

## PROFESSIONAL LITERATURE UPDATES, SPRING 2019

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### **Mental Health Court Updates:**

#### *Race/Ethnicity*

- Within a traditional court sample, African Americans were less likely than Whites to receive mental health and substance abuse services. Within the MHC sample, significant racial/ethnic disparities were not found. However, African American MHC participants utilized more substance abuse services than their counterparts (Han & Redlich, 2018).

#### *Service Utilization*

- With MHC group (compared to traditional court group), for MH services, those with public benefits, more family contact and more days in the community were more likely to use MH services. Those enrolled in MHC with more previous services and more days in the community were more likely to use substance abuse services (Han & Redlich, 2018)

#### *Case Management*

DeJongh & Oldani, 2018

- Data from Milwaukee MHC started in 2014, and medical anthropologists (who were part of the MHC team) made recommendations to foster client-centered care. In particular, they recommended adding a pharmacist to the team. The complexity of psychiatric medication being administered to clients as well as clients' ability to self-medicate with other substances, required more expertise on drug-drug interactions, adverse effects, and efficacy as it relates to specific

MH diagnoses. During early 2016, the MH pharmacist on the team began meeting with clients who were in need of medication counseling prior to court.

- Two case studies demonstrated how MH pharmacists can aid in reevaluation of medication regimen, reducing polypharmacy, adherence related issues (e.g. injectable forms of medications) and education on risks of illicit substance use.

### *General Outcomes*

- MHC enrollment for those with mental illness and co-occurring substance use disorder was associated with a significantly greater length of time until re-arrest -- which is important given that those with substance use disorders are at a greater risk for reoffending (Gallagher, Anestis, Gottfried, & Carbonell, 2018)
- MHC participation was associated with significant reduction in homelessness during follow up (6 and 12 month). Homelessness was associated with increased risk of violence during follow up and participations who reported homelessness were almost 5 times more likely to have engaged in violent behavior compared with those not reporting homelessness. Homelessness was also a significant mediator of the relationship between MHC participation and lower risk of violence. Thus, it may be beneficial to address homelessness in treatment planning. (Gonzales, McNeil, 2018)

## **Drug Court Updates**

Wilson, Bandyopadhyay, Yang, Cerulli, Morse (2018)

- This study explored age, race/ethnicity, gender, education, employment and whether these variables could predict longitudinal substance use and recidivism outcome trajectories
- DTC (Drug Treatment Court) and CBT (community based treatment programs) study groups differed significantly in that DTC clients were older, more educated, less frequently employed, lower baseline drug use and higher baseline arrest – female and White/non-Hispanic clients more prevalent within DTC group compared with CBT group
- Substance Use
  - Individuals with higher baseline substance use, more years of education, those of Hispanic or non-white race and those lacking employment had fewer reductions in substance use at 6 month follow up
  - Total abstinence from drug use at follow up was associated with gender, employment, and baseline substance use – refraining was more likely for women, abstinence less likely in employed and those with higher baseline substance use
- Recidivism
  - Employment made all individuals 18 times more likely to have rearrests at follow up but when the interaction analyses were examined, employed DTC individuals were over 23 times less likely to have arrests compared with reference level participants (unemployed and CBT participants). The authors indicate the conflicting nature of these findings was consistent with existing research and noted that 1) for some participants the income may have helped pay legal fees and costs of substance abuse treatment or 2) the income earned may have been used to purchase drugs in high crime neighborhoods which led to

continued substance use and subsequent rearrests. The authors further noted that the burden of employment may have interfered with recovery activities making those individuals more susceptible to stress and subsequent relapse and behavior leading to rearrest.

- Older individuals were overall more likely to have rearrests but for DTC clients age was a protective factor against rearrests
- Among those who had recidivated by the 6month follow up visit, older clients were more likely to have fewer arrests

A study examining the preliminary outcomes of integrating a co-occurring mental health and substance use wraparound intervention within two drug courts found that clients had significant reductions in number of jail days, decreased substance use, and increased employment. These outcomes were at least in part attributable to the wraparound intervention. Clients also demonstrated reduced hospitalizations and increased linkages to medical providers. (Smelson, Farquhar, Fisher, Pressman, Pinals, Samek, Duffy, Sawh, 2019)

## **Issues Related to Race and Ethnicity**

Journal for Advancing Justice, Volume I, Identifying and Rectifying Racial, Ethnic, and Gender Disparities in Treatment Courts. National Association of Drug Court Professionals (2018) includes six articles about racial, ethnic and gender disparities in treatment courts. The findings from the articles are summarized below:

Racial and Gender Disparities in Treatment Courts: Do They Exist and Is There Anything We Can Do to Change Them?: Ho, Carey, and Malsch conducted a meta-review of racial, ethnic, and gender disparities in 142 treatment courts. African

Americans had lower graduation rates than White participants even after controlling for education, employment, prior arrests, and age. They identified treatment court practices that were related to decreases in graduation rate disparity, which included:

- defense attorney, probation, coordinator attends treatment court team meetings;
- defense attorney, representative from treatment, coordinator attends court status hearings;
- number of active participants is less than 125;
- family/domestic counseling;
- participants expected to have more than 90 days sober before graduation;
- including members from the participants' community on the treatment court team;
- the treatment court not terminating participants if they receive a new drug charge;
- review of the regular reporting of program statistics leads to modifications in treatment court operations.

