Smart on Crime

The impact of untreated and under-addressed mental health and substance abuse, and opportunities to reduce negative consequences throughout the state.
Oklahoma consistently has some of the highest rates nationally for both mental illness and addiction.

- Mental illness and addiction are priority public health concerns for Oklahoma.
- They are priority public safety issues.
- These diseases have a direct impact on state’s economic outlook (particularly in regard to costs associated with the criminal justice system).
- And, there has been heightened attention and calls for action in the press and from advocate organizations.

Oklahoma consistently has some of the highest rates nationally for both mental illness and addiction.
• There has been targeted investment in services and programs to address the needs of specific at-risk populations.
• The Governor and a few legislators have championed behavioral health issues and provided an elevated platform.
• There is heightened legislative attention and discussion.
• The potential to develop a model behavioral health system in Oklahoma has been recognized nationally and hinges solely on the availability of resources that will save lives and benefit the future of our state in multiple ways.

**There has been targeted investment and support from the Governor and legislative leaders**
Stigma, misunderstanding and fear often inhibit people from seeking help or remaining compliant with treatment needs.

- Stigma is something that we still struggle to overcome.
- The reality is that these illnesses are not the result of a flawed personality or personal weakness...they are diseases of the brain that can be appropriately diagnosed and treated.
- In Oklahoma, mental disorders are the third leading cause of chronic disease – behind only pulmonary conditions and hypertension – and more prevalent than heart disease, diabetes, cancer and stroke.
- And, our ability to achieve successful treatment outcomes is increased by how soon we can intervene and stop disease progression...the same as what occurs with the treatment of other diseases.
Why is it that when we think of people getting treatment for mental illness and substance abuse we also often think of police involvement or institutional settings?

- The system created to treat behavioral illness is unlike that for the treatment of other chronic diseases.
- Too many Oklahomans…
  - First access care with a ride in the back of a police car.
  - Experience crisis before seeking help (ERs and crisis centers) despite warning signs and elevated symptoms.
  - Are arrested, jailed and imprisoned as a result of their illness.
- This does not make sense medically or in terms of our state’s sense of morality and compassion for others (bombing, weather events, outpouring of support for veterans…).
- It certainly doesn’t make sense fiscally.
• The science of mental illness and addiction has advanced phenomenally (particularly in recent years) with improved evidence-based treatment options that increase the occurrence of positive outcomes.

We have the ability to appropriately treat mental illness and addiction, and help Oklahomans recover and thrive
• We have a significantly better understanding of how these illnesses work and progress, and subsequently how to more successfully intervene and treat so that negative impact is lessened and recovery is possible.

Addiction is similar to other diseases, such as heart disease. Both disrupt the normal, healthy functioning of the underlying organ, have serious harmful consequences, are preventable, treatable, and if left untreated, can last a lifetime.

*National Institute on Drug Abuse*

We have the ability to appropriately treat mental illness and addiction, and help Oklahomans recover and thrive
• Even with illness that many once thought untreatable or something that would cause damage from which no one would ever recover...we know that treatment and recover is possible.

Recovery of Brain Dopamine Transporters in Chronic Methamphetamine (METH) Abusers

Normal Control  METH Abuser (1 month abstinence)  METH Abuser (24 month abstinence)

When left untreated, mental illness and addiction have far-reaching effects beyond the individual experiencing illness:

- **Cost to Society and Family Fragmentation.**
  - Divorce, unemployment, school drop-out, suicide…

- **Cost to Oklahoma Businesses.**
  - 200,000 OK workers with depression ($600M annually in med expenses), leading reason for missing work and reduced productivity, OK ranked 41st nationally for poor mental health days…

- **Cost to communities, state and local governments.**
  - Children in foster care, rising law enforcement transport costs, uncompensated care for community hospitals and ERs, in-school issues and increased tax dollars to support consequences…

**There are costs beyond the individual**
• But, the biggest direct economic cost is the cost to our criminal justice system...costs that can be avoided with better access to treatment services before becoming engaged with the criminal justice system, and targeted programs for persons already in the criminal justice system that are designed to reduce repeat incidents and problems in the future.

