

EARLY PSYCHOSIS: A Guide for Criminal Justice System Workers

Law enforcement and criminal justice professionals, along with their corresponding institutions, can help serve the first episode psychosis community by being well trained to recognize the symptoms of early psychosis and knowing how to best handle an encounter when someone may need mental health support.

Working together

Many of us come into contact with individuals who have undiagnosed early psychosis in our everyday lives. Law enforcement may be called upon to respond to situations involving such individuals when others in the community report odd or unusual behavior. These behaviors may be characteristic of psychosis, but will seem strange to people unfamiliar with these experiences.

While finding clinical intervention at the earliest possible point and providing mental health services to individuals through approachable and convenient avenues is ideal, there may be systematic limitations of these efforts and some young people experiencing psychosis will engage with the criminal justice system before, or even during, their course of treatment. This makes learning about psychosis and strategies to de-escalate situations involving individuals experiencing psychosis a critical bridge between local law enforcement and mental health professionals.

Dispelling Myths

Adapted from SMI Adviser

2%

Annual rate of violent behavior for individuals who have SMI and no history of violent victimization, exposure to violence, or co-occurring disorders

25%

Annual rate that people who have SMI are victims of violent crime each year

2%

Annual rate of violent behavior for the general public

11.8x higher

Likelihood for someone who has SMI to be the victim of a violent crime, compared to the general public

Overall, people who have Serious Mental Illness (SMI) are much more likely to be victims of violent crime than perpetrators.

Criminal justice & early psychosis

There are many opportunities for the criminal justice system to assist in connecting young people potentially experiencing their first episode of psychosis to the most effective care early on. Intervention at any point of the engagement process can help individuals with a mental illness bypass the potential trauma of involvement with the criminal justice system.

These include

Law Enforcement

Law enforcement officers play a key role as possible identifiers of potential early signs of psychosis and can divert people to more appropriate care such as a First Episode Psychosis Center.

Initial Detention/Court Hearings

In the time between initial detainment and first court appearance, there is a brief window of opportunity for screening to flag early psychosis and use that information to develop more effective pretrial release and detention recommendations.

Jails

If a person ends up with jail time when cases are not disposed at arraignment and a person does not qualify for diversion, it is important that jails bolster their capacity to detect early psychosis and provide early, evidence-based treatment.

Re-entry

If someone being released from jail is experiencing first episode psychosis, planning for re-entry into the community should ideally begin at jail booking. Periodic screening and assessment during a person's incarceration can help inform the services and supports that are appropriate for them to receive upon release.

Community Corrections

Once released, probation agencies should collaborate with Coordinated Specialty Care programs. Probation officers play a key role in early detection education campaigns.

Understanding Psychosis

Psychosis is a symptom or set of symptoms, not a disorder. It can be confusing and distressing the first time someone experiences an episode of psychosis. Behavioral and emotional changes associated with psychosis can be concerning because of a lack of understanding about what's happening. This lack of understanding often leads to a delay in seeking help, which means this treatable condition is sometimes left untreated.

COMMON SYMPTOMS

Hallucinations

Changes in perception, such as hearing, seeing, feeling, or smelling things that others don't. You may notice cues in someone's behavior, such as talking to themselves, looking somewhere and you don't know why, or focusing on certain body parts.

Unusual or delusional thinking

Persistent beliefs not shared by others. A person may report: Thinking people are watching them or that they are under surveillance; feeling very good at certain tasks; having a connection to a famous person; that the television, music, or other media are communicating directly to them; or any number of thoughts that are different from usual.

Social withdrawal

You may also notice a person is pulling away in social situations, seems uneasy with others, or makes comments indicating suspiciousness about others' intentions.

Cognitive disorganization

Speech and writing may become disorganized and/or tangential. People may draw connections between words or terms that seem illogical or non-sensical, have more difficulty than usual following conversations, or demonstrate changes in the amount, tone, rate, pitch, or rhythm of speech.

Overall change(s) in mood and/or behavior

People close to the individual may report significant changes, sometimes including thoughts of harming themselves or others. This can also include changes in participation in school, work, or other activities.

A person with psychosis may experience all or only a few of these symptoms. The intensity and impact of symptoms can also vary from one individual to another.

Understanding Recovery

The path to appropriate treatment for a young person is not always linear, but as awareness and treatment options for early psychosis continue to grow, we can work together to streamline connections to the best treatment as early as possible. As with most mental health concerns, the earlier someone gets help, the better.

What is HeadsUp?

HeadsUp is a collaborating organization whose mission is to help end the stigma around psychosis through education, advocacy, and support. We promote early intervention centered around personalized, accessible, and effective care for all people in Pennsylvania.

No two stories are exactly the same. Treatment at one of our early psychosis centers is a collaboration between the individual and the team of professionals ready to help. Each person at our centers has access to a variety of services and options including:

- Talk Therapy
- Supported Employment & Education
- Medication Management
- Peer Support
- Case Management
- Family Support and Education

We offer an array of tools to help educate & empower those who work in the criminal justice system

- Customized trainings
- Specialized virtual resources
- Connection to specialized early psychosis clinical teams in Pennsylvania



Connecting you to valuable resources



to learn more or find a center near you visit:

Headsup-pa.org