MENTAL HEALTH COURTS

Policy makers in Maine and around the country face the serious challenge of addressing the needs of people with mental illness involved in the criminal justice system. A number of strategies are being used by law enforcement and corrections officials to divert mentally ill persons from jail during the pre-booking or post-booking stages. These diversion strategies have shown success in decreasing jail stays for persons with mental illness and increasing police response times, as well as saving money. The following is a description of one type of strategy aimed at reducing the number of persons with mental illness who enter the criminal justice system.

What are Mental Health Courts?
Mental health courts are problem solving courts, whose primary goals are to protect public safety, decrease the amount of contact a person with mental illness has with the criminal justice system, and connect or reconnect mentally ill persons with mental services. While each court may differ to some degree, there are basic similarities in the operations and goals of these diversion programs.

Referrals to mental health courts can originate from many sources, including police, judges, defendants, or clinicians. In some programs, initial and secondary screening occurs upon arrest. Often, eligibility for the program depends on not only mental health status, but also on type of crime committed; most often, non-violent misdemeanors are included while felonies are not. In other courts, decisions are made on a case-by-case basis. Defendant may or may not be required to plead guilty in order to participate in the court.

In the mental health court model, defendants with a mental illness are identified, and referred to the mental health court. As part of either a plea agreement or charges being dismissed, treatment plans are identified, which are monitored by the judge and/or case managers. Failure to complete mandated treatment may result in criminal penalties.

An important factor in the success of these courts is collaboration among the court, mental health practitioners, and community mental health programs. The level of involvement varies and may include educational and mental health systems, recreational programs, employment services, drug and alcohol treatment programs and housing assistance.

Research Findings
While mental health courts are a relatively new concept, there have been some initial studies conducted to evaluate the effectiveness of these programs. Some studies have found that participants were much less likely to recidivate than non-participants. An recent outcome evaluation of the mental health court in King County, Washington found that, one year after completion of the program, health court graduates:

- Were much less likely to recidivate
- Spent less days in jail than in the year prior to participation
- Felt that their life had improved because of the court

The first mental health court was created in Broward County Florida in 1997. Since 2000, the number of mental health courts has grown and presently exceeds 100. This year, Maine is implementing a pilot Co-Occurring Disorder court in Kennebec County.