

**Facilitating the Success of Mental
Health Court Participants**

Activities Guide



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**Facilitating the Success of
Mental Health Court Participants**

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Facilitating the Success of Mental Health Court Participants

These activities are designed to help you develop approaches for monitoring and interacting with program participants in a way that increases their likelihood of meeting program requirements and progressing toward recovery. While you may already have an idea about what motivates program participants to follow conditions of supervision and adhere to treatment plans, these activities will help you think about how to integrate research-based principles for behavior change into the general atmosphere you create for your program and into your responses to specific events.

The activities, which include questions and worksheets, should be completed by the people who will serve on your mental health court team, including its primary champion(s) who will be involved in planning. You will complete some activities on your own and others as a group. Two of the activities require that you watch short video segments of a mental health court team in action. At the end of the activities, you will be asked to list three issues that the activities have raised for your own program planning.

Each activity is explained in the sidebar on the right-hand side of the page. The sidebar can also be used for notes as you complete the guide. If you are reading this document online, you can link to the resources for each activity below the activity description.








Module 7



Activity 1: Setting the Conditions for Success

As you'll recall from the online Presentation, mental health court teams try to set conditions for program participants to "beat the odds." Nearly half of individuals sent to prison return within three years. People with serious mental illnesses, many of whom have co-occurring substance use disorders, face many obstacles as they progress toward recovery and follow the conditions of supervision set by the mental health court. Each mental health court team will draw from general research on what motivates people to follow treatment and supervision conditions.

This activity focuses on how to incorporate research-based principles for behavioral change into your program. First, you will view and then discuss a mock Bonneville County (ID) Mental Health Court staffing meeting. Next you will view and discuss a mock court appearance of the hypothetical participant discussed in the staffing meeting. Finally, you will be asked to discuss with your team how different team members can contribute to setting up the conditions for participant success. The chart below outlines steps to complete the activity, actions required, and how long each step will take.

| Steps | Action | Complete as | Completion Time (in minutes) |
|--|---------|--|------------------------------|
| a. Scenario: Jane Taylor | Read |  | 5 |
| b. Video Clip: Jane Taylor staffing | View |  | 5 |
| c. Questions: Preparing for court interactions | Discuss |  | 10 |
| d. Video Clip: Jane Taylor court | View |  | 5 |
| e. Questions: Conditions for success | Discuss |  | 25 |
| | | | 50 |
|  Complete on your own | |  Complete as a team | |

Activity 1 is designed to help you think about how to set the context for a program participant to be successful.

Outputs

- Strategies for creating the conditions for participant success in your program
- An understanding of how the team applies research into what enhances motivation to engage in treatment and comply with court conditions

a. On your own, read the scenario describing Jane Taylor, a hypothetical mental health court participant.

Jane Taylor has been in the program for four months. She has a history of multiple misdemeanor offenses, such as trespassing and public urination, and was recently charged with a felony—arson in the first degree. She also exhibits signs and symptoms consistent with bipolar disorder, which is a diagnosis in Axis I of the DSM-IV-TR. Ms. Taylor does not meet criteria for a substance use disorder. Currently, her treatment plan includes adherence to outpatient mental health treatment, medication management, weekly one-on-one peer specialist meetings, and monthly meetings with the case manager and probation officer. In the first three months, Ms. Taylor has complied with the treatment plan. Jannet, the Assertive Community Treatment (ACT) team liaison, has been pleased with her progress. However, over the past month, Ms. Taylor has missed two of her four treatment appointments.

b. As a group, view the Bonneville County Mental Health Court mock staffing meeting that preceded Jane Taylor’s court appearance. This video will illustrate how the team prepares for interactions with participants in a manner that helps the participant to succeed. To access the video, follow the link below to the course site.

Video Link:

Video 1: Jane Taylor - Staffing Meeting

c. As a group, discuss the following questions.

1. The relationship between participants and members of the team is essential to keeping participants motivated and engaged in treatment. Mental health court team members should try to see and understand things from the participant’s point of view whenever possible. In what ways do the Bonneville team members express empathy for Ms. Taylor?
2. Is the team’s decision not to give Ms. Taylor a sanction appropriate for Ms. Taylor’s status in the course of the program? Why or why not?
3. What role does the prosecutor play in this discussion?

