

Title of Presentation: Research Supporting Police Diversion of Persons with Mental Illness

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The last decade has seen increasing identification of persons with mental illness (PMI) who are in prisons and jails. As the numbers of incarcerated PMI exceed the numbers of hospitalized PMI, calls increase for more human and appropriate social interventions. Specialty “mental health courts,” modeled on successful drug courts and police crisis intervention teams and diversion policies have begun to proliferate. The success of any such program depends on identifying the source and cause of the underlying problem and creating interventions that rely on empirically supported data. Tragic local incidents of police officer shooting or suicide in custody often lead to policy by crisis, rather than by evidence basis. Problems across multiple dimensions can no longer rely on agencies intervening from silos for solutions. Co-occurring disorders have already been shown to respond best to integrated treatment plans. Criminal justice and social service agencies must approach issues with concerted, integrated efforts based on evidence that their

efforts are cost-effective as well as designed with attention to the needs of the consumers they seek to serve. Information from three domains: (1) the size and nature of the potential diversion population; (2) the geographic distribution of the potential diversion population within police jurisdictions; and (3) the inter-organizational ties among mental health and other appropriate community agencies that will receive and serve diverted individuals, is required in addition to good will. This presentation provides an overview of the research in each of these three domains as it was used in the development and maintenance of a police diversion program for persons with mental illness in Worcester, Massachusetts.