About 33 percent of adult DC residents arrested during June 2008 had some indication of mental health need in partner agency records between 2006 and 2011. Many of those arrested with mental health needs were not known to community mental health care providers. Most of the cohort members who had mental health needs (83 percent) were known to at least one criminal justice agency as having such a need between 2006 and 2011. Yet the Department of Mental Health knew about only 59 percent of the cohort members who had mental health needs during that same period.

Criminal justice agencies often failed to identify the mental health needs of the people that they encountered. Six hundred sixty-six cohort members with mental health needs came into contact with probation, pretrial services, or the jail as a result of the June 2008 arrest; however, almost half (46 percent) of this group was not identified as having a mental health need by any of the agencies during those contacts.

Thirty-three percent of the arrestees known to the Department of Mental Health as having a psychotic spectrum disorder or bipolar disorder were not identified as having a mental health need by any of the agencies during those contacts. Rates of identification of mental health need by the criminal justice agencies were even lower for people with other diagnoses, such as depression and anxiety disorders.

Closing the Gap describes findings from the Vera Institute of Justice’s District of Columbia Forensic Health Project—a study of the mental health needs of people arrested in the District of Columbia in June 2008. The project aims to provide criminal justice and health agencies with information to improve the delivery of mental health services to this population, support the design of new policies and programs, and establish a baseline against which to measure the effectiveness of new initiatives.

For the first time, records from DC criminal justice and mental health agencies were combined into an aggregate dataset, giving the research team an unprecedented opportunity to answer two basic questions:

> Which people arrested in DC have mental health needs?
> When this population comes into contact with local and relevant federal criminal justice agencies, do these agencies recognize their mental health needs?
METHODOLOGY

The study uses administrative data supplied by five government agencies to track criminal justice system involvement and markers of psychiatric need for a cohort of 2,874 people arrested by the Metropolitan Police Department of the District of Columbia (MPD) during June 2008. In addition to MPD data, researchers analyzed data from:

> the Pretrial Services Agency for the District of Columbia (which supervises people released to the community pending trial);
> the District of Columbia Department of Corrections (which oversees the jail);
> the Court Services and Offender Supervision Agency for the District of Columbia (the probation and parole agency); and
> the District of Columbia Department of Mental Health (the primary provider of public mental health services in DC).

RECOMMENDATIONS

The Vera Institute of Justice recommends that the relevant justice and mental health agencies undertake the following changes in practice:

> Capitalize on opportunities to identify those who are involved in the DC criminal justice system and may benefit from mental health services by:
  - making the most of opportunities for early identification;
  - improving and leveraging agencies’ internal data systems;
  - developing performance measures to describe and monitor rates of identification and service provision;
  - increasing interagency communication; and
  - targeting high-need groups.

> Ensure continuity of treatment for people with mental health needs as they move between settings by:
  - initiating targeted information-sharing initiatives between criminal justice agencies and the Department of Mental Health; and
  - expanding strategies for engaging underserved groups and linking clients with service providers in the community, such as jail in-reach programs.

CONCLUSION

The recommendations in the report, although tailored to DC, address challenges that arise in many jurisdictions throughout the United States. Moreover, the methods used in this study may provide a template for conducting similar projects in other jurisdictions seeking to improve services for the large numbers of people with mental health needs who come into contact with the criminal justice system.

Read the complete report at www.vera.org/closingthegap

For More Information

The Vera Institute of Justice is an independent nonprofit organization that combines expertise in research, demonstration projects, and technical assistance to help leaders in government and civil society improve the systems people rely on for justice and safety.

Vera’s Substance Use and Mental Health Program (SUMH) conducts applied research to help public officials and community organizations develop empirically driven responses to the substance use and mental health needs of people involved in justice systems.

For more information on the Substance Use and Mental Health Program, please contact Jim Parsons, at (212) 376-3043 or jparsons@vera.org.