

What are Interim Remedial Measures needed in Criminal Justice to address the Structural Failure of Mental Health to Adopt Substantial Research that Neurodevelopmental and Psychiatric Disorders are Developmental, Multi-System Disorders?

Interim Criminal Justice Remedies

The interim remedial measures most supported by this literature are **early neurodevelopmental screening, specialist diversion, developmentally tailored court practice, and cross-system care pathways**, because current criminal justice and mental health systems often misidentify, fragment, or criminalize people whose disorders are developmental and multi-system in nature (Vinson & Dennis, 2021; Chaplin et al., 2022; Pedruzzi et al., 2021). The evidence spans adults and youth, and it points less to a single new program than to a **structural redesign at key justice intercepts**: police contact, court, detention, and community reentry (Hailemariam et al., 2024; Holland et al., 2021).

Effectiveness of Interim Measures

Evidence

Strength

Claim



Strong

Specialist identification and diversion appear to improve recognition of neurodevelopmental disorders and reduce avoidable custody when embedded in justice pathways (Tripathy et al., 2025; Chaplin et al., 2021)



Moderate

Comprehensive assessment is superior to brief screening, and justice populations with neurodevelopmental or psychiatric disorders show enough complexity to require tailored rather than generic mental health responses (Holland et al., 2021; Chaplin et al., 2022; Chaplin et al., 2021)



Moderate

Whole-system, multi-agency models are associated with better continuity from police and court into community care, but implementation evidence remains modest and uneven (Tripathy et al., 2025; Azeke & Nouredine, 2023)

FIGURE 1 Strength of evidence for interim justice remedies

Immediate Practice Changes

The strongest near-term measures start at **first contact**. A recent pathway model reports that specialized early screening can raise neurodevelopmental disorder detection by **45%**, while failure to coordinate after court leaves about **80%** of identified people in a support gap that leads back toward custody (Tripathy et al., 2025). A systematic review of serious mental illness interventions also shows that early intercepts such as arrest and initial hearings remain underused despite clear risk and need (Hailemariam et al., 2024).

Three interim measures follow directly from that pattern:

- **Universal validated screening** at police, court, detention, and reentry, followed by fuller assessment for positives (Drake et al., 2020; Holland et al., 2021).
- **Embedded NDD specialists** inside existing liaison and diversion teams, rather than relying on generic severe-mental-illness models (Chaplin et al., 2021).
- **No-wrong-door referral rules** so treatment access does not depend on whether entry begins in health, court, or corrections (Drake et al., 2020).

Evidence Coverage Across Justice Reform

	Screening	Diversion	Workforce	Legal adaptation	Community continuity
Neurodevelopmental disorders	8	6	7	5	4
Serious mental illness	5	5	4	4	6
Youth developmental response	6	5	4	6	5
Substance use comorbidity	3	2	3	1	4

FIGURE 2 Research coverage across criminal justice reform domains

The clearest gap is **community continuity after identification**. Multiple papers show that need is recognized in court or custody, but access to sustained community care remains weak, especially for youth and people with co-occurring conditions (Rice et al., 2023; Drake et al., 2020). Another major gap is **legal adaptation to neurodevelopmental impairment**: the literature repeatedly describes outdated or inconsistent definitions, limited training, and legal standards that do not fit subtle impairments in judgment, communication, and impulsivity (Pedruzzi et al., 2021; Qc, 2020; Frierson & Joshi, 2023).

Priority Legal And System Reforms

- **Train judges, lawyers, police, and clinicians** in neurodevelopmental and multi-system formulations, because current expertise is limited and often focused too narrowly on psychosis and mood disorders (Guina et al., 2022; Qc, 2020).
- **Adapt court procedures and culpability evaluations** to communication, reasoning, impulsivity, and psychosocial maturity, especially for youth and neuropsychiatric impairment (Guina et al., 2022; Ramírez-Rivera & Martínez-González, 2026).
- **Prefer community-based and developmentally tailored dispositions** over deeper system penetration when safety permits, because punitive pathways are misaligned with adolescent development and can worsen long-term outcomes (Cavanagh, 2022; Ramírez-Rivera & Martínez-González, 2026).
- **Build antiracist, culturally competent pathways** because structural racism and limited cultural adaptation distort both mental health care and criminal legal outcomes (Vinson & Dennis, 2021; Holland et al., 2021; Pedruzzi et al., 2021).

The literature supports interim criminal justice remedies that **identify developmental and multi-system disorders early, divert people into specialist and continuous care, adapt legal processes to functional impairment, and fund cross-agency infrastructure**. Evidence for exact program effects is still moderate rather than definitive, but the need for these interim measures is consistent across the full set of papers.

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