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Psychiatric symptoms impact mental health court engagement`

UNIVERSITY OF MISSOURI-COLUMBIA



IMAGE: IN STUDYING MENTAL HEALTH COURTS, KELLI CANADA FOUND THAT IN ORDER TO BE SUCCESSFUL EVERY PROFESSIONAL ENGAGED IN THE COURTS SHOULD BE AWARE OF ALL PSYCHIATRIC SYMPTOMS. [view more >](#)

CREDIT: MU NEWS BUREAU

COLUMBIA, Mo. - People living with mental illness are overrepresented in the criminal justice system. It is estimated that 1 million people with mental illnesses are arrested and booked in the U.S. each year. As such, interventions to help this population, such as mental health courts, are becoming popular in communities across the country. New research from the University of Missouri finds that for mental health courts to be successful, every professional engaged in the process should be aware of the relationship between psychiatric symptoms and participant engagement within the system and connect participants with comprehensive treatment and services as early as possible.

Mental health courts seek to address underlying problems that contribute to criminal behavior by linking criminal offenders who have mental illnesses to needed services and treatment. Mental health courts provide a voluntary option for criminal offenders that incorporates mental health assessments, treatment plans and ongoing monitoring to address the health needs of offenders in an effort to keep them out of jail, while also ensuring public safety.

"We know that mental health courts are able to provide tools to decrease criminal recidivism, however, little is really known about the factors that facilitate or impede participant success in such programs," said Kelli Canada, assistant professor in the School of Social Work. "With mental illness, people tend to think of the primary disorder at the exclusion of other symptoms that have yet to reach a diagnosable level. Those additional psychiatric symptoms can have a significant impact on a participant's success within mental health courts. For example, a participant with schizophrenia may have mild depressive symptoms that are not accounted for in the treatment plan. The depressive symptoms, not the psychosis, could cause them to sleep through a meeting with a probation officer."

Canada analyzed the relationship between psychiatric symptoms and mental health court engagement by looking at treatment adherence, substance use, days spent in jail, probation violations and retention during a six month follow up period. She found that symptoms of depression, anxiety and guilt were more severe for those participants incarcerated during their follow up period. The results speak to the importance of providing quality mental health and substance use treatment that addresses all of the participant's health needs.

"We found that for mental health courts to be the most successful, they must find a way to account for mental illness variation and incorporate this variation into treatment planning and decision making regarding the use of sanctions in order to support program engagement," Canada said. "We know that for people dealing with substance abuse, slip-ups can occur. The same holds true for mental illness recovery. Recovery set-backs and psychiatric symptom exacerbation can impact a participant's engagement within the program; if that is not accounted for, it could and often does impact success."

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Canada's study, "Psychiatric Symptoms and Mental Health Court Engagement," recently was published in *Psychology, Crime and Law*. Greg Markway with the Missouri Department of Mental Health and David Albright with the University of Alabama were co-authors of the study. The School of Social Work is part of the MU College of Human Environmental Sciences.

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