

Reimagining Crisis Response: Developing Alternatives to Arrest

As the gatekeepers of the criminal justice system, law enforcement officers have become the primary responders to people experiencing behavioral health crises. Not only are they unable to address the underlying needs that drive people into crisis, but they often have few options for responding outside of sending people to jail or the hospital. As a result, some of our communities' most vulnerable people cycle repeatedly through jails and hospital emergency rooms, receiving fragmented, misaligned, and costly care that fails to address their underlying needs. This ineffective cycle places significant strain on law enforcement and emergency responders, overly relies on arrest and incarceration as a response to health needs, and doesn't improve public safety.

27%

of all arrests are for drug abuse and other minor offenses, such as drunkenness, disorderly conduct, and loitering¹

3X

more people with serious mental illness in jails or prison than in mental health treatment facilities²

21%

of individuals shot and killed by police in 2018 had some form of mental illness³

1 Vera Institute of Justice (2019). Gatekeepers: The Role of Police in Ending Mass Incarceration. <https://www.vera.org/downloads/publications/gatekeepers-police-and-mass-incarceration.pdf>

2 Treatment Advocacy Center and National Sheriffs' Association. (2010). More Mentally Ill Persons Are in Jails and Prisons than Hospitals: A Survey of the States. https://www.treatmentadvocacycenter.org/storage/documents/final_jails_v_hospitals_study.pdf

3 The Washington Post. (2018). Fatal Force: 992 people have been shot and killed by police in 2018. <https://www.washingtonpost.com/graphics/2018/national/police-shootings-2018/>



Law enforcement, health, and social service providers must connect people experiencing mental illness, addiction, or homelessness to community-based services to improve their lives and reduce—or eliminate—their contact with the justice and emergency health systems.

The Problems

People in crisis don't belong in jail. In many communities, law enforcement are the primary respondents to people experiencing behavioral health crises. Yet they too often lack the specialized training and viable response options to do so effectively: in most places, law enforcement can either transport people to an emergency department or arrest and jail them. These options are restrictive and costly, and can inappropriately criminalize what are, at their core, health issues.

People who have untreated behavioral health issues can have a significant and disproportionate impact on emergency systems. People with unmet, complex needs often struggle with a combination of hard-to-treat issues such as addiction, mental illness, chronic health problems, and homelessness. As such, they often cycle in and out of jails, hospitals, and shelters at a startlingly high rate.

We don't have the research we need to support new approaches to crisis response. Little evidence exists to support the effectiveness of alternative crisis interventions or suggest which diversion strategies or treatment programs might be replicable, cost-effective, or scalable.

Separate systems—criminal justice, health, social service—don't have the ability to share information. Even though it is possible to share protected data in a secure and legally compliant manner, data are frequently stored on different platforms with separate managers, funding streams, and regulations that restrict the sharing of information across agencies.

Our Approach

Improve behavioral health crisis systems and reimagine law enforcement response. State and local governments should reorient crisis response systems to safely respond to individuals in crisis by building out stronger health system responses, including developing better options for long-term, complex care. Law enforcement response should be integrated into the broader crisis system, and support diversion to evidence-based treatment in the most effective, least-restrictive setting conducive to individual and public safety.

Use data to identify and better serve people with unmet complex needs. Through our Data-Driven Justice project, we work with jurisdictions to integrate data from emergency health, criminal justice and social service agencies to understand the needs of individuals with the highest number of encounters across multiple systems; and, design diversion strategies, policies, and programs to improve crisis response and reduce the use of carceral and emergency health settings unless absolutely necessary.

Build an evidence base to support more effective crisis intervention. We are working with researchers and innovative jurisdictions to better understand which crisis interventions work best to support law enforcement response to individuals in crisis. We are also funding a number of studies to rigorously evaluate programs that aim to treat, stabilize, and reduce the number of Frequent Utilizers in the criminal justice system.