• Based on DOC estimates:
  • 55% of all offenders (14,625) have a mental health need. Nearly 70% of female offenders and 48% of male offenders have been diagnosed with a mental illness.
  • Of these individuals, 55% were incarcerated for non-violent offenses.
  • 82% of non-violent offenders admitted to prison in FY2010 have a substance abuse or mental health treatment need.
  • Among offenders, distribution of drugs is the top offense and the possession is the second most frequently occurring offense.

• In addition:
  • Office of Juvenile Affairs – an estimated 33% of those in custody; 26% of those on probation; and nearly 80% of those in “level E” OJA custody have a substance abuse issue.
  • Both the Oklahoma County Jail and the Tulsa County Jail have approximately 400 people with a mental illness in their custody at any one time.

**Resulting negative consequences of untreated mental illness and addiction**
The cost to treat is significantly less than the cost to incarcerate or be involved in the criminal justice system.

- Compare the cost of treatment against some of the alternatives:
The cost to treat is significantly less than the cost to incarcerate or be involved in the criminal justice system.
To address such issues, ODMHSAS introduced a “Smart on Crime” proposal with interventions across the spectrum of criminal justice engagement.

Independent studies confirmed the proposal’s merits and ability for the state to avoid millions in future costs if funded in full.

The proposal was endorsed by numerous law enforcement and community organizations (including the 2008 Oklahoma Academy Town Hall).
Supporters of “Smart on Crime”

- The Oklahoma District Attorney’s Council
- The Oklahoma Sheriff’s Association
- The Oklahoma Association of Chief’s of Police
- The Academy for State Goals
- The Oklahoma Turning Point Council
The concept of Smart on Crime is to address mental illness and addiction at any number of diversion points:

- Prevention/Pre-Booking
- Initial Detention/At Booking
- Post-Booking/Initial Hearing
- At Disposition/Sentencing
- While Incarcerated
- Reintegration
• Over the past four years, ODMHSAS has received over $10 million in funding towards an initial $108,110,000 proposal.

• Funding is intended to create model programs for the diversion of non-violent persons experiencing mental health/substance abuse challenges into structured treatment programs as opposed to engagement in the criminal justice system.

• Intervention is targeted along various points of the criminal justice process, from pre-booking to re-entry, with an objective to intervene and divert at the earliest possible opportunity.

**ODMHSAS has proposed a “Smart on Crime” proposal to reduce the fiscal impact of untreated mental illness and addiction on the state’s criminal justice system and overall budget**
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Funded to date:

- **Drug Court Slots** - $645K to maintain 174 drug court slots that were funded by a BJA competitive grant.
- **24/7 Emergency Response to Support Law Enforcement and Urgent Care** - $1Million ($5M Request) to provide behavioral health support to assist officers with assessing treatment needs and diversion.
- **Crisis Centers** - $7.5Million ($12.5M Request) for three of five needed crisis centers.
- **SA Residential Treatment** - $2Million ($14M Request) for residential services.
- **Jail Screening** - $1Million ($5.25 Request) for screening services to support courts.
ODMHSAS has proposed a “Smart on Crime” proposal to reduce the fiscal impact of untreated mental illness and addiction on the state’s criminal justice system and overall budget.

- It will take continued and full-investment in the proposal to reap all benefits.
- The services and initiatives outlined in the proposal work.
- In fact, ODMHSAS has proven an ability to implement programs within the criminal justice system that have demonstrated cost-effectiveness and results.
Drug Courts

- The annual cost of drug court is $5,000 compared to $19,000 for incarceration. That alone is a significant benefit. But, what really tells the story are the improved outcomes.

