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**RESEARCH BRIEFING 7:  
Recidivism of Successful Mental Health Court  
Participants**

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## Research Briefing 7

### Recidivism of Successful Mental Health Court Participants

*Objectives:* Promoted as a solution to the criminalization of the mentally ill, mental health courts have taken the idea of therapeutic jurisprudence to foster enduring ties to the treatment system and thereby stop the revolving door of the criminal justice system. The first Ohio mental health court began in 2001 in Akron and recently was designated one of five Bureau of Justice Assistance Mental Health Court Learning Sites.

One measure of the effectiveness of the MHC program in altering behaviors is to determine if the individual recidivates after separation from the program and, if so, the amount of time until the recidivism occurs. In this briefing, we examine recidivism by MHC successful participants, comparing this group to other consumers of mental health services.

*Methods:* Respondents from one county in northeastern Ohio were recruited from crisis and non-crisis facilities and/or identified as having interactions with the Municipal court during our study period. Those identified through the Municipal court had an interaction with the criminal justice system. We collected local county jail data for the period January 1, 2000 through December 31, 2005.

We compare three groups. One group is those who successfully completed the Municipal Court mental health court (MHC) program (*graduates*). This group is compared to two non-program groups. One is made up of those who met the eligibility criteria for the MHC program but declined to participate (*eligibles*). The second group is comprised of consumers of mental health services who were identified at either a crisis or a non-crisis facility or who were found ineligible to participate in the MHC program (*others*).

Each person was assigned an index date and a separation date. For the non-program groups, the index and separation dates are the same, as they were not a part of the diversion program. For these groups, the index and separation dates are the date they were interviewed by us or came to the attention of the court. For the program groups, the index date was the date the person came to the attention of the court and the separation date was the date the person successfully separated from the program.

To date, we collected information on 107 *graduates*, 61 *eligibles*, and 438 *others*. Our sample is composed of 208 people who met the criteria of 1) having at least 6 months of time before the index date, 2) having an arrest in the period before the index date during the study period, and 3a) who were in the community at least two years after the separation date or 3b) who recidivated during the two-year period. There are 44 *graduates*, 45 *eligibles*, and 119<sup>1</sup> *others* in the sample who met the criteria during the study period.

We were interested if there were differences between those who were eligible but declined MHC and those who accepted MHC. For those who met the above listed criteria, there were no differences between *eligibles* and those who accepted MHC in demographic characteristics (race, sex, age), psychiatric diagnosis (schizophrenia, bipolar, depression, or other), substance diagnosis (alcohol and/or drugs), and pre-index date or post-separation date behaviors (jail, prison, or hospitalizations).

<sup>1</sup>Of all who met the other criteria, 65% of the *others* and 100% of the *graduates* and *eligibles*, had an arrest prior to the index date during our study period.

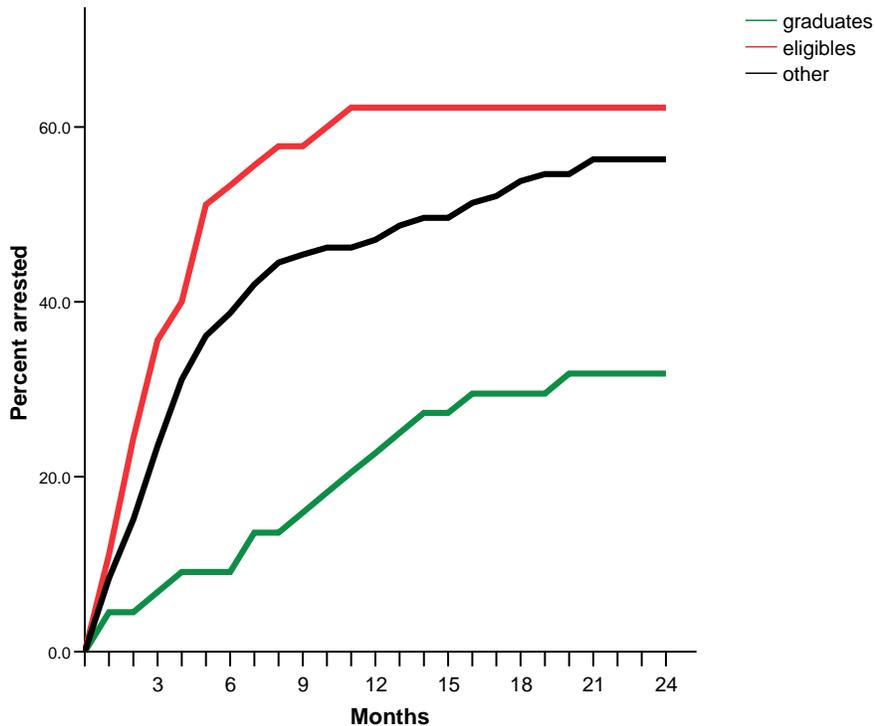
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*Results:*

- Fewer *graduates* experienced a new incarceration during the two years after separation from the diversion program when compared to the control groups (see Figure 1).
- The average number of days until occurrence of recidivism of those arrested for *graduates* is significantly higher than the average for the control groups. Within the first year, 23% of the *graduates*, 47% of the *others*, and 62% of the *eligibles* were arrested. At the end of the second year, 32% of the *graduates* and 56% of the *others* had been arrested, while the *eligibles* who had been arrested had all been arrested during the first year after the separation date.
- *Graduates* are diagnosed with a bipolar disorder more frequently and with some other diagnosis less frequently than the *other* group. There are no other significant demographic, psychiatric diagnosis, or substance disorder differences between the *graduates* and the two control groups. The *graduates* also do not differ from the control groups in the proportion of time spent incarcerated prior to program participation.

*Conclusions:* The *graduates* have a lower rate of recidivism than the control groups. When *graduates* do recidivate, they have been in the community for a longer period of time than the control groups. We conclude that this indicates that the program has the desired effects of reducing the revolving door of the criminal justice system.

**Figure 1: Months After Separation Date to First Arrest**



Funding provided by the Ohio Department of Mental Health and the Ohio Office of Criminal Justice Services. The data presented here are part of a larger study designed to investigate the relationships between diversion programs and the perception of stigma, receipt of psychiatric services, quality of life, and well-being for consumers of mental health services who were living in the community. The research team members are Principal Investigator, Christian Ritter, Ph.D., Co-Principal Investigator Mark Munetz, M.D., Project Director Jennifer L.S. Teller, Ph.D., and Research Associate Natalie Bonfine, M.A. If you desire further information or have questions about data interpretation, please contact either Dr. Ritter or Dr. Teller. (April 2007)