

This Month's Highlights

◆ Mental Illness and the Criminal Justice System

Involvement of people with serious mental illness in the criminal justice system, especially their detention in jails, is a major focus this month. In analyses described in the lead article, Henry J. Steadman, Ph.D., and colleagues used systematic sampling and weighting methods and diagnostic interview data to obtain more precise estimates of the prevalence of current serious mental illness in jails. Across two time periods and five jails, overall rates were high—14.5% for men and 31.0% for women—which has profound implications for allocation of resources for treatment in jails, the authors note (page 761). Jail diversion programs for this population have been established in communities across the country. In the second article, Rafael A. Rivas-Vazquez, Psy.D., and colleagues report outcomes for adults who were diverted to a program that incorporates principles of relationship-based care to engage clients in intensive treatment (page 766). All four brief reports present findings related to this month's theme. The first study examined whether training Atlanta police officers in the crisis intervention team model reduced the number of times SWAT teams were dispatched (page 831). The second study identified factors that predicted arrest among adults who were receiving forensic assertive community treatment (page 834). In the third study, investigators found extremely high rates of psychiatric disorders among juvenile offenders who had been incarcerated for nine months (page 838). The fourth brief report presents data on the accuracy of a screening tool for identifying mental disorders among newly incarcerated adults (page 842). In the Personal Ac-

counts column the mother of a young man with mental illness describes her family's anguish over—and the long-term consequences of—his arrest after a suicidal episode and his 30-day stay in jail (page 726). Finally, in a commentary in Taking Issue, the Group for the Advancement of Psychiatry's Committee on Psychiatry and the Community describes the overwhelming response it received when "Dear Abby" agreed to put a notice in her column asking for stories from individuals and families who had become involved in the criminal justice system as a result of mental illness (page 723).

◆ Hospitals and Inpatient Care

Five studies this month focus on hospitalization and the inpatient setting. John C. Fortney, Ph.D., and colleagues analyzed data from 811 counties in 14 states to identify community-level factors associated with hospitalization of persons with schizophrenia. Among other factors, community-level poverty and unemployment were predictors, but no association was found with the supply of mental health specialists in a given locale (page 772). Using national data, Lonnie R. Snowden, Ph.D., and colleagues confirmed previous findings of the overrepresentation of black Americans in inpatient settings. However, these researchers uncovered hidden variations between three subgroups of the black population—African Americans and U.S.-born and foreign-born Caribbean blacks (page 779). In a case-control study of adults admitted to psychiatric hospitals in Brazil, Nirma C. Silva, R.N., M.Sc., and colleagues identified predictors of multiple readmissions and found that patients referred to special community programs after discharge had

lower readmission rates (page 786). Richard Whittington, Ph.D., C.Psychol., and colleagues asked patients and staff on psychiatric wards in England to complete a questionnaire about their views of 11 coercive inpatient interventions. The investigators found that although the groups had similar opinions, there were clear gender differences in how coercive measures were viewed (page 792). Beginning in 1998 all psychiatric hospitals in Israel were required to provide dental care for patients with stays of more than one year. Alexander M. Ponizovsky, M.D., Ph.D., and colleagues looked at cohort data from two years—1997 and 2006—to evaluate the effects of this policy (page 799). Finally, in Frontline Reports, Judith J. Prochaska, Ph.D., M.P.H., and colleagues describe a computer-delivered intervention tailored to stages of change that helps psychiatric inpatients quit smoking (page 847).

Briefly Noted . . .

- ◆ Researchers used latent-class trajectory analysis to identify four subtypes of patients with co-occurring disorders (page 804).
- ◆ For a qualitative study in New York City, families described what it was like to seek treatment for a young family member with recent-onset psychosis (page 812).
- ◆ Iraqi psychiatrists reported that the leading drug problem among their patients was diverted pharmaceuticals (page 728).
- ◆ A performance-based assessment of participants with schizophrenia who were asked to prepare a meal highlighted the critical role of memory and learning capacity in independent living (page 817).