

Justice-Involved Individuals and Evidence-Based Mental Health Practices (EBP)

We reviewed literature, identified evidence-based mental health practices, and surveyed their use among justice-involved populations (in community or jail) across U.S. counties.

Each EBP was only offered in 22-43% of U.S. counties.

These programs improve mental health and help keep people out of jail. Check whether your county has each program and how many people it can serve.

Examples Below

Mental health treatment required by the court

42%

Problem solving court

41.6%

Integrated mental health and substance use services; integrated dual disorder programs

40.6%

Crisis call-in centers

40.3%

Coordination between jail and community mental health services at transitions into or out of jail (e.g., hand-off)

38.3%

Diversion from criminal justice action to mental health treatment

36.7%

Trauma-informed care, settings, or services

36.6%

Crisis Intervention Teams (co-responding police efforts)

35.9%

Building an alliance with patients, taking preferences into account in mental health treatment planning

35.8%

Mental health peer navigators, peer advocacy, or peer support

34.2%

Critical Time Intervention -OR- Case management for mental illness

32.1%

Therapeutic Walk-in or crisis center

31.2%

Family or caregiver education and support about the patient's mental illness

31.1%

Supported employment for individuals with mental health conditions

30.6%

Medicaid eligibility continuity

29.3%

Permanent supportive housing for individuals with mental health conditions

29.2%

Use of standardized, validated mental health screening tool

28%

Assertive community treatment (ACT), Forensic assertive community treatment (FACT), or Forensic Intensive Case Management (FICM) for mental illness

27.2%

Justice-Involved Individuals and Diagnosis-Specific Mental Health Treatments

For more information on this study and similar topics, please email IMJusticeBH@ucf.edu or visit our website at gmuace.org/nimh

Mood stabilizers for bipolar disorder or mania



Family Education about schizophrenia or psychosis



Cognitive behavioral therapy (CBT) for depression or Behavioral Activations for depression



The Safety Planning Intervention for suicide prevention



Cognitive-behavioral therapy (CBT) for PTSD or cognitive processing therapy for PTSD



Family Education about bipolar disorder or family treatment for bipolar disorder



Education about bipolar disorder and its treatment (>1 session)



Dialectical behavioral therapy (DBT) for borderline personality disorder or suicide prevention



SSRIs or tricyclic antidepressants for anxiety



Seeking Safety for PTSD



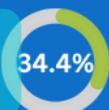
Cognitive behavior therapy (CBT) for suicide prevention



First generation antipsychotic medications



Cognitive behavioral therapy (CBT) for psychosis



Second generation antipsychotic medications



Exposure therapies or cognitive-behavioral therapy (CBT) for anxiety



Any group or individual counseling for insomnia



SSRIs or tricyclic antidepressants for PTSD



Interpersonal Psychotherapy (IPT) for depression



Selective serotonin reuptake inhibitors for depression



Any group or individual counseling for physical pain



Prolonged exposure for PTSD

