

Congress of the United States
Washington, DC 20515

March 25, 2015

The Honorable John Culberson
Chair, Subcommittee on Commerce,
Science, Justice, and Related Agencies
Subcommittee on Appropriations
H-310 The Capitol
Washington, D.C. 20515

The Honorable Chaka Fattah
Ranking Member, Subcommittee on Commerce
Science, Justice, and Related Agencies
Subcommittee on Appropriations
2301 Rayburn House Office Building
Washington, D.C. 20515

Dear Chairman Culberson and Ranking Member Fattah,

We write to express our strong support for funding of the Mentally Ill Offender Treatment and Crime Reduction Act (MIOTCRA) in the FY 2016 Commerce-Justice-Science Appropriations bill. This program provides states and local governments with necessary resources to plan and implement initiatives for people with mental disorders involved with the criminal justice system in order to increase public safety, reduce state and local spending, and improve the lives of people with mental disorders and their families.

Throughout the criminal justice system, people with mental disorders are overrepresented—in contact with law enforcement, in the courts, in jails and prisons, and in parole and probation caseloads across the country. According to a U.S. Department of Justice report, approximately 45 percent of federal inmates, 56 percent of state inmates, and 64 percent of jail inmates displayed symptoms of a mental health condition.

While most people with mental disorders are not violent and most violence in this country is not committed by people with mental disorders, there is an urgent need to consider approaches to mitigate the risk for violence among this population. Leaders in law enforcement, courts, corrections, and the mental health community understand the importance of working together to develop solutions that address the behavioral health needs of individuals prior to their entry to the criminal justice system.

We can all agree that the mental health system in this country is failing the American people.

Congress can take a leadership role to address this challenge by continuing its bipartisan support for this funding to bring together mental health providers, criminal justice agencies, consumers and family members to better identify and serve the needs of persons with mental health conditions and in order to reduce recidivism and long-term incarceration costs. MIOTCRA supports innovative programs that bring together mental health and criminal justice agencies to address the unique needs of persons with mental health conditions, including:

Specialized Law Enforcement-Based Response Programs

- Nationwide, law enforcement agencies in rapidly increasing numbers have embraced specialized policing responses (SPRs) for people with mental disorders. These efforts,

which prioritize treatment over incarceration when appropriate, are planned and implemented in partnership with community service providers and citizens. The two most prevalent SPR approaches are crisis intervention teams (CITs), which give law enforcement officers the resources and training they need to identify and respond to mental health crises, and police-mental health co-responder teams. These programs are effective ways to create, promote and sustain safety in communities.

- Houston's CIT program is the largest CIT program in the country. The program is driven by law enforcement, with assistance from mental health professionals, consumers, and the National Alliance on Mental Illness (NAMI). They use a hybrid approach for selecting which officers will be trained. Houston also runs other SPRs: the Crisis Intervention Response Team Program, a co-responder program in which a CIT officer partners with a licensed mental health professional to respond to calls and conduct proactive and follow-up investigations; the Chronic Consumer Stabilization Initiative, designed to divert people from jail when appropriate and help stabilize consumers by addressing their basic needs; and the Homeless Outreach Team that works in collaboration with a number of organizations that provide housing and other services to the homeless population, by helping them access services which they would not have been able to do on their own.
- The University of Florida Police Department (UFPD) is a campus law enforcement agency that has incorporated responses to those in mental health crisis into its in-service training programs for all sworn staff. They operate a comprehensive collaboration among many critical campus entities as well as city and county law enforcement agencies. UFPD formalized the use of on-call crisis intervention consultants when responding to those in mental distress who reside in on-campus housing facilities. UFPD also operates a crisis response team comprised of the university's mental health counselors, administrators, campus ministry representatives, and other administrative staff who respond to incident locations on campus and assist officers by providing on-site counseling and administrative needs coordination.

