Probation officers’ risk assessment and case management decisions for probationers with mental health and substance abuse

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Overrepresentation of mental disorder in criminal justice system

- Mental disorder is 4 to 8 times as prevalent in the criminal justice system as the general population
- Most offenders with mental disorder have co-occurring substance abuse disorders (~75%, Hartwell, 2004)

Source: Teplin, 1990; Teplin, Abram, & McClelland, 1996
Increased risk of failure

- Probationers with mental disorder are about twice as likely to be rearrested than their relatively healthy counterparts

- BUT mental disorder is not a major risk factor (Bonta, Law & Hanson, 1998)
  - PMDs and non-disordered offenders share risk factors (i.e. criminal history, pro-criminal attitudes)
  - Substance abuse is one of these risk factors

Source: Dauphinot, 1996
Officers have discretion

- Officers have different thresholds for offenders with mental disorder
  - WHY?
    - Perception of high risk
    - Troublesome cases
    - Paternalism
- Persons with mental disorder and substance abuse highly stigmatized
- Stigmatizing attitudes may influence POs’ risk assessments and case management decisions for PCDs

Source: Eno Louden and Skeem, in press
Aims of the current research

1. Examine probation officers’ relative attitudes towards probationers with (a) mental disorder, (b) substance abuse, (c) and both

2. Examine the effect of probationers’ mental health and substance abuse characteristics on officers’ risk assessment and case management decisions

3. Determine if officers’ attitudes affect risk assessment and case management decisions
Method

- **Participants**
  - 236 adult probation officers from 2 large agencies
    - Must be over the age of 18
    - English speaking

- **Recruitment**
  - Officers were given the opportunity to participate at regular staff meetings
  - Study materials were completed anonymously
Measures

- Independent variable: Vignette
  - Vignette portrayed “Sam,” a new probationer
  - 4 by 2 experimental design

<table>
<thead>
<tr>
<th>Mental health conditions</th>
<th>Substance abuse absent</th>
<th>Substance abuse present</th>
</tr>
</thead>
<tbody>
<tr>
<td>Control (no mental disorder)</td>
<td>Control (no mental disorder)</td>
<td>Cocaine dependence only</td>
</tr>
<tr>
<td>Major depression only</td>
<td>Major depression plus cocaine dependence</td>
<td>Bipolar disorder only</td>
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<tr>
<td>Bipolar disorder only</td>
<td>Bipolar disorder plus cocaine dependence</td>
<td>Schizophrenia only</td>
</tr>
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- POs read vignette, then responded to measures of dependent variables
“Sam”

Sam Jones is a 27 year-old man who was recently arrested for theft after stealing some items from a neighbor’s apartment. Most of the time, life is pretty okay for Sam. While nothing much is going wrong in Sam’s life, he sometimes feels worried, a little sad, or has trouble sleeping at night. Sam feels that at times things bother him more than they bother other people, and that when things go wrong, he sometimes gets nervous or annoyed. Otherwise Sam is getting along pretty well. He enjoys being with other people and although Sam sometimes argues with his family, Sam has been getting along pretty well with his family.

Adapted from General Social Survey (Phelan et al., 2000)
Measures

- **Dependent variables**
  - **Attitudes: Social Distance Scale** (Link et al., 1987): 5 items, rated from 0 (definitely unwilling) to 3 (definitely willing) based on how most people would feel about engaging in 5 situations with Sam
    - Ex. “How would most people feel about renting a room in their home to Sam?”
  - **Risk assessments**: Items assessing officers’ opinion of the likelihood (0 to 100%) that Sam would commit a variety of offenses while on probation
    - Ex. “In your opinion, how likely is Sam to commit a technical violation while on probation supervision?”
  - **Case management decisions**: Items assessing officers’ preferred number of contacts, preferred strategies for addressing noncompliance, and endorsement of coercive mental health treatment for Sam
Results: Aim 1

Do POs’ attitudes differ as a function of Sam’s mental health and substance abuse characteristics?
Results: attitudes towards any mental disorder

Social Distance Score (Range= 0 to 15)

- Any mental disorder
- No mental disorder

Graph showing the comparison between social distance scores for individuals with any mental disorder and those without, with two lines representing 'No Substance abuse' and 'Cocaine Dependence.'
Results: attitudes towards specific disorders

Social Distance Score (Range= 0 to 15)

- Schizophrenia
- Bipolar Disorder
- Major Depression
- Control

Total
- No Substance abuse
- Cocaine Dependence
Results: Aim 2

Are POs’ risk assessments and case management decisions for Sam affected by his mental health and substance abuse characteristics?
Results: Officers’ risk assessment ratings

Likelihood that Sam will commit a technical violation

- No Substance abuse
- Cocaine Dependence

Conditions: Schizophrenia, Bipolar Disorder, Major Depression, Control
Results: Officers’ risk assessment ratings

Likelihood that Sam will commit a new offense

![Graph showing risk assessment ratings for schizophrenia, bipolar disorder, major depression, and control groups.](image)
Results: Officers’ risk assessment ratings

Likelihood that Sam will be violent

[Graph showing likelihood of violent behavior across different conditions: Schizophrenia, Bipolar Disorder, Major Depression, Control. The line graph indicates a trend with 'Any substance abuse condition' highlighted.]
Results: Officers’ case management decisions

Increased number of contacts for Sam

- No Substance abuse
- Cocaine Dependence

Number

Schizophrenia  Bipolar Disorder  Major Depression  Control

-0.5  0  0.5  1  1.5
Results: Aim 3

Do officers’ attitudes towards Sam influence their risk assessments and case management decisions for him?
Results: Aim 3

- Do attitudes have predictive utility above mental health and substance abuse characteristics for risk assessment?

- Multiple regression analysis
  - First: entered vignette characteristics
    - All predict risk, except for depression ($\beta = 0.31$ to $0.54$, all $p < .001$)
  - Second: add social distance score
    - $\beta = -.19$, $p < .01$ (negative values indicate more stigma)
    - All vignette conditions except depression remain significant

- Bottom line: officers who have more negative attitudes towards Sam think he is higher risk
Results: Aim 3

- Do attitudes have predictive utility above mental health and substance abuse characteristics for *case management*?
- Multiple regression analysis to predict increased contacts
  - First: entered vignette characteristics
    - Only schizophrenia and schizophrenia plus substance abuse predict increased contacts ($\beta= 0.23 \ p < .05$ and $\beta= 0.19, \ p < .05$)
  - Second: add social distance score
    - No significant prediction
  - Bottom line: officers’ attitudes did not significantly influence case management
Key findings

- Officers have more negative attitudes towards probationers with mental disorder and substance abuse than towards non-disordered probationers
  - No difference among diagnoses
- Officers perceive probationers with schizophrenia as at risk for violence and want to monitor these probationers more closely
- Officers with negative attitudes towards mental disorder and/or substance abuse perceive probationers as more risky
Implications

- Officers may be making less accurate risk predictions due to attitudes and perceptions of mental disorder
  - Education may improve this
- Future research should address other probationer risk factors to address how officers make decisions