This project was funded by the Ohio Department of Mental Health and the Ohio Office of Criminal Justice Services.

KENT STATE UNIVERSITY

RESEARCH BRIEFING 3:
Impact of Diversion Programs on Consumers' Quality of Life and Depressive Symptomatology

Ohio Office of Criminal Justice Services
1970 W. Broad Street, 4th Floor
Columbus, Ohio 43218-2632
Toll-Free: (800) 448-4842
Telephone: (614) 466-7782
Fax: (614) 466-0308
www.ocjs.ohio.gov

KENT STATE UNIVERSITY

Research Briefing 3

Impact of Diversion Programs on Consumers' Quality of Life and Depressive Symptomatology

Objectives: Self-concept can be defined as the individual's perception of who s/he is and this perception is affected by the types of interactions the person has with others. The degree to which the stigma of mental illness is incorporated into an individual's self-concept increases the likelihood that the illness is long term, that self-esteem is lowered, and that there are negative social psychological, mental health, and behavioral outcomes. In this study, we assessed the effects of participating in two diversion programs on the amount of services received and the level of stigma individuals felt. We also assessed the effects of services received and stigma on such long-term consequences as quality of life, depression, and subsequent encounters with the police.

Methods: We administered a confidential, one-hour, semi-structured interview to 371 consumers of mental health services. The interviewers asked questions concerning perceived stigma; the types of services received; the interviewees' feelings of empowerment, self-esteem, and mastery; and the kinds of social support the interviewees' had with which to cope with aspects of daily living. The questionnaires also included questions on depression and quality of life. Quality of life was assessed by asking questions concerning access to resources, fulfillment of social roles, and life satisfaction.

We compared three groups of people who had been in a program. The first group, the outpatient civil commitment group, had been involuntarily committed for at least six months to the local mental health services board through the Probate Court. Those who accepted mental health court and successfully completed the program were the second group. Successful completion meant that the participant met all the requirements of the court and completed the two year probationary period. Those who accepted mental health court and were currently active in the program were the last group. So that we could demonstrate the effects, if any, of the programs and to insure that we were not picking up differences between the groups, we included a group of people with mental illness who had not participated in either program.

Results:

- There were no direct effects on quality of life by program status (outpatient civil committed, successful mental health court, and active mental health court participants). That is, just being in one of the programs did not change a person's quality of life.
- Although there was no direct effect, in comparison to the other groups, successful mental health court completers experienced a higher quality of life through stigma reduction. In other words, successful mental health court completers had a higher quality of life than the people in the other groups because they felt better about themselves since they perceived themselves as less stigmatized.
- In comparison to those in the other groups, participants in the active mental health court and the outpatient commitment groups experienced fewer depressive symptoms.
- Although there was no direct effect, in comparison to the other groups, successful mental health court participants experienced less stigma, which decreased their symptoms of depression.

NEOUCOM
NORTHEASTERN OHIO UNIVERSITIES
COLLEGE OF MEDICINE

Department of Sociology
Quality of Life of People with Mental Illness
P.O. Box 5190 • Kent, Ohio 44242-0002
330 672-8342 • Fax 330 672-4724 • http://www.kent.edu

ADM
County of Summit
Alcohol, Drug Addiction & Mental Health Services Board

Research Briefing 3 continued

Figure 1 depicts the relationship between successful mental health court participation and quality of life. We took into account or controlled for an individual's perceptions of self-worth and feelings of self-degradation. The more social isolation a person felt, the lower their quality of life (-.111). People who successfully completed mental health court had a reduction in their perception of social isolation (-.133), one dimension of stigma. Additionally, the more social support a person has, the higher their quality of life (.145).

Figure 1. Subjective perception of quality of life for successful mental health court participants, controlling for perceptions of self-worth and self-degradation

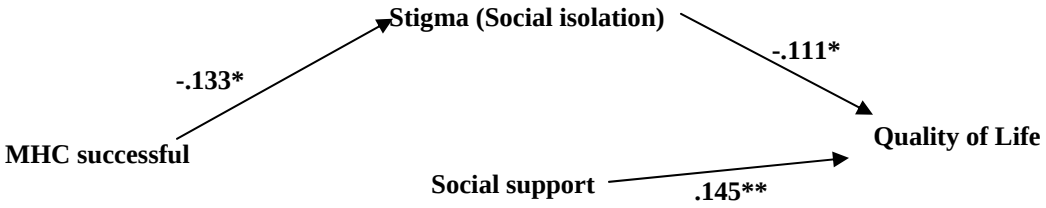
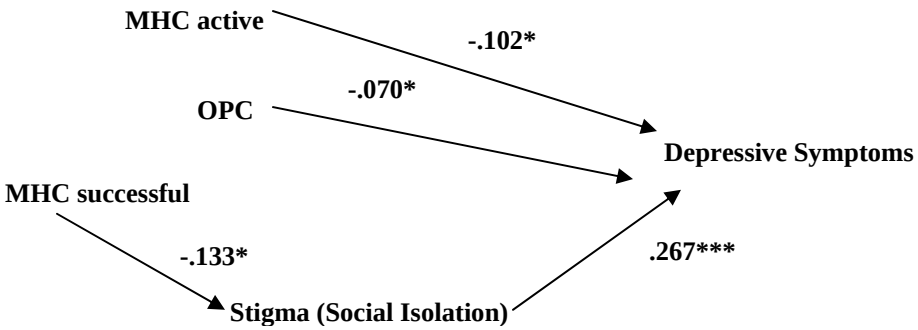


Figure 2 depicts the effect of program participation on depressive symptoms, again taking into account feelings of self-worth and self-degradation. Successful mental health court participants experienced a reduction in perception of stigma (-.133). Social isolation increased depressive symptoms (.267) so for successful completers of mental health court the net result of reducing social isolation was to reduce depressive symptoms.

Depressive symptoms were directly reduced for mental health court active (-.102) and outpatient committed (-.070) participants, which means that it was the participation itself, and not any changes in self-perceptions, that affected feelings of depression.

Figure 2. Depressive symptoms by program status, controlling for perceptions of self-worth and self-degradation



Funding provided by the Ohio Department of Mental Health and the Ohio Office of Criminal Justice Services. This is only a highlight from an ongoing research program. The research team appreciates the editorial assistance of Dee Roth, Chief, OPER, and Lisa Shoaf, Statistical Analysis Center Director, as well as the assistance of our research partners: Summit County Alcohol, Drug Addiction, and Mental Health Services Board, the Northeastern Ohio Universities College of Medicine, and Community Support Services. If further information is desired or if there are questions about data interpretation, please contact either Dr. Christian Ritter or Dr. Jennifer Teller. (July 2005)

NEOUCOM
NORTHEASTERN OHIO UNIVERSITIES
COLLEGE OF MEDICINE

Department of Sociology
Quality of Life of People with Mental Illness
P.O. Box 5190 • Kent, Ohio 44242-0002
330 672-8342 • Fax 330 672-4724 • http://www.kent.edu

ADM
County of Summit
Alcohol, Drug Addiction & Mental Health Services Board