**Annual Wages Earned**
by 1,058 Graduates from FY09

- $10.2 M
- $12.5 M
- $12.2 M

**Annual Taxes Expected to be Paid**
by 1,058 Graduates from FY09

- $578 K
- $728 K
- $715 K

$34.9 million in total wages earned.

$2.0 million in total tax revenue expected.
Drug Courts

• There are much approved outcomes for reoffending compared to released inmates.

• In addition to a 92.2% drop in unemployment and a 100.6% jump in monthly income; a 59.2% increase in participants who are able to again live with their children; and, a 40% improvement in graduates obtaining a high school education.
• There are Mental Health Courts serving 16 counties (only) with 426 active participants (as of January 2014).
• Another 17 counties have requested courts that would serve an estimated 375 more participants.
While there are not as many Mental Health Courts as there are Drug Courts, these programs are no less impressive when it comes to delivering results.

Based on outcome comparisons for FY13 Mental Health Court graduates.
• In addition to arrest patterns, program graduates see a reduction in inpatient treatment stays and improved employment status.

Days Spent in Inpatient ↓ 64%

Unemployment ↓ 81%

Based on outcome comparisons for FY13 Mental Health Court graduates.
Offender Screenings are conducted by Oklahoma Department of Mental Health and Substances Abuse Services’ certified treatment providers to determine felony offenders’ risk to reoffend as well as identify substance use and mental health treatment needs.

- Certified Screeners in 18 Counties
- 3,668 Offenders Screened* 
- 2,373 Final Dispositions Recorded* 

*As of 9/2014

**Final Disposition**

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<th>Percent</th>
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Outcomes from some of the participating counties:

- An 87% decrease in the length of time offenders spent in jail (from 31 days pre-implementation to 4 post-implementation).
- A $2.2 Million reduction in the cost to incarcerate offenders ($2,532,717 pre-implementation to $326,802 post-implementation).
- A 72% decrease in length of time from arrest to Drug Court Admission (from 221.5 days pre-implementation to 61.7 days post-implementation).
The NorthCare Day Reporting Center is a pre-trial program designed to serve seriously mentally ill persons and individuals with co-occurring mental health and addiction disorders in the custody of the Oklahoma County Sheriff and are awaiting sentencing for appropriate criminal offenses.

The savings from Day Reporting participants not awaiting sentencing in jail ($2,653,249) equates to adding an additional 8 peace officers to the local law enforcement agencies for each year that this program has operated (began in 2005).
Re-Entry Intensive Care Coordination Teams (RICCTTs) provide treatment services in the community to persons discharged from prison. The ultimate goal of the MHRP is recovery.

Return to prison for RICCTTs participants was approximately 40% than baseline comparison.

RICCTTs offenders had a higher reported income 24 months after release, averaging over $500 (or 56%) more than the baseline comparison group.
• Continued investment in mental health and substance abuse services will benefit Oklahoma families and the state as a whole.

• A “Smart on Crime” approach in particular will create an opportunity for the state to avoid millions of dollars in future expenses related to the criminal justice system…eventually paying for itself and even providing a hefty positive return on the overall investment.

• Continued inability to address the treatment needs of all Oklahomans will result in continued (and expanded) negative outcomes impacting the states overall health, economic development and public safety.
• On average, for all clients/ all ages combined, average cost for treatment is:
  • Admitted Clients MH/SA…$2,150.06

• Some services may cost more than others; and, illness acuity will impact the cost to treat.
• The current proposal for full implementation of the “Smart on Crime” package estimates an additional investment of $96,610,000 annually.
• By the third-year of full implementation it is expected that the cost of the program will be offset by cost savings.
• This will result in an annual net gain to the state.
According to a report prepared by the Oklahoma Senate staff (Author: Timothy Quinton Dilbeck), implementation of the Smart on Crime proposal over a five-year period will result in:

- An **11,200 person reduction** to the DOC inmate population.
- A **$233 Million** net gain cost savings/avoidance to the state.
- And, a **$123 Million** annual cost savings/avoidance for every year beyond the initial five years.