Mental Health Courts and Other Court-Based Initiatives

- Mental health courts in the United States have grown to over 300 today, up from four in 1997, with programs found in almost every state. As judges, county and state leaders, and advocates continue to call for the establishment or expansion of mental health courts in their jurisdictions, demand has steadily grown for information on designing, implementing, and revising mental health courts to achieve desired public safety and public health outcomes.
- Outagamie County, WI officials developed a post-adjudication, recovery-oriented mental health court program that explores alternatives to jail and connects individuals to community resources. Since accepting participants into the program in July 2012, the program has refined its target population to target individuals with a high risk of committing new offenses or violating terms of supervision and have adopted a treatment modality to reduce their likelihood of recidivating. The program has also worked to establish very strong connections to key community partners, including the local chapter of the NAMI.

- The first of its kind in the country, Philadelphia's Project Dawn Court is a problem-solving court targeting women with repeat prostitution offenses. A project of the First Judicial District of Pennsylvania and the Philadelphia Department of Behavioral Health and Intellectual Disabilities Services, the court offers treatment and recovery services, GED preparation, parenting classes, job training, and other services. The program aims to help women with co-occurring substance use and mental disorders exit prostitution and lead meaningful lives and to reduce incarceration costs for taxpayers.

Jail-Based Programs

- Correctional agencies and mental health organizations are collaborating to improve the delivery of treatment services to individuals who are incarcerated in prisons and jails. Providing quality care pre-release and connecting individuals to appropriate services post-release promotes both public safety and public health outcomes.
- The New York City Department of Health and Mental Hygiene applied MIOTCRA funds to enhance services and treatment at three critical points—in-jail treatment, in-jail court advocacy, and post-release follow up—for individuals with co-occurring mental health and substance use disorders. With the goals of increasing safety and reducing recidivism, the program takes a comprehensive, collaborative approach to supporting the individuals' needs in jail and in the community.

Programs for Youth Involved in the Juvenile Justice System

- Interested in supporting positive outcomes for youth and preventing future involvement in the criminal justice system, communities are providing treatment and services to address mental disorders, substance abuse, problem behaviors, or risk factors in youth who are involved or at risk for involvement in the justice system.
- Maryland officials formed a collaborative to improve care for justice-involved youth who have mental disorders or CODs and are returning to their communities from residential placements. To inform its initiatives, the collaborative hosted forums with youth and their families, examined local data, and reviewed evidence-based and best practices.

MIOTCRA was enacted in 2004 and reauthorized in 2008, both times with broad bipartisan support. A reauthorization bill that was introduced in the last Congress had 92 cosponsors from both chambers and both sides of the aisle, and that bill has been endorsed by more than 200 leading law enforcement, mental health, and criminal justice organizations from across the country.

To date, MIOTCRA appropriations have funded 115 mental health courts and other court-based initiatives, supported 84 local police and county sheriff departments, and provided a total of 319 grants to 49 states, plus the District of Columbia, Guam, and American Samoa.

With the responsibility of treating people with mental disorders often falling on an already strained criminal justice system, it is clear that we need to redirect resources from containment to treatment. MIOTCRA has helped law enforcement officers, judges, corrections officers, and mental health professionals develop more compassionate and cost-effective approaches to

incarceration. We appreciate your subcommittee's continued support for this important program in the FY16 CJS bill.

Sincerely,



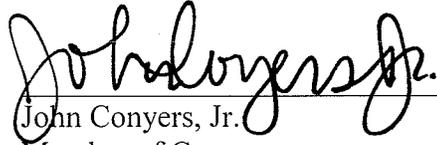
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Member of Congress



