I. Why You?

The Problem
Approximately 15 percent of men and 31 percent of women in jail have a serious mental illness (Steadman et al., 2009). It is estimated that each year more than 1.1 million people diagnosed with mental illnesses are arrested in the United States (Steadman et al., 2009; Federal Bureau of Investigation, 2009). Roughly three-quarters of these individuals are expected to also experience co-occurring substance use disorders, which increase their likelihood of becoming involved in the justice system (Teplin, 1994; Abram et al., 2003). The incarceration of people with serious mental illness, often for minor crimes, is expensive and results in negative outcomes for consumers, their families, and their communities. In response, many communities have implemented local strategies, including transition planning and jail diversion programs.
Why You?

You just might witness a miracle

Judge Matthew D'Emic, presiding judge of the Brooklyn Mental Health Court, writes on MIWatch.org, “I witnessed a miracle.” He proceeds to describe the case of Michael who had a 20-year history of hospitalizations and treatment failures until referral to Judge D'Emic’s courtroom. Fourteen months after enrollment in the court, Michael graduated from the program, dressed in a suit and tie and in the company of his sister (D'Emic, 2009). If you’re reading this guide, you’ve probably met someone like Michael and are in search of a better way for the court and other entities in the criminal justice system to respond.

You just might change a State

In response to judicial outrage over the State’s lack of capacity to provide secure treatment beds for court-committed individuals, Chief Justice R. Fred Lewis of the Florida Supreme Court formed a task force to examine the mental health service delivery system in Florida as it relates to the
criminalization of people with mental illnesses (Supreme Court of Florida, 2007a). A task force report led to a $6 million dollar legislative appropriation to broadly address inefficiencies and gaps in mental health care (Supreme Court of Florida, 2007b).

**You just might save a life**

In Georgia, a subcommittee of a Chief Justice-led task force surveyed jail mental health services and recommended protocols for statewide mental health and suicide screening in jails.

**Judges as Catalysts**

There is a crisis. People with mental illnesses are overrepresented at every step of the criminal justice system. The majority have a co-occurring substance use disorder that complicates their recovery. In many communities, jails hold more people with mental illness than do hospitals.

Judges are uniquely suited to address complex social issues confronting today’s courts due to their ability to

- Convene broad-based stakeholder groups
- Influence oversight of social service agencies
- Hold defendants accountable for participating in programs that address their mental health and substance use treatment needs

Judges have access to stakeholders across political lines, at the highest level of local and State government, and across the justice and behavioral health systems. Judges are therefore uniquely positioned to bring together influential stakeholders to address the complex needs of people with co-occurring disorders.

**How to Use This Guide**

This guide is written for judges interested in developing, implementing, or expanding court and jail diversion programs in their communities. Each section is designed to provide a concise overview and to suggest where to go, within or beyond the guide, to find more information on a subject. This guide may also be of value to advocates and others interested in developing better outcomes for people with mental illnesses at risk of justice involvement.