They also noted two practices, though not statistically significant, which trended toward increasing the disparity: requiring participants to have a job or be in school in order to graduate, and pay court fees before graduating.

Exploring Racial and Ethnic Disproportionalities and Disparities in Family Treatment

Courts: Findings from the Regional Partnership Grant Program: Breitenbucher, Bermejo, Killian, Young, Duong, and DeCerchio examined racial and ethnic disparities in 11 family treatment courts. Findings indicate that White children are overrepresented, while Hispanic or Latino, African American, Asian/Pacific Islander, and multiracial children are underrepresented. The study highlighted a particular program that had better performance on permanency indicators (length of out of

home placement, reunification with parents), which included specialized outreach strategies such as co-location of recovery coaches and having a racially diverse staff that reflected the population served.

Examining Racial Disparities in Program Completion and Post-Program Recidivism Rates: Comparing Caucasian and Non-Caucasian Treatment Court Participants:

Shannon, Jackson Jones, Nash, Newell, and Payne examined graduation rates and 2 year recidivism outcomes in a statewide (Kentucky) sample of drug court participants. When race was used as the only predictor, the odds of graduating decreased by 51% for non-Caucasians. When demographic, substance use, mental health, criminal justice and during program factors were added, race was not significant. However, several factors associated with race were related to recidivism rates and lower graduation rates including education, marital status, treatment for a psychological or emotional problem in a hospital, and criminal and incarceration history.

African American Participants' Suggestions for Eliminating Racial Disparities in Graduation Rates: Implications for Drug Court Practice:

Gallagher and Nordberg conducted focus groups with African American drug court participants. Data collected from several previous studies in Tarrant County in Fort Worth, Texas and St. Joseph County in South Bend, Indiana were combined and a new analysis completed. Findings indicated that they reported favorable views towards key components of drug courts. For example, they felt that frequent and random drug screens along with frequent contact with the judge supported them in graduating. However, they had negative views towards counselors and the quality of treatment for substance use disorders (too much focus on presumed symptoms of addiction). They felt they were not receiving individualized treatment, particularly for mental health symptoms and in obtaining employment. Treatment providers were also viewed as being disrespectful and untrustworthy and more interested in enforcing obedience.

Developing a Culturally Proficient Intervention for Young African American Men in Drug Court: Examining Feasibility and Estimating an Effect Size for Habilitation Empowerment Accountability Therapy (HEAT): Marlowe, Shannon, Ray, Turpin, Wheeler, Newell, and Lawson conducted two pilot studies (Study 1 conducted in the Fayette County Drug Court in Lexington, Kentucky and Study 2 conducted in Marion County Reentry Court in Indianapolis, Indiana) examining culturally proficient curriculum for young African American men in drug court, HEAT (Habilitation Empowerment Accountability Therapy). Cultural heritage and life experiences with racism and discrimination are core elements of the intervention and results revealed improvements in counseling attendance and graduation rates.

Trauma Treatment for Men in Recovery for Substance Use Disorders: A Randomized Design Within the Miami-Dade County Adult Drug Court: Waters, Cochran, Lee and Holt explored the outcomes of a trauma focused intervention, Helping Men Recover (HMR), among primarily Hispanic male drug court participants. There were no differences in the four key outcomes (retention in drug court, social functioning sobriety, and recidivism) between the HMR group and the Seeking Safety group. Seeking Safety is an extensively researched treatment program for comorbid PTSD and substance abuse. Treatment occurs in gender-specific groups and utilizes CBT and psychoeducation with a focus on reducing symptoms of PTSD and substance use as well as developing coping skills. However, those in the HMR group were more likely to report improvements in overall health and more likely to interact with family and friends who were supportive of recovery efforts. Rates of self-reported trauma exposure and trauma symptoms increased over the course of treatment, which suggests the intervention may sensitize participants to the destructive effects of trauma on their current life circumstances, bring repressed traumatic memories to conscious awareness, and/or encourage participants to report trauma symptoms more faithfully.

## Other Specialty Court Updates

Kaiser and Rhodes (2019) conducted an analysis of whether other types of specialized court programs (youth/teen, adult mental health court, domestic violence, family dependency, veterans) share similar program characteristics with the drug court model. One primary finding indicated that with the exception of youth/teen courts, specialized court programs are more similar to, than different from adult drug courts. The other major finding indicated that specialized court programs address multiple key problems and offer a variety of services. Thus, there is a significant amount of overlap between these types of specialty courts.

A study exploring ethnic differences in perceptions of procedural justice within a drug court and veterans court found that Black clients had significantly lower perceptions of procedural justice compared to White clients. There was no difference between Hispanic and White clients. Although there were racial differences in perceptions, the authors noted that perceptions of procedural justice were high among all surveyed clients. (Atkin-Plunk, Peck, & Armstrong, 2019)

Examination of results from a San Diego veterans treatment court indicated significant reduction in depression, drug use, PTSD and aggressive behaviors. There were differences in treatment outcomes based on factors of military service. The authors noted that this particular program utilizes a pre-sentencing assessment process which included thorough clinical assessment with an individualized treatment plan and recommendations, including treatment of trauma-related conditions connected to the veteran's criminal behavior. It is this process in addition to the systematic data collection procedure that the authors credit the success of the

court in effectively addressing the mental health needs of the participants. (Derrick, Callahan, Vesselinov, Krauel, Litzenberger, Camp, 2018).

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