



Predictors of criminal justice system trajectories of homeless adults living with mental illness



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ABSTRACT

Objectives: This study examines whether baseline profiles of criminal justice involvement are independently associated with 24-month trajectories of arrests in a sample of homeless adults living with mental illness.

Methods: Interviews with justice-involved participants from the At Home/Chez soi project, a multisite trial of Housing First in Canada, yielded information related to arrests, as well as demographic, clinical, and contextual predictors of criminal justice system involvement. All potential predictors were entered into logistic and negative binomial regression models to assess their effect on re-arrest.

Results: Of the 584 individuals involved with the criminal justice system at baseline, and for whom follow-up data was obtained, 347 (59%) were re-arrested within two years. Of those, 283 (82%) had an episodic pattern of re-arrest and 64 (18%) had a continuous trajectory of re-arrest. Results indicate that participants involved with the legal system for minor (mostly theft and public order) offenses at baseline were most likely to be repeatedly arrested. Gender, Aboriginal status, and recent victimization were also independently associated with re-arrest.

Conclusions: These findings have implications for the delivery of police and clinical services alike, as well as for policies that aim to divert vulnerable individuals who commit minor crimes from a long-term trajectory of justice involvement.

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1. Introduction

Adults with mental illness, particularly those living in marginalized conditions, have a greater risk of criminal justice system (CJS) involvement compared with the general population (Fisher et al., 2011; Roy, Crocker, Nicholls, Latimer, & Ayllon, 2014; Teplin, 1990). The reasons underlying greater CJS involvement among individuals living with mental illness are complex and the subject of ongoing debate. At the individual level, characteristics such as substance misuse, antisocial tendencies, and impulsivity explain most of the association between mental illness and CJS involvement (Hiday, 2006; Peterson, Skeem, Hart, Vidal, & Keith, 2010). At the systemic and structural levels, individuals who live with mental illness also are often encumbered by related vulnerabilities that increase the probability of coming into conflict with the law: homelessness or precarious housing, racial/ethnic minority status, sexual minority status, extreme poverty, among others (Cotton &

Coleman, 2010; Csete & Cohen, 2010; Draine, Salzer, Culhane, & Hadley, 2002). The increased visibility of marginalized individuals living with mental illness makes them more likely to draw negative attention from the public and to come into contact with the police (Lee & Schreck, 2005; Patch & Arrigo, 1999). Of particular relevance, commentators have long critiqued the extent to which homelessness has been criminalized, particularly among non-white homeless individuals (Amster, 2008; Fischer, 1992; Gaetz, 2013; U.S. Interagency Council on Homelessness, 2012).

Given the complexity of the phenomenon of CJS involvement among mentally ill individuals, many researchers have turned to the identification of sub-groups or typologies among larger samples of individuals with mental illness or intellectual disabilities who are involved with the criminal justice or forensic systems as a means of better understanding the needs of this marginalized population and guiding appropriate evidence-based policies and practice (Crocker, Mercier, Allaire, & Roy, 2007; Dumais et al., 2011; Fisher et al., 2010; Hiday & Wales, 2011; Joyal, Côté, Meloche, & Hodgins, 2011). Together, these studies suggest that individuals with mental illness have diverse profiles of CJS involvement.

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The identification of sub-groups with common characteristics is crucial to target those individuals who are most likely to benefit from specific treatment and risk management approaches and interventions. This perspective is consistent with well-developed and empirically tested theories such as the Risk–Need–Responsivity (RNR) model which holds that to effectively intervene with offenders, interventions must match the needs and strengths of the individual (Andrews, 2012; Andrews, Bonta, & Wormith, 2006; Bonta, LaPrairie, & Wallace-Capretta, 1997; Gutierrez, Wilson, Ruge, & Bonta, 2013). For example, homeless individuals with mental illness who come into contact with criminal justice services for an initial offense of assault associated with substance misuse and impulsive behavior might benefit from substance abuse treatment and counseling to address those specific criminogenic needs. In contrast, an individual whose index offense reflected preoccupation with thought control, override symptoms or command hallucinations would perhaps benefit most from medication and a short period of hospitalization to ensure stabilization. Another potentially powerful use of sub-group analyses is the ability to predict criminal or other psychosocial outcomes on the basis of initial group membership. These insights could have tremendous implications in clinical and community settings for the early detection of at-risk individuals, but the predictive power of criminal profiles has yet to be empirically demonstrated.

