Appendix A: Target Population Characteristics

Target Population A

Adult women (age 18+) with SMI, with or without a co-occurring substance use disorder and at high-risk or currently involved in the forensic system.

Women in the Allegheny County Jail (ACJ) wait 135 days for a bed at Torrance State Hospital while their biological male counterparts wait 82 days (median days). This is because Torrance has fewer beds/capita for women. Once a women's bed does become available, their median length of stay is almost double that of men because of a similar shortage of community options. There are too few community-based, secure residential programs that provide intensive treatment for women with SMI.

In the past year, these women will have experienced a diagnosable mental, behavioral or emotional disorder of sufficient duration to meet the diagnostic criteria specified in the DSM-5-TR. Their functional impairments will limit their ability to perform essential tasks in one or more major life activities, which can include basic daily living skills (e.g., eating, bathing, dressing), instrumental living skills (e.g., personal care, managing prescribed medications, safely navigating their community, maintaining a clean and sanitary environment, managing finances), and functioning in social, family, vocational or educational settings.

The presenting problems for this target group will include:

• Persistently debilitating psychiatric symptoms and severely impaired functioning. While their recent presentations and mental status may appear acute, their psychiatric history typically reveals a longstanding struggle with symptoms that have significantly hindered their ability to carry out daily activities and engage meaningfully in work, school and interpersonal relationships. It is common for severe substance abuse to occur alongside these psychiatric issues, with the history of substance abuse exacerbating physical and mental health.¹

¹ Jennifer M. Park, Julie E. Wilbur, Lawrence Park, Donald C. Goff, CHAPTER 64 - Chronic Mental Illness, Editor(s): Theodore A. Stern, Jerrold F. Rosenbaum, Maurizio Fava, Joseph Biederman, Scott L. Rauch, Massachusetts General Hospital Comprehensive Clinical Psychiatry, Mosby, 2008, Pages 887-893, ISBN 9780323047432, https://doi.org/10.1016/B978-0-323-04743-2.50066-4.

Target Population B

Adult men (age 18+) with SMI, with an intellectual disability and/or autism spectrum disorder and at high-risk for or currently involved in the criminal justice system.

Adult men will be registered with the Pennsylvania Office of Development Programs (PA ODP) and experience behavioral health conditions. These conditions can include major depression, bipolar disorder, anxiety disorders, impulse control disorders, symptoms of psychosis and a history of substance abuse. Adults with autism spectrum disorder (ASD) may present with mood disorders, anxiety, stress, behavioral issues, emotional disorders and co-occurring intellectual disabilities (ID). Functional impairments for those with ID and ASD can arise from mental illness, as well as cognitive and sensory challenges. At the time of referral, these adults may be living in the community with family, in an adult congregate group setting or temporary shelter, in a state or community psychiatric facility and requiring a step-down level of intervention at the Torrance Regional Forensic Center, or in the Allegheny County Jail.

Common presenting issues for these adults include:

- High-risk behaviors and emotional dysregulation, including a current or historical pattern of sexually inappropriate behaviors and risk taking. The level of intervention needed to ensure safety is often not available in community-based settings.
- Their unlawful behaviors may have been triggered by mood and behavioral dysregulation in response to social rejection or loss. Factors such as disrupted routines, obsessive thoughts, language difficulties, compulsive acts, lack of empathy, suggestibility, gullibility or ignorance regarding consequences may have led to their being in custody.² Often, behaviors that led to their custody happened in the absence of appropriate support and supervision. Successful providers must be equipped to manage behaviors such as aggression, self-injury, property destruction, elopement and other actions posing potential safety concerns.

² Allen D, Evans C, Hider A, et al. Offending behavior in adults with Asperger syndrome. J Autism Dev Disord. 2008; 38(4):748–5