



Mental health screening and outreach reduces recidivism

Key Results

- Mental health screening and outreach after release from jail reduces recidivism.
- Mental health outreach after release from jail increases access to support services.
- Mental health screenings at booking successfully identify people who are willing to access mental health services upon outreach after release.

Context of the Issue

Mental illnesses are disproportionately prevalent among incarcerated individuals. The Johnson County, Kansas Sheriff's Office estimates that 27 percent of people in their jails have a serious mental illness (SMI).¹ This is higher than the estimated 5 percent of the general adult population in the United States who have an SMI. Community jails are not designed to provide a full menu of treatment for incarcerated individuals with an SMI, who often present with increased needs in an already challenging environment. Johnson County is concerned with how often people with symptoms of SMI interact with the criminal justice system. In fact, they found that at jail entry, 1 in 3 individuals flagged as having a mental illness had a subsequent booking, compared to only 1 in 5 in the general population.

Current Efforts

Johnson County began using the Brief Jail Mental Health Screen (BJMHS)² in November 2016. Developed by Policy Research Associates with funding from the National Institute of Justice, the BJMHS is designed to determine if detainees need further mental health assessment and treatment. The BJMHS screens for serious mental illnesses such as bipolar disorder, major depression, or schizophrenia. The screening takes less than three minutes and is incorporated into the booking process. The tool contains eight yes/no questions and guidelines for when the

detainee should be referred for further evaluation. It is not a substitute for a mental health evaluation by a mental health professional but assesses the need for additional support. The tool works especially well with male detainees, and it has been validated to measure mental health in prior research.

Johnson County's Solution: Brief Jail Mental Health Screen and Outreach

Johnson County is committed to reducing recidivism rates among incarcerated individuals with SMI. The BJMHS aims to identify Johnson County detainees who experience symptoms of SMI and may be more at risk of ongoing involvement with the justice system. Johnson County determined a need for increased mental health support that extends beyond the facility walls since 65 percent of their detainees are pretrial released in 48 hours or less. If a detainee's responses indicate symptoms of an SMI and they live in Johnson County, they are referred to Johnson County Mental Health Center's (JCMHC) after-hours team for outreach. Staff conducts outreach to those released within 24 hours with the goal of reaching everyone within 72 hours. The target outcomes are referrals to the county's mental health center or reconnecting the person to their past mental health provider.

¹ Serious mental illness is defined by the Substance Abuse and Mental Health Administration (SAMHSA) as someone over 18 having (within the past year) a diagnosable mental, behavior, or emotional disorder that causes serious functional impairment that substantially interferes with or limits one or more major life activities.

² The BJMHS includes six questions about symptoms of serious mental illnesses such as schizophrenia, bipolar disorder, and major depression as well as two questions about past use of medication and inpatient mental health care.

LEO's Study

LEO performed a rigorous, quasi-experimental study to evaluate the impact of the BJMHS and outreach on mental health outcomes and recidivism rates. Individuals who were booked at the jail for the first time between November 1, 2016 and were released on or before November 30, 2018 were included in the sample. The sample did not include those who refused the screening, were unreachable or those living outside of the three-county area of study. The resulting sample was 9,757 individuals total, with 2,500 eligible for outreach based on their screening responses. Detainees who were assessed as having symptoms of an SMI were separated into two groups: Johnson County residents and residents of other counties that formed the comparison group. LEO evaluated the impact of the BJMHS tool as well as the outreach services offered. LEO researchers used anonymous records from Johnson County Jail, as well as records from jails in two adjacent counties³, in addition to records from Johnson County Mental Health Center.

Major Findings

Recidivism decreases for those who qualify for mental health outreach.

- ✓ Lower recidivism after 60 days: Detainees from Johnson County who qualified for mental health outreach had a 12 percentage point reduction in recidivism after 60 days (8 percentage point decrease for Johnson County residents vs. 4 percentage point increase for residents of other counties).
- ✓ Lower recidivism after 180 days: Detainees from Johnson County who qualified for mental health outreach had a 10 percentage point reduction in recidivism after 180 days (9 percentage point decrease for Johnson County residents vs. 1 percentage point increase for residents of other counties).
- ✓ Lower recidivism after 360 days: Detainees from Johnson County who qualified for mental health outreach had a 9 percentage point reduction in recidivism after 360 days relative to the control group (10 percentage point decrease for Johnson County residents vs. 1 percentage point decrease for residents of other counties).

Screening and outreach greatly reduce recidivism for those without prior mental health care.

- ✓ Lower recidivism after 60 days: Detainees from Johnson County who qualified for mental health outreach *and indicated no prior mental health care* had a 23 percentage point reduction in recidivism after 60 days (19 percentage point reduction for Johnson County residents vs. 4 percentage point increase for residents of other counties).

Outreach supports connection to mental health resources.

- ✓ 44 percent of those eligible for outreach had a successful contact with the outreach team.
- ✓ 28 percent of those eligible for outreach were connected to mental health services.

Key Takeaways

- Individuals with mental illness are overrepresented in incarcerated populations.
- Recidivism rates are higher for those with mental illness.
- Providing mental health screening at booking and offering mental health outreach after release reduces recidivism and increases participation in relevant mental health support services.

³Wyandotte County, KS and Jackson County, MO