Notes:

- d. As a group, view the Bonneville County Mental Health Court mock session in which Ms. Taylor appears before the judge. To access the video, follow the link below to the course site.**

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Video Link:

Video 2: Jane Taylor - Court Appearance

- e. As a group, discuss the following questions.**








1. What examples, if any, can you provide of the team doing the following:
 - Increasing the ratio of positive to negative feedback?
 - Clarifying expectations and consequences?
 - Responding to all events as promptly as possible?
 - Making responses meaningful to the participant and considering adjusting treatment as an appropriate response?
2. How does the judge elicit responses from Ms. Taylor that require more than a yes or no response?
3. In what ways does the judge involve Ms. Taylor in problem solving before offering her any solutions?
4. How do team members avoid getting into confrontational situations with Ms. Taylor?
5. It is suggested that good programs meet people where they are, adapting to individual participants' values; family circumstances; education level; social class; and intellectual, psychological, and emotional capacity. Are there instances where the team has done this with Jane? If so, what has the team done to meet Ms. Taylor where she is?
6. What might you do differently from the Bonneville County team to establish the conditions for successful participation in your program?
7. What might you do that the Bonneville County program has not to develop positive interpersonal relationships between participants and members of the team? In particular, consider what you might do in the early stages of a participant's involvement in the program when s/he may be unmotivated to change behavior or comply with treatment or supervision conditions.



Activity 2: Responding to Positive and Negative Events

Each program participant is likely to engage in both positive and negative behaviors throughout the course of the program. Your program should be designed to respond to both positive and negative events in a way that is perceived as fair by all participants. At the same time, each program will need to draw from a range of possible responses to each event to ensure that the response accounts for individual differences in what fosters positive behavior change.

This activity focuses on how to design responses to positive and negative events. First, you will consider how Water County, a hypothetical mental health court team, is designing its responses. Next, you will read and then discuss *Mental Health Court Strategies to Help Defendants with Mental Illnesses Make Progress in Treatment and Comply with Court Requirements*, developed by the Center for Court Innovation. Finally, you will view and discuss a mock Bonneville County (ID) Mental Health Court team court session. The chart below outlines steps to complete the activity, actions required, and how long each step will take.

| Steps | Action | Complete as | Completion Time (in minutes) |
|--|------------------|--|------------------------------|
| a. Questions: Water County's responses | Read and discuss |  | 10 |
| b. Questions: Center for Court Innovation's strategies | Read and discuss |  | 20 |
| c. Scenario: Val Harris | Read |  | 5 |
| d. Video Clip: Val Harris | View |  | 5 |
| e. Questions: Bonneville team's responses | Discuss |  | 20 |
| | | | 60 |
|  Complete on your own | |  Complete as a team | |

Activity 2 is designed to help you think about how to respond to positive and negative events in your program.

Outputs

- An understanding of how to use research to design responses to positive and negative events
- An understanding of how different teams craft their responses to positive and negative events

a. As a group, read about Water County’s responses and then discuss the following questions.

Water County, a hypothetical mental health court team, is designing its responses to both positive and negative events. They have recently begun accepting participants who have serious mental illnesses and co-occurring substance use disorders and who have pled guilty to misdemeanors and non-violent felonies before entering the program. The team wants to ensure that their program is perceived to be fair by all participants.

Water County has made the following decisions about its responses.

- No one will be given jail as a sanction in phase 1 (months 0-4) of the program.
 - Jail will be used as a sanction for any illegal behaviors that involve drug use in phase 3 (months 11-14) and phase 4 (months 15-18) of the program.
 - Participants who are struggling to meet the conditions set by the court will be given more frequent treatment.
 - Wherever possible, responses will be administered within one week after the behavior has occurred.
 - The team will work to carefully assess what is meaningful to each participant and make responses to both positive and negative events meaningful to each participant.
 - Each time the team provides a response to a negative event, they will also try to highlight at least one of the participant’s positive behaviors.
1. What challenges do you foresee Water County having when they apply these responses to individual participants? Which responses are likely to be particularly challenging for Water County to administer?
 2. Where has Water County used the available research in designing its responses?
 3. How might Water County modify these responses to better account for individual differences in what motivates positive behavior change?

Before using jail as a sanction, a team should consider the following:

- **What risk does the behavior pose to public safety?**
- **How proximal or distal is the behavior change targeted for this particular participant?**
- **How effective will jail be in helping the participant meet the terms set by the court?**

Adjustments to the treatment plan may also be an appropriate response that should be considered in collaboration with team members or partners responsible for providing mental health or substance use treatment. However, not every negative event will warrant more treatment. In some cases, a different treatment approach or treatment provider may be more appropriate.

