





2021 Framework for Prosecution and Public Health

On July 13 and 14, 2020, the Prosecution Research Network was convened virtually for the purpose of identifying research and policy strategies to improve health, reduce incarceration, and increase national safety, prosperity, and wellbeing

IN CONCLUSION, PROSECUTION RESEARCH NETWORK MEMBERS ACKNOWLEDGE THE FOLLOWING:

The United States is in the midst of a public health crisis. Americans with mental health needs of all kinds (including substance use disorders) are neglected, stigmatized, or inadequately supported by health and safety systems which can more effectively optimize successful human development and outcomes.

Improving access and coordinating interventions across systems will prevent premature death, injury, long-term disability, and many other threats to public safety and well-being.

The nation's reactive approach to population health needs too often defaults to law enforcement crisis response and the criminal justice system.

Relying on the criminal justice system to manage the chronic and acute health needs of the population is neither appropriate, nor healthy, nor sound fiscal policy. This reliance upon justice system intervention for unaddressed health needs is a wasteful misapplication of resources and yields extremely poor health and safety outcomes at tremendous cost to individuals, communities, and the economy at large.

Our nation's public health, public safety, and economic wellbeing are inextricably intertwined. A resolution to this devastating crisis demands more therapeutic approaches to mental and behavioral health and a rebalancing of community investment. If done correctly, investments in affordable and supportive housing, and preventative and supportive health care can reduce the need for spending on incarceration and courts. Where justice system involvement has already begun, diversion into restorative programs and out of the criminal system should be available at all points along with the system, favoring the earliest interventions and preventing further contact with the system wherever possible. These shifts are likely to yield long-term savings and economic growth, as well as enhanced public health and safety, and positive individual outcomes.

Therefore, we recommend the following course corrections as a framework for research, practice, and policy innovations led by prosecutors' offices, in partnership with health care providers and stakeholders concerned with managing the health of our populations:

PRE-CHARGE









CRITICAL COMPONENTS TO SOLVE PROBLEM



OUTCOMES

PRE-CHARGE

- Over-reliance on confinement
- Restricting liberty (via confinement in jail or community supervision) because of symptoms of health problems (i.e., mental health and substance use conditions)
- Restricting liberty (people who are not a threat to public safety, they are a threat to themselves)

- Preserve liberty whenever possible as a priority
- Aim to identify the least restrictive justice response
- Discernment of whether the health needs outweigh criminality. If health needs are greater, then the defendant should go to a health- based environment
- Defendants treated with compassion and respect and with presumption of innocence; and with the presumption that they may have health needs that are driving their involvement with the courts
- Prosecutors obtain the conceptual disposition, but they should not be expected to be the ones that evaluate a defendant's health needs and make a determination.
 Prosecutors' offices should have the appropriate staffing and resources including partners with the clinical training to assess health needs

- Improved psychological, social, economic wellbeing within individuals and family ecosystems
- Enhanced respect for the law and the justice system; crime prevention
- Enhanced participation in and expectations of diversion/ deferral programs
- Improved connections to care – create pathways to care that defendants may not have had before
- Early identification of mental health and substance use needs which may be the first time a defendant had insight into need for healthcare
- Improved individual likelihood of long-term stability and recovery
- Improved multigenerational health impacts because of healthcare needs being addressed
- · Lesser court involvement

PRE-PLEA/POST CHARGE



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TYPE OF DIVERSION/
DEFERRED PROSECUTION

PROBLEM SOLVING FOR

CRITICAL COMPONENTS TO SOLVE PROBLEM

OUTCOMES

PRE-PLEA/ POST-CHARGE

- Justice system "net" too wide currently
- Correctional violations substantially contribute to recidivism and incarceration rates due to onerous requirements
- Public health/individual health needs are better addressed in the community than in jail because jails are rarely able to provide adequate health care and confined environments can exacerbate health symptoms
- Establish that the defendant has enough competence to be "corrected" in diversion/deferral program (essentially that expectations are not being set that defendants cannot meet because of health condition)
- Assess likelihood of correctional violations due to onerous requirements (albeit often unintentionally) and remove onerous requirements
- Implement a program that aims to look for opportunities to help people succeed
- Assess for trauma symptoms related to arrest and jail and provide rehabilitation resources if needed. Trauma symptoms are important to treat because trauma can lead to impulsivity, aggression, and other factors that have the potential to lead to illegal behavior and further charges
- Evaluate whether adequate health care (including appropriate medications) was provided to the individual in jail and give people the opportunity to perform in community-based health care prior to determining noncompliance because compliance may be related to the limitations inherent in jail-based healthcare

- Increased scenarios in which charges get dropped
- Reductions in caseloads for prosecutors
- Increased resources to prosecute crime drivers and defendants that pose significant threats to public safety
- Improved connections to care – create pathways to care that defendants may not have had before
- Early identification of mental health and substance use needs which may be the first time a defendant had insight into need for health care
- Defendants experience greater community stability and reintegration such as adequate social supports (formal and informal); connections with social safety nets; housing; and employment stability

