National Assisted Outpatient Treatment (AOT) Demonstration Project

Purpose: To reduce violence, arrests, incarcerations, hospitalizations and other consequences of not treating mental illness by providing special grants to communities in order to increase the implementation of court-ordered outpatient treatment (“assisted outpatient treatment” or “AOT”).

Background: Assisted outpatient treatment (AOT) is court-ordered treatment (including medication) for individuals with severe mental illness who meet strict legal criteria, e.g., they have a history of medication noncompliance, violence, arrest or hospitalization. Typically, violation of the court-ordered conditions can result in the individual being evaluated or hospitalized for further treatment.

Forty-four states have laws authorizing the use of AOT for qualifying individuals. Despite its proven benefits (see below), the treatment option has been comprehensively implemented statewide only in New York. The proposed demonstration project would provide grants to promote wider use of AOT by seeding up to 100 AOT programs nationwide.

Demonstration Project Design: The National AOT Demonstration Project would foster implementation of assisted outpatient treatment programs in 100 communities nationwide by providing grant funding to incentive courts, mental health providers and law enforcement to establish and use AOT in their communities. (See the 2000 Mental Health Courts legislation, S.1853, as a potential model.)

Proven Benefits: The Department of Justice has deemed assisted outpatient treatment to be an effective, evidence-based program for reducing crime and violence1. Evidence includes research demonstrates that AOT reduces the risks of hospitalization, arrest, incarceration, crime, victimization and violence.2 Moreover, research shows that AOT for more than six months results in overall mental health cost savings3. (For annotated information about AOT, please see the “Assisted Outpatient Treatment” backgrounder at http://bit.ly/ZlOuk4)
Resources and Witnesses:
Additional resources, information and names of individuals who can testify in support of the project are available upon request to the Treatment Advocacy Center in Arlington, Virginia.


² Studies referenced:


Phelan, Jo C., Sinkewicz, Marilyn, Castille, Dorothy, Huz, Steven, and Bruce G. Link. 2010. "Effectiveness and Outcome of Assisted Outpatient Treatment in New York State." Psychiatric Services 61: 137-143.


3 M. Swartz, J Swanson. (2013). Can states implement involuntary outpatient commitment within existing state budgets? "Psychiatric Services, 64."