- b. For ideas about motivating participant engagement, read and discuss *Mental Health Court Strategies to Help Defendants with Mental Illnesses Make Progress in Treatment and Comply with Court Requirements*, developed by the Center for Court Innovation and found below.**

General principles

- Use judicial and clinical responses in a coordinated way to motivate adherence to an individualized treatment plan
- Individualize judicial and clinical responses to both progress and problems in treatment
- One person’s sanction could be another person’s reward
- Keep the concept of sanctions and rewards distinct from treatment—don’t “punish” by increasing the intensity of treatment or “reward” by decreasing its intensity
- The nature of responses—to both progress and problems—will reflect the style of the mental health court judge and team. There is no “right way” to be a mental health court judge

Examples of responses to progress

- Recognition: Praise, applause
- Frequency of status hearings: Give participants a voice in their frequency and/or priority in order of appearance or seating. Don’t implement a blanket rule to have participants who are doing well come to court less frequently—many mental health court participants like to come to court
- Honor roll: Publicly acknowledge all the participants on the calendar who have been in compliance for a specified number of consecutive court appearances, and call their cases first
- Frequency of case management appointments with mental health court/monitoring staff: Make appointments less frequent, or give court participants a say in how frequently they come to court
- Certificates for phase completion: Keep these fairly general (“adjustment,” “engagement,” “progress in treatment”) and avoid highly specific or quantifiable standards for phase advancement
- Showcase talent: Encourage participants to bring in art work or poetry or to sing in court

- Presents, gift certificates (usually donated)
- Participation in court-sponsored events
- Less restrictive pretrial release conditions (e.g., telephone check-ins)
- Less frequent urine testing
- Granting of privileges (e.g., travel, later curfew)
- Charge reduction or dismissal of case
- Intangibles: Respect, empathy, giving the participant a voice in the proceedings

Examples of responses to problems

- Reprimand, disapproval
- More frequent appointments with mental health court/monitoring staff
- More frequent status hearings
- Unannounced visits by monitoring staff
- Penalty box (cautionary note: for some participants, especially those with trauma histories or anxiety disorders, this can be traumatizing or destabilizing)
- Writing assignments (e.g., journal entries, letter to the judge)
- Workbook assignments
- More restrictive pretrial release status (e.g., contact supervision, electronic monitoring, etc.)
- Loss of privileges (e.g., travel, curfew)
- Community service
- Bench warrants
- Jail remand (short stays; establish protocols with the jail to ensure continuity of treatment)
- Termination/sentencing

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Examples of clinical responses

- Transfer to a more or less intensive treatment modality
- Transfer to a different provider while continuing with the same type of treatment (i.e., improve the “fit” between client and provider)
- Transfer to a more or less restrictive housing program
- Require/recommend participation in Narcotics Anonymous/Alcoholics Anonymous/Double Trouble self-help groups
- Mandate participation in a group (e.g., money management, anger management, family relations, etc.)
- Treatment engagement groups offered at the courthouse for the hard-to-engage
- Hospitalization
 - Voluntary
 - Involuntary
- Detox/drug rehab

c. On your own, read the scenario describing Val Harris, a hypothetical mental health court participant. Remember that in *Module 3: The Mental Health Court Team*, you viewed segments of the mock staffing meeting that preceded Mr. Harris’ court appearance. In this module, you will view Mr. Harris’ mock court appearance and respond to questions about it.

Eight months ago, Val Harris was charged with assault and sentenced to eighteen months’ participation in a mental health court. He has four prior convictions for assault and served jail time for each conviction. Mr. Harris struggled with methamphetamine addiction for several years, which likely contributed to an inaccurate diagnosis of paranoid schizophrenia several years ago. He also has had relapses associated with his alcohol addiction. When he screened positive for mental illness, subsequent assessment was consistent with bipolar disorder. He has taken lithium for seven months and has stabilized on his medication. He is also regularly attending addiction group meetings three times per week. With the help of Amy, the vocational rehabilitation specialist, Mr. Harris recently secured a job in a vocational rehabilitation program. His case manager, Janneil, reports that the ACT team

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has been pleased with his progress—that is, until recently. He missed his last two treatment appointments and last week tested positive for traces of methamphetamines in his urine.

For a refresher of the staffing meeting that preceeded Val Harris’s court appearance, which you viewed in Module 3, follow the link below to the course site.

