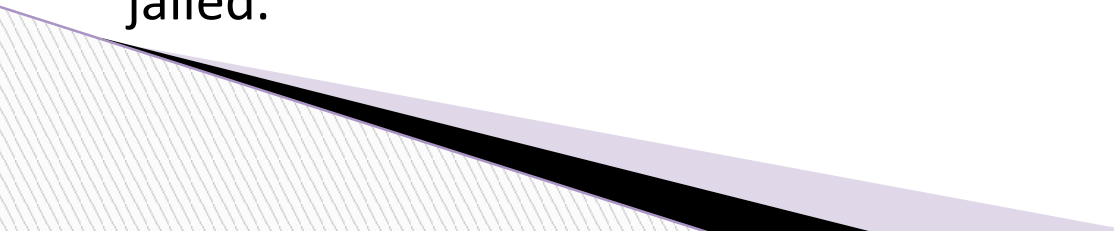
We didn't know that the conversation we had with him on August 31 would be our last.

[Read more](#)

# Increase use of assisted outpatient treatment

- ▶ SAMHSA, the federal agency administering new assisted outpatient treatment federal grants, defines AOT as:

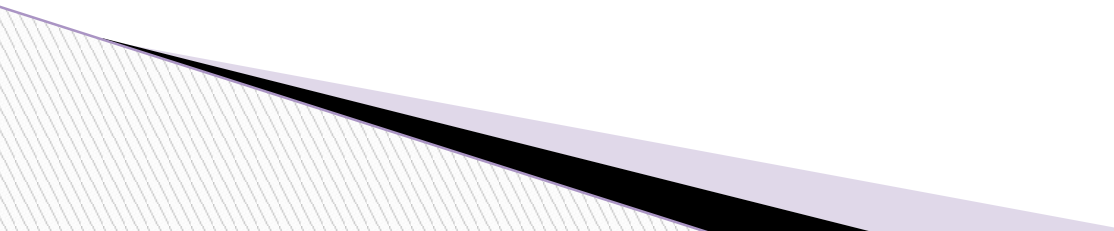
The practice of delivering outpatient treatment under court order to adults with severe mental illness who meet specific criteria, such as a prior history of repeated hospitalizations or arrest. AOT involves petitioning local courts to order individuals to remain in treatment within the community of a specified period of time. AOT participants are given due process protection, treatment and supportive services...

- ▶ The goal of AOT is to improve health and social outcomes for the individuals served in the program, such as increased healthcare utilization, improving behavioral health and other health outcomes, and reducing rates of homelessness and incarceration.
  - ▶ It is non-punitive – participants cannot be held in contempt, fined, or jailed.
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# Momentum increasing for use of AOT

- ▶ Some form of AOT now available in almost all states
- ▶ Groups who have announced support include:
  - National Alliance on Mental Illness
  - Department of Justice
  - American Psychiatric Association
  - International Association of Chiefs of Police
  - National Sheriffs Association
- ▶ SAMHSA & federal government are actively supporting the use of AOT throughout the nation
  - AOT demonstration grants
  - AOT implementation trainings
  - Creation of AOT fidelity standards and implementation modules
  - Inclusion of AOT in sequential intercept model and DOJ funding opportunities

# 21<sup>st</sup> Century Cures – addressing the mental illness crisis

- ▶ **Reforms SAMHSA to address severe mental illness crisis**
  - ▶ Creates a new Assistant Secretary for Mental Health and Substance Use Disorders, who will oversee SAMHSA and coordinate across the federal government, with emphasis on science and evidence based programs.
  - ▶ Establishes a new federal policy laboratory for mental health and substance use, to elevate and disseminate policy changes and service models that work based on evidence, research, and science.
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# 21<sup>st</sup> Century Cures – programmatic opportunities

## Funding and Strengthening Evidence-Based Treatment Programs for Severe Mental Illness (SMI)

- ▶ Strengthens and expands critical [Assisted Outpatient Treatment](#) (AOT) programs to help break the revolving-door cycle through a grant reauthorization and funding increase for states to implement AOT and permits states to use Department of Justice [grant funding for AOT](#) in civil courts as an alternative to incarceration.
- ▶ Grant program for [Assertive Community Treatment \(ACT\) teams](#) to provide critical wrap-around services in the community to people with SMI.
- ▶ Directs CMS to outline for states innovative opportunities to use [Medicaid 1115 waivers](#) to provide care for adults with serious mental illness
- ▶ Requires states to expend not less than 10 percent of their community mental health services block grant funding each fiscal year to support evidence-based programs that address the [needs of individuals with early serious mental illness](#), including psychotic disorders, regardless of the age of the individual at onset.
- ▶ Strengthens community response systems with [a grant program](#) to create databases on psychiatric beds, crisis stabilization units, and residential treatment facilities.