POST-PLEA









PROBLEM SOLVING FOR

CRITICAL COMPONENTS TO SOLVE PROBLEM

OUTCOMES

POST-PLEA

- Criminal justice involvement creates a vicious cycle of stigma, demoralization, and hopelessness for most
- Hopelessness reduces likelihood of long-term recovery and conditions are more coercive than "corrective"
- A person's entire ecosystem can go awry as soon as they spend one night in jail
- Highest risk for suicide is the first 24 hours of incarceration
- Establish that the defendant has enough competence to be "corrected" in diversion/deferral program (essentially, that expectations are not being set that defendants cannot meet because of health condition)
- Incentivize programming using expungement, sealed records, or certificates of rehabilitation
- Prosecutors feel confident in their ability to identify quality health resources
- Prosecutors feel more confident in their understanding of mental health/substance use conditions

- Increased number of defendants who successfully complete the post-plea diversion programs
- More resources directed towards a population healthoriented system
- Improved racial, economic, and health equity among defendants, families, and communities
- Reductions in prosecutor caseloads and the incarcerated population

REENTRY









OUTCOMES

TYPE OF DIVERSION/ DEFERRED PROSECUTION

REENTRY

PROBLEM SOLVING FOR

• The influence of prosecutorial decisionmaking on a defendant's

reentry success

- Underscores the power of prosecution to champion restorative justice versus punishment
- · Recidivism rates are too high, indicating systemic failure to observe, learn, attempt to improve
- Families and communities are split up and otherwise devastated by incarceration and reentry considerations can support a strong start for all children and a healthful family ecosystems
- Provide in-office case management resources for reentrants to link to health, employment, and other community-based supportive services such as housing, education, voter registration, and life skills

TO SOLVE PROBLEM

- Offer a one-stop reentry center that provides access to housing, employment, and legal services as well as assessment
- Increases in one-time court contact versus multiple court contacts
- Improved well-being of the defendant, their family, and the community
- · Increased public safety
- Cost-savings and other economic benefits

PROSECUTORIAL ROLE



PROSECUTORIAL ROLE IN COMMUNITY



PROBLEM SOLVING FOR

- Community members and some system actors have become jaded to the impact of incarceration on a human life
- Health is not being owned by a health system – it is owned by a criminal justice system
- Healthcare in correctional settings is often privatized and (unintentionally) incentivized to deny care or provide inadequate care
- Not enough housing and preservation of people in existing housing. Limited enforcement of antidiscriminatory rental and community development practices
- Prosecutor resources disproportionately directed to justice management of individuals with health needs, rather than individuals involved in white-collar and other higher crimes



CRITICAL COMPONENTS TO SOLVE PROBLEM

- Prosecutors can communicate a message to law enforcement that law enforcement avoid arrest whenever possible, which in turn, will help to establish public trust in public safety-oriented guidance and diversion at initial encounter
- Re-enforce for law enforcement that the goal is to deescalate and stabilize with a primary concern for the safety and well-being of individuals and their communities
- Reinforce the Land of Liberty people are presumed innocent
- Weighing public safety and needs for a justice system prioritize the rights and needs of the individual unless we need to detain them
- Prosecutors have the opportunity to be more vocal about needing more, and quality, resources for health care, supports, and services in their communities while also acknowledging that it should not be necessary for people to experience crises and engagement with the criminal justice system to identify and address health needs
- Prosecutors have a constitutional duty to consider health in their decision making
- Prosecutors have a role as leaders to direct people toward community-based health care, supports, and services.
- Prosecutors have the opportunity to familiarize themselves with the laws that hold healthcare systems accountable and to enforce health care provider standards/behaviors/expectations (e.g. Medicaid violations)
- Prosecutors can be advocates for housing and fair housing practices by enforcing anti-discriminatory rental and community development practices and predatory lending
- Prosecutor advocacy for improvement to the corrections system such as the opportunity to evaluate conditions of confinement individuals are exposed to and be able to hold those accountable who mishandle people
- Prosecutors have trusting relationships with community providers – prosecutors can hold community service providers accountable for providing quality and evidencedriven services
- Prosecutors need to feel shielded from community reproach



OUTCOMES

- Increased confidence and trust from community members
- Increased confidence that the right people are behind bars
- Expediency to trial and case resolution
- Adequate housing to meet the needs of all community members/residents and improved quality of public spaces
- Greater public health and health equity as a result of an adequate and responsive health system
- Improved conditions of confinement for those who must still serve a sentence incarcerated
- Community members vote towards reform-oriented prosecutors

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The Equitas Project, a national initiative of Mental Health Colorado, made possible thanks to the generous support of the David and Laura Merage Foundation, envisions an America rededicated to liberty and justice for all, where there is a commonly held expectation that jails and prisons should not continue to serve as the nation's warehouses for people with unmet mental health needs.

Mental Health Colorado is the state's leading advocate in promoting mental well-being, ending shame and discrimination, and ensuring equitable access to mental health and substance use care. Mental Health Colorado is a nonprofit, nonpartisan organization and an affiliate of Mental Health America.

To learn more about Mental Health Colorado's work and mission, visit www.mentalhealthcolorado.org.

For Equitas' work and mission, please visit www.equitasproject.org.