EVIDENCE-BASED RESOURCE GUIDE SERIES

Best Practices for Successful Reentry From Criminal Justice Settings for People Living With Mental Health Conditions and/or Substance Use Disorders



This overview provides a summary of the Evidence-Based Resource Guide titled, Best Practices for Successful Reentry From Criminal Justice Settings for People Living With Mental Health Conditions and/or Substance Use Disorders (SAMHSA Publication No. PEP23-06-06-001). The complete guide is available on the SAMHSA Store: https://store.samhsa.gov/sites/ default/files/SAMHSA Digital Download/ PEP23-06-06-001.pdf

In 2021, 680 out of every 100,000 United States residents were in prison or jail, and approximately 3.7 million were under community supervision. The presence of mental health and substance use disorders over the course of one's lifetime is associated with higher odds of lifetime incarceration (see graphic). Additionally, individuals living with mental health conditions and/or substance use disorders who reenter the community from jail or prison often encounter significant barriers to behavioral health treatment, stable and safe housing, meaningful employment, and other recovery support services. Appropriate support during reentry into the community can reduce risk for a recurrence of symptoms, as well as risk of overdose, death by suicide, or risk for reincarceration.

Association of Lifetime Mental Health Conditions and SUDs With Lifetime Incarceration; Odds Ratios Adjusted for Sociodemographic and Other Disorders

Comorbid Anv Any SUD and **Anxiety** Diagnosis Mood Mental Health Disorder Disorder times the odds of lifetime of lifetime of lifetime of lifetime of lifetime incarceration incarceration incarceration incarceration incarceration

*p≤.001

Source: Moore, K. E., Oberleitner, L. M., Zonana, H. V., Buchanan, A. W., Pittman, B. P., Verplaetse, T. L., Angarita, G.A., Roberts, W., McKee, S. A. (2019). Psychiatric disorders and crime in the US population: Results from the National Epidemiologic Survey on Alcohol and Related Conditions Wave III. *The Journal of Clinical Psychiatry, 80*(2), 15899. https://doi.org/10.4088/JCP.18m12317

This guide focuses on evidence-based interventions that target all phases of reentry (pre-release, at-release, and post-release) for incarcerated adults with mental health conditions and/or substance use disorders who are returning to the community from jail or prison. The purpose of the guide is to share information about the types of interventions that are most successful in reducing a recurrence of symptoms, overdose, and recidivism, based on a review of evidence-based approaches. This guide is intended for organizations providing reentry services, clinicians/practitioners delivering substance use and/or mental health treatment, correctional facilities, law enforcement, community organizations, and policy makers.



Best practices for successful reentry suggest that planning and support should begin during a term of incarceration and continue post-release. Every elements of reentry include the development of a collaborative comprehensive case plan that follows the individual from prison or jail into the community, access to medication and prescriptions upon release, and peer support services. A systematic review of the literature identified three interventions that demonstrated a strong evidence base of effectiveness for individuals with mental health conditions and/or substance use disorders reentering the community from jail or prison:

- Medication for Opioid Use Disorder (MOUD)/ Medication for Alcohol Use Disorder (MAUD)
- 2. Case Management
- 3. Peer and Patient Navigation

Organizations can implement case management, peer and patient navigation, and MOUD/MAUD alone or in combination with another evidence-based practice. The guide provides key considerations and strategies for how to implement these interventions across phases of reentry. It also provides guidance for implementing systems-level strategies, such as conducting a community service needs assessment, creating a sustainable infrastructure for reentry programs, and making equity explicit in program planning and implementation. The guide includes four real-life case examples of programs that organizations have implemented to promote successful reentry for individuals with mental health conditions and/or substance use disorders. They are the *Border Reentry and Community Integration Program*, operated by Serving Children and Adults in Need (Webb County, Texas); the Felton Institute's *Success: Movement from Incarceration Program*

Key Elements of Reentry

- Reentry planning (Collaborative Comprehensive Case Plans) across systems
- Warm hand-off to community providers to increase engagement
- Continuity of care; access to continuum of behavioral health services including harm reduction services
- Access to government identification (e.g., photo ID to obtain post-release treatment and government benefits)
- Medication, including Naloxone, and prescription access upon release
- Timely access to benefits, including Medicaid, Medicare, private health insurance, Supplemental Security Income/Social Security Disability Insurance (SSI/SSDI), Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), veteran's benefits, etc.
- Peer support services
- Gainful employment; employment services
- Safe, secure, affordable, stable housing
- Other support services including transportation, childcare, legal services

Adapted from: SAMHSA, Criminal Justice System Intercept 4 - Transitioning back into the Community, 2022

(Alameda County, California); the *MISSION Re-entry Program*, implemented by Gándara Mental Health Center (Plymouth County, Massachusetts); and the *Living-Free Program*, implemented by the Forensic Drug Diversion Clinic (New Haven, Connecticut). Finally, this guide provides resources for evaluation that organizations implementing reentry programs can use to assess outcomes for incarcerated individuals living with mental health conditions and/or substance use disorders.

References

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August 2023

SAMHSA Publication No. PEP23-06-06-002

SAMHSA's mission is to lead public health and service delivery efforts that promote mental health, prevent substance misuse, and provide treatments and supports to foster recovery while ensuring equitable access and better outcomes.