

# Building partnership between mental health professionals and a local patient advocacy group to improve care for incarcerated people with serious mental illness



Carol Lim<sup>1,3,4</sup>, Jose Hidalgo<sup>1,3</sup>, Sarah Maclaurin<sup>1,3,4</sup>, Abigail Wright<sup>1,2</sup>, Jaqueline Martinez<sup>1,2</sup>, Donna Winant<sup>5</sup>, Oliver Freudenreich<sup>1,4</sup>



<sup>1</sup>Massachusetts General Hospital <sup>2</sup>MGH Center of Excellence for Psychosocial and Systemic Research <sup>3</sup>Suffolk County Department of Corrections <sup>4</sup>North Suffolk Mental Health Association <sup>5</sup>Families and Friends of the Mentally Ill



## Background

- Despite efforts to reduce the criminalization of people with serious mental illness (SMI), individuals with SMI remain overrepresented in the criminal justice system.
- Personal experiences of family members involved with incarcerated individuals with SMI, together with the professional knowledge of mental health professionals, can create a powerful collective voice for policy change.

### Method

- The Correctional Psychiatry Working Group formed within the MGH Schizophrenia Clinical and Research Program connected with a local grassroots patient advocacy group for incarcerated individuals, "Families and Friends of the Mentally III (FFMI)."
- An initial Zoom meeting was held with the FFMI Steering Committee to understand their experiences and needs in order to improve the legal and mental health systems.

### **Academic-Community Partnership**

Mental Health Professionals

First-hand knowledge

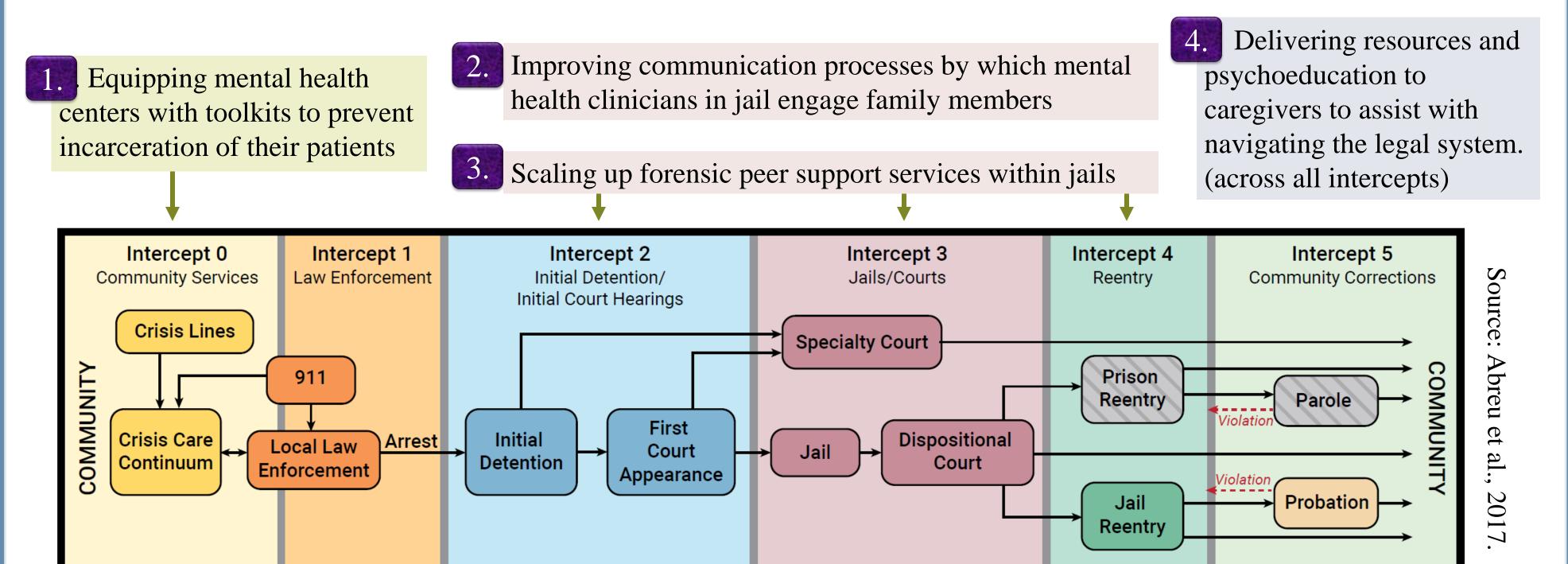
Expertise in mental health & legal systems

Families and Friends
of the Mentally III

Personal Experiences

Community ties to law makers & diverse organizations

Result Four priority areas were identified across the sequential intercept model:



### Conclusion

- Collaborative advocacy can occur when combining the lived experiences and community ties of FFMI with expert knowledge of the Correctional Psychiatry Working Group.
- Ongoing workshops will help develop impactful interventions in advocacy, peer support, improved mental health treatment, education, resources, and policy change for a local population with SMI enmeshed within the correctional system.

#### References

- Abreu, D., Parker, T. W., Noether, C. D., Steadman, H. J., & Case, B. (2017). Revising the paradigm for jail diversion for people with mental and substance use disorders: Intercept 0. Behavioral Sciences & the Law, 35(5-6), 380-395.
- Comartin, E. B., Nelson, V., Smith, S., & Kubiak, S. (2020). The criminal/legal experiences of individuals with mental illness along the sequential intercept model: an eight-site study. Criminal Justice and Behavior, 0093854820943917.
- Foulks, E. F. (2000). Advocating for persons who are mentally ill: a history of mutual empowerment of patients and profession. Administration and Policy in Mental Health and Mental Health Services Research, 27(5), 353-367.