Video Link:

Video 3: Val Harris - Staffing Meeting

c. As a group, view the Bonneville County Mental Health Court team mock court interaction with Val Harris. To access the video, follow the link below to the course site.

Video Link:

Video 4: Val Harris - Court Appearance

d. As a group, discuss the following questions.

1. When responding to program participants’ substance use disorders, mental health court teams often struggle with whether to require abstinence or use harm reduction principles. This is particularly problematic when the substances abused are illegal. A total abstinence requirement would not allow for any substance use during participation in the program (i.e., zero tolerance). A participant with a requirement for abstinence who was detected using illegal drugs or alcohol would be responded to with a series of graduated sanctions. A program could take the position that any illegal drug use represents criminal activity and consider jail time as an appropriate response. Programs with more emphasis on the application of harm reduction principles would promote the reduction of substance abuse, respond positively to periods of reduced use, and focus on mitigating the harm caused by continued substance abuse. It would be unusual for a mental health court program to have no response to the detection of illegal drug use, as a failure to respond might be perceived as conflicting with the program’s goals.

Do you think the Bonneville team has responded to Val Harris’ methamphetamine use with the belief that his illegal drug use required a signifi-

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cant punitive response, or were they using harm reduction principles to govern their response? Why do you think they took the approach that they did? What might you do in the Bonneville team's place?

2. Why might the Bonneville team have focused on reinforcing the treatment plan components, such as vocational rehabilitation and honest communication with the ACT team, rather than using jail as a sanction?
3. If a team allows a participant to work through a contingency plan, rather than serve jail time for illegal drug use, how might they ensure that public safety concerns are adequately addressed? For example, what might the Bonneville team need to do to ensure that Mr. Harris does not drive impaired but he can still get to and from his work and treatment appointments?
4. In what ways does the Bonneville team's response to Mr. Harris represent an individualized approach to responding to negative events? Would your team respond in a similar way or differently?
5. Would the response be different if the substance abuse was alcohol and not a drug? If yes, how would the response differ?





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Activity 3: Identifying Potential Responses to Events

Developing your own program’s responses to positive and negative events is a process that will evolve over the course of your program. Nevertheless, having a conceptual framework for how your team develops responses is important as you move toward program implementation.

This activity is designed to help you develop a preliminary list of responses to positive and negative events. First, you will write down and discuss some potential responses you might integrate into the design of your program. Next, you will discuss how these responses can be applied in practice, and what work your team can continue to do to develop responses that will be meaningful to your program participants. If you are having trouble identifying potential responses on your own, a list of common responses is available in the Additional Resources section of this module. The chart below outlines steps to complete the activity, actions required, and how long each step will take.

| Steps | Action | Complete as | Completion Time (in minutes) |
|--|---------|--|------------------------------|
| a. Worksheet: Your responses | Write |  | 20 |
| b. Questions: Discuss responses | Discuss |  | 20 |
| | | | 40 |
|  Complete on your own | |  Complete as a team | |

Activity 3 is designed to help you list some preliminary ideas about how your team will respond to positive and negative events in your program.

Output

- A list of responses to positive and negative events

a. As a group, complete the following worksheet, “Event Responses.”

Now that you have considered how other teams design responses to positive and negative events, discuss the responses your own team will use and use this worksheet to list these potential responses.

Instructions:

List the responses you would likely use in your program for different behaviors.

Put a P next to the response if it is connected to a positive event and an N next to the response if it relates to a negative event.

List the circumstances that will typically warrant this response.

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Worksheet: Event Responses

| Response | Positive (P) or Negative (N) event | Circumstances that warrant this response |
|---|------------------------------------|---|
| One day community service (arranged to not interfere with employment) | N | Missed appointment with supervision officer without good excuse |
| | | |
| | | |
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b. Once you have completed the worksheet, review the responses you have listed for positive events and those you have listed for negative events. Discuss the following questions as a team.

1. How easily can each of these responses be applied to individual participants and events?
2. Which of these responses are you most likely to include in any program materials that you share with participants so that they know what to expect as a result of different behaviors?
3. Research indicates that you should apply positive reinforcement four times more frequently than negative reinforcement. Do the responses you have listed above allow you to apply this research to your program participants easily?
4. What else might you do as a team to find meaningful responses to your program participants?

Summary

Notes:

List three issues these activities have raised for your own program planning.

1. _____

2. _____

3. _____