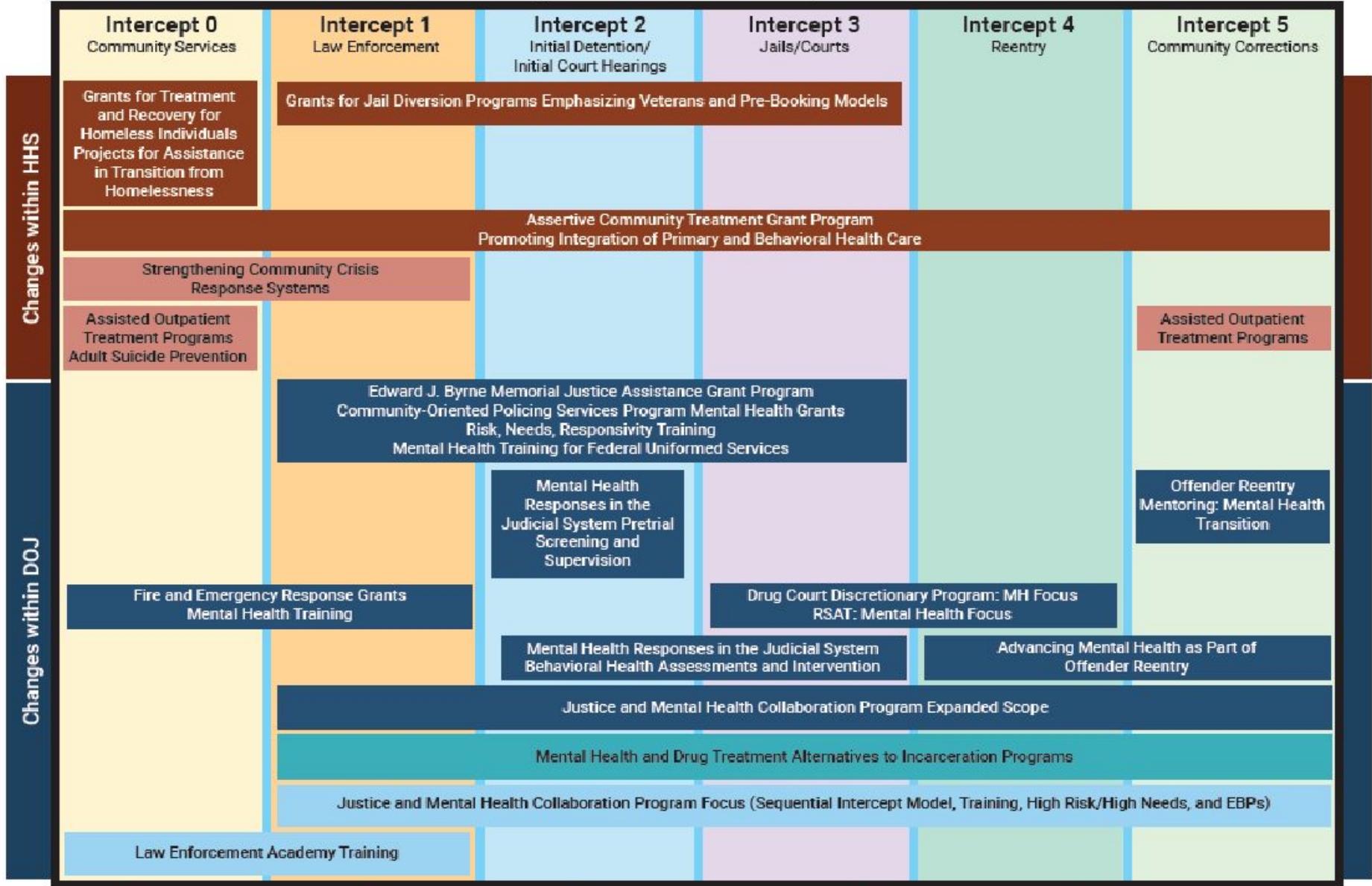


# 21<sup>st</sup> Century Cures – criminal justice coordination opportunities

## Decriminalizing mental illness

- ▶ Allows DOJ funding to be used for [civil AOT programs](#) to provide treatment opportunities before incarceration.
- ▶ Allows DOJ funding to be used for [Forensic Assertive Community Treatment Programs \(FACT\)](#) for individuals with severe psychiatric disorders in the criminal justice system.
- ▶ Provides avenues for better [screening and assessment](#) of people with mental illness in the criminal justice system.
- ▶ Allows DOJ funding to be used to provide assistance to individuals with SMI [transitioning out of jails and prisons](#), including housing assistance and mental health treatment.
- ▶ Provides additional grant opportunities to provide law enforcement and the court system with [Crisis Intervention Team \(CIT\) training](#) and [programs to divert people with SMI](#) from the criminal justice system.
- ▶ Reauthorizes the [Comprehensive Justice and Mental Health Act](#), which provides grants to support mental health courts and crisis intervention teams, training for law enforcement on mental illness, and teams to address frequent users of crisis services.

# The 21st Century Cures Act & the Sequential Intercept Model



■ HHS: Changes to Existing Programs    
 ■ HHS: New Programs or Activities    
 ■ DOJ: Changes to Existing Grants/Programs    
 ■ DOJ: New Grant Programs    
 ■ DOJ: Subtitle B Comprehensive Justice and Mental Health

# THANK YOU