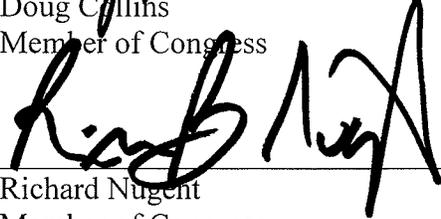
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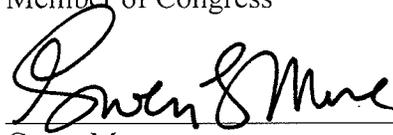
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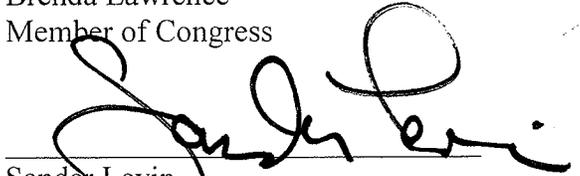
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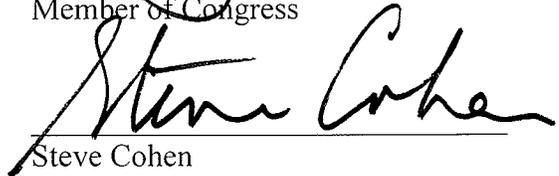
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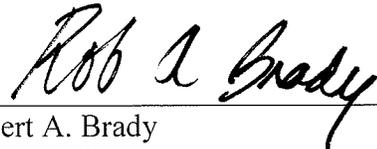
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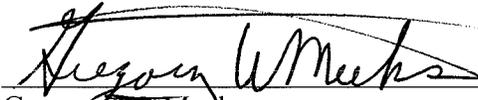
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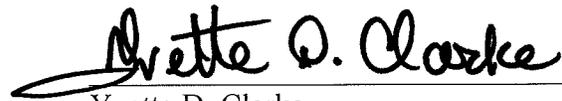
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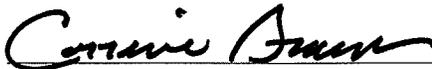
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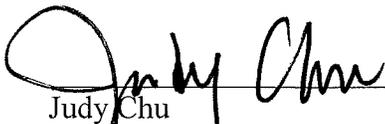
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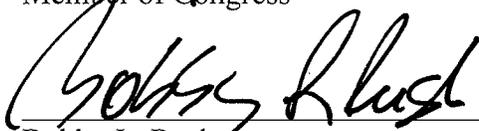
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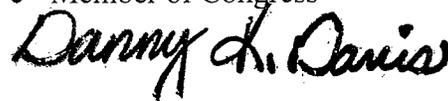
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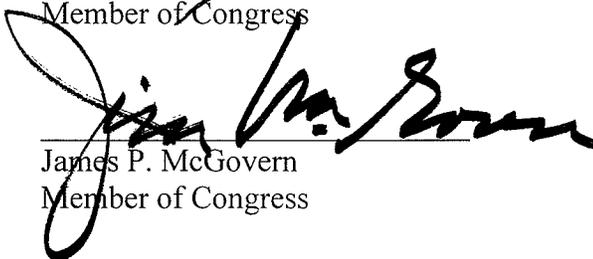
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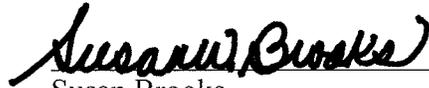
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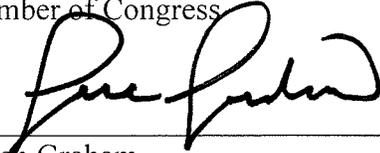
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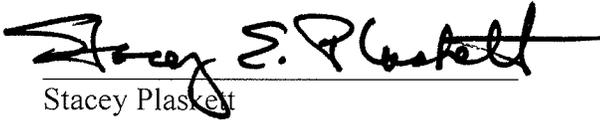
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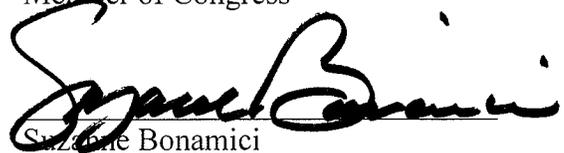
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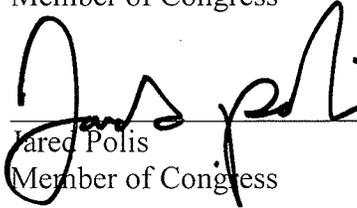
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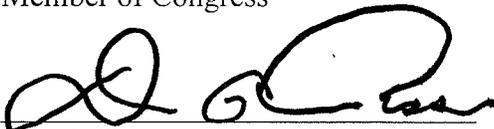
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