1.1. Context of the present study

The present study emerges from a larger study called the At Home/ Chez soi (AHCS) study, a Canadian multi-site research and demonstration project providing supported housing to homeless adults with mental illness (Goering et al., 2011a, 2014). Within AHCS, the intervention consisted of the provision of Housing First to homeless adults with mental illness (MI), in the form of either Intensive Case Management (ICM) or Assertive Community Treatment (ACT) according to participants' levels of need, coupled with rent supplements and the support of housing specialists integrated with the clinical teams. Housing First is an approach to support housing characterized by low-barrier access to regular housing according to participants' preference. As a group of researchers affiliated within AHCS, we have previously published a

paper on sub-groups of AHCS participants who come into contact with the justice system (Roy et al., 2016). Those sub-groups were determined based on the extent and nature of CJS involvement in the six months prior to entry into the AHCS project. Our results yielded seven profiles or subgroups of CJS involvement among homeless adults with mental illness, whose characteristics are outlined in Table 1. Two subgroups were extensively involved with the criminal justice system (Multiple Disturbances and Non-violent Frequent User), three subgroups had moderate CJS involvement (Single-Assault, Single-Theft and Single-Drug), and two subgroups were diverted from further CJS involvement after an initial contact (Diverted-Unknown and Diverted-Single Disturbance). There was no association between demographic or personal background (e.g., duration of homelessness, use of services) variables and subgroup membership. Alcohol dependence and major depression were associated with categorization in the Non-violent Frequent User (of criminal justice services) subgroup and substance misuse was associated with the Single-Theft subgroup. Low impulse control was associated with Single-Assault subgroup membership, whereas alcohol dependence and depression were less likely to affect participants in that group.

The current study builds on this previous report (Roy et al., 2016) to examine whether profiles of CJS involvement at entry the AHCS project are independently associated with 24-month trajectories of arrests in a sample of Canadian homeless adults living with mental illness. The secondary objective was to examine demographic, clinical, and contextual predictors of re-arrest over the follow-up period. Given the documented relationship between criminal history and re-offending (Barrett, Young, Moore, Borum, & Ochshorn, 2009; Calsyn, Yonker, Lemming, Morse, & Klinkenberg, 2005), we hypothesized that participants in the two subgroups with repeated contacts with the CJS at baseline (Multiple Disturbances and Non-violent Frequent User subgroups) would be more likely to be re-arrested. From previous studies assessing risk of re-arrest among homeless adults with mental illness (Barrett et al., 2009; Calsyn et al., 2005; Desai, Lam, & Rosenheck, 2000; Leal, Galanter, Dermatis, & Westreich, 1999), we hypothesized that male gender, young age, minority ethnic background, comorbid physical health issues, severity of substance misuse, longer duration of homelessness and presence of recent victimization would be associated with re-arrest.

Table 1
Subgroups of criminal justice system involvement at baseline.

Subgroup	Definition	Associated characteristics	Implications
<i>Participants with multiple justice contacts</i>			
Multiple disturbances (23%)	Two or more arrests but only one charge and court appearance for administration of justice, threats, public order or assault (10%).	None.	These participants might be particularly likely to benefit from housing services (several offenses related to survival) and integrated mental health and substance use interventions.
Non-violent Frequent User (12%)	More than two arrests, charges, court appearances, overnight detentions and at least one incarceration for non-violent offenses only (administration of justice and public order).	More likely to have major depression, alcohol and substance dependence.	
<i>Participants with a single arrest and associated charge</i>			
Single-Drug (5%)	One arrest and associated charge, court appearance and overnight detention for a drug-related offense.	None.	Homeless individuals are rarely involved in drug trafficking.
Single-Theft (18%)	One arrest and associated charge, court appearance and overnight detention for a theft.	More likely to have severe substance misuse.	These participants might benefit from housing and integrated mental health and substance use interventions.
Single-Assault (18%)	One arrest and associated charge, court appearance and overnight detention for an assault.	More likely to have low impulse control.	These participants might benefit from interventions that target criminogenic needs in addition to mental health needs. Service providers might benefit from tools related to risk evaluation and management.
<i>Participants who were arrested but not charged</i>			
Diverted-Unknown (8%)	One arrest but no formal charge was filed.	None.	More research is needed to understand the diversion practices of police officers at this stage of criminal justice involvement for homeless service users.
Diverted-Single Disturbance (15%)	One arrest for administration of justice, threats, public order or assault (13%).	None.	

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