

Illinois Center of Excellence for Behavioral Health and Justice

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The Illinois Center of Excellence for Behavioral Health and Justice is a state-wide entity working to equip communities to appropriately respond to the needs of persons with behavioral health disorders that are involved in the criminal justice system.

Based in Rockford and serving all Illinois counties, the Center promotes, coordinates, and provides training to communities looking to implement jail diversion programs and problem-solving courts for mentally ill and/or substance abusing offenders.

The Center will be housed at the University of Illinois' College of Medicine at Rockford, with training access at other University of Illinois sites in Chicago, Peoria, Springfield, and Urbana/Champaign.

Our Mission

The mission of the Illinois Center of Excellence for Behavioral Health and Justice is to equip communities to appropriately respond to the needs of persons with behavioral health disorders who are involved in the criminal justice system. To accomplish that mission, the Center will provide technical assistance, training, and resources to improve systemic responses for persons with mental health and/or substance use disorders involved in the criminal justice system.

Our History

In April 2010, the Illinois Supreme Court named a Special Judicial Advisory Committee for Justice and Mental Health Planning. The committee was charged with determining how to maximize court and community resources to aid in the rehabilitation and treatment of alleged offenders with mental health and substance use issues. The Advisory Committee has studied, reviewed, and collaborated on issues and matters related to mental illness, substance use, and the criminal justice system to make recommendations to the Illinois Supreme Court.

In April 2010, the Illinois Supreme Court named a Special Judicial Advisory Committee for Justice and Mental Health Planning.

In June 2010, the Illinois Criminal Justice Information Authority awarded Winnebago County a federal Edward Byrne Justice Assistance Grant of \$260,000 to establish the Illinois Center of Excellence for Behavioral Health and Justice.

A multidisciplinary approach

In December 2010, a multidisciplinary group of stakeholders were convened to oversee planning and program development, including representatives from the Illinois Department of Human Services Division of Mental Health, Illinois Criminal Justice Information Authority, Treatment Alternatives for Safe Communities (TASC), Mental Health Court Association of Illinois, Administrative Office of the Illinois Courts, and members of the Special Supreme Court Advisory Committee on Justice and Mental Health Planning to discuss the purpose and feasibility of a Center of Excellence in Illinois. Together they determined the mission, structure, and purpose of the Illinois Center of Excellence.

The Problem of Mental Illness

The nation's local jails increasingly are becoming a place of last resort for the mentally ill. Beginning in the late 1950s and early 1960s, individuals with mental illness were released from state-run hospitals without alternative placement. Many of these individuals subsequently commit other non-violent crimes, resulting in incarceration, release from jail, and repeated offense and arrest, creating a cycle of recidivism. By default, jails in many communities have become the primary source of care for the mentally ill, a function for which they are neither designed nor equipped to handle.

While the factors contributing to this problem are complicated, the over-representation of people with mental illnesses in the criminal justice system has been well documented.

- A 2009 study published in *Psychiatric Services* stated that 14.5% of male inmates and 31% of female inmates booked into local jails are estimated to have a serious mental illness.
- Inmates with a mental illness also had high rates of substance dependence or abuse in the year before their admission. More than 75 percent of local jail inmates were dependent or abusing drugs or alcohol. Nearly 35 percent of jail inmates said they were under the influence of a drug when they committed the offense for which they were incarcerated.
- A 1999 U.S. Department of Justice study found that half of the inmates with mental illnesses reported serving three or more prior sentences. Other research indicates that people with mental illnesses are more likely to be arrested than those without mental illnesses for similar crimes and stay in jail and prison longer than other inmates.
- In 1999, the Cook County Jail, Los Angeles Jail, and Riker's Island Jail held more people with mental illnesses than the largest psychiatric inpatient facilities in the United States.

The criminal justice system is not equipped to deal with persons with mental illnesses or other behavioral disorders. The result is that persons with behavioral disorders, such as mental illness or substance use, spend more time in jail while the criminal justice system

tries to figure out how to manage them. This current state of affairs is not only inhumane but also extremely expensive.

The criminal justice system stakeholders understand the need for alternatives to incarceration for persons with mental health and substance use disorders, such as diversion programs and specialty or problem-solving courts.

However, many jurisdictions do not have the information necessary to implement these interventions and lack the resources to engage in system change without external technical assistance. Without adequate treatment while incarcerated or linkage to community services upon release, many people with mental illnesses and substance use disorders may cycle repeatedly through the justice system.

This frequent involvement with the criminal justice system can be devastating for these individuals and their families and can also impact public safety and government spending. In response, jurisdictions have begun to explore a number of ways to address criminal justice/behavioral health disorders, including problem-solving courts.

Our Strategy

The Illinois Center of Excellence will target law enforcement, judges, courts, policy makers, consumers, families, and treatment providers, providing technical assistance, resources, and training to improve systemic responses to those with mental health and/or substance use disorders and are also involved in the criminal justice system.

Program implementation will occur over an 18-month period. Within the first six months, strategic planning and state-wide mapping will be reviewed, evidence-based practices will be researched and recommended, and training plans will be created. In the following year, counties and circuits will be contacted and training will begin.

A conceptual framework for communities

The Sequential Intercept Model for Developing Criminal Justice and Mental Health Partnerships, developed by Mark Munetz, M.D., and Patricia Marks, Ph.D., will be utilized by the Center as a conceptual framework for communities to identify potential strategies for linking individuals in need of treatment at each decision point, or “intercept,” within the criminal justice system. The Illinois Center of Excellence will focus on the intercepts of law enforcement, initial detention/initial court hearings, and jails/courts to research and disseminate information about evidence-based practices, and to provide services including but not limited to training and technical assistance for problem-solving courts or other diversion models around the state.

The Center will contact counties and judicial circuits to provide evidence-based training, coordination, and implementation assistance to create mental health courts, drug courts, and veteran’s courts, and offer alternatives to incarceration. The Center also will assist in training treatment providers to deal with the unique needs of these offenders.

<http://www.illinoiscenterofexcellence.org>