

Perceived stigma and outcomes in mandated treatment for probationers with mental disorder



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Background



- Stigma: rejection of one group by the majority group (Link & Phelan, 2001)
 - Components:
 - Labeling
 - Stereotyping
 - Separation
 - Status loss & discrimination
- Persons with mental disorder are one of the most stigmatized groups in society
- Negative effects on the stigmatized group--particularly for persons with mental disorder
 - Lowered self esteem, self-efficacy (Markowitz, 2001)
 - Failure to seek treatment (Corrigan, 2004)

The context of probation

- Stigma may come from multiple sources
 - Society (can be structural stigma)
 - Friends/family
 - Treatment providers (Van Dorn, et al., 2005)
 - POs
 - “If there's a nutso on my case and he's just taking up too much of my time, when there's an opportunity to transfer to another officer, I'll transfer him.”
- Potential effects of stigma for PMDs
 - Failure to attend treatment ⇒ violation
 - Failure to meet with PO ⇒ violation



Research Questions

1. How does perceived stigma in PMDs relate to theoretically relevant mental health characteristics?
2. How are probation officers' attitudes and attributions about mental disorder related to PMDs' perceived stigma?
3. Are there differences in perceived stigma for probationers in specialty and traditional probation agencies?
4. How do POs' attitudes and attributions about mental disorder relate to probationers' outcomes?
5. How does perceived stigma relate to probationers' outcomes?

Measures



- **Baseline**

- **POs**

- Social Distance Scale (Link et al., 1987): 5 items, rated from 1 (definitely willing) to 4 (definitely unwilling) based on how willing the PO would engage in 5 situations if he/she was not the probationer's PO
 - Ex. "If you were not _____'s PO, how willing would you be to move next door to _____?"
 - Attribution Scale (Phelan, 2000): 5 items rated from 1 (Very Likely) to 4 (Very Unlikely) based on the PO's perceived cause of the probationer's situation
 - Ex. "In your opinion, how likely is it that _____'s situation is caused by his or her own bad character?"
 - Factor analyzed to create two indices:
 - "Physiological" (genes, chemical imbalance, own bad character (negatively loaded))
 - "Environment" (stressful circumstances, way he was raised)

Measures



- **Baseline**

- **Probationers**

- Personality Assessment Inventory (Morey, 1991): assesses psychopathology and substance use. Factor analyzed to produce 3 domains:
 - Negative affect
 - Aggression
 - Substance use

- **6 month follow up**

- **Probationers**

- Perceived Coercion Scale (Gardner et al., 1993): assesses perceived coercion regarding mental health treatment choices
- Insight and Attitudes Treatment Questionnaire (ITAQ; McEvoy et al., 1989): assesses recognition of mental disorder and attitudes towards treatment
- Life Satisfaction Scale (Delighted-Terrible Scale)

Measures

A decorative graphic at the top of the slide consists of two groups of three circles. The first group on the left has a solid light purple circle on the left, a white circle with a light purple outline in the middle, and a white circle with a light purple outline on the right. The second group on the right has a solid light purple circle on the left, a white circle with a light purple outline in the middle, and a solid light purple circle on the right.

- **6 Month follow up**

- **Probationers**

- Internalized Stigma of Mental Illness (ISMI; Ritsher, et al., 2003):
29 items rated from 1 (Strongly Disagree) to 4 (Strongly Agree)
assessing subjective experience of stigma
 - Ex. “I feel out of place in the world because I have a mental illness.”
 - Scales:
 - Alienation
 - Stereotype Endorsement
 - Discrimination Experience
 - Social Withdrawal
 - Modified to exclude negatively worded items

Measures

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- **12 month follow up**

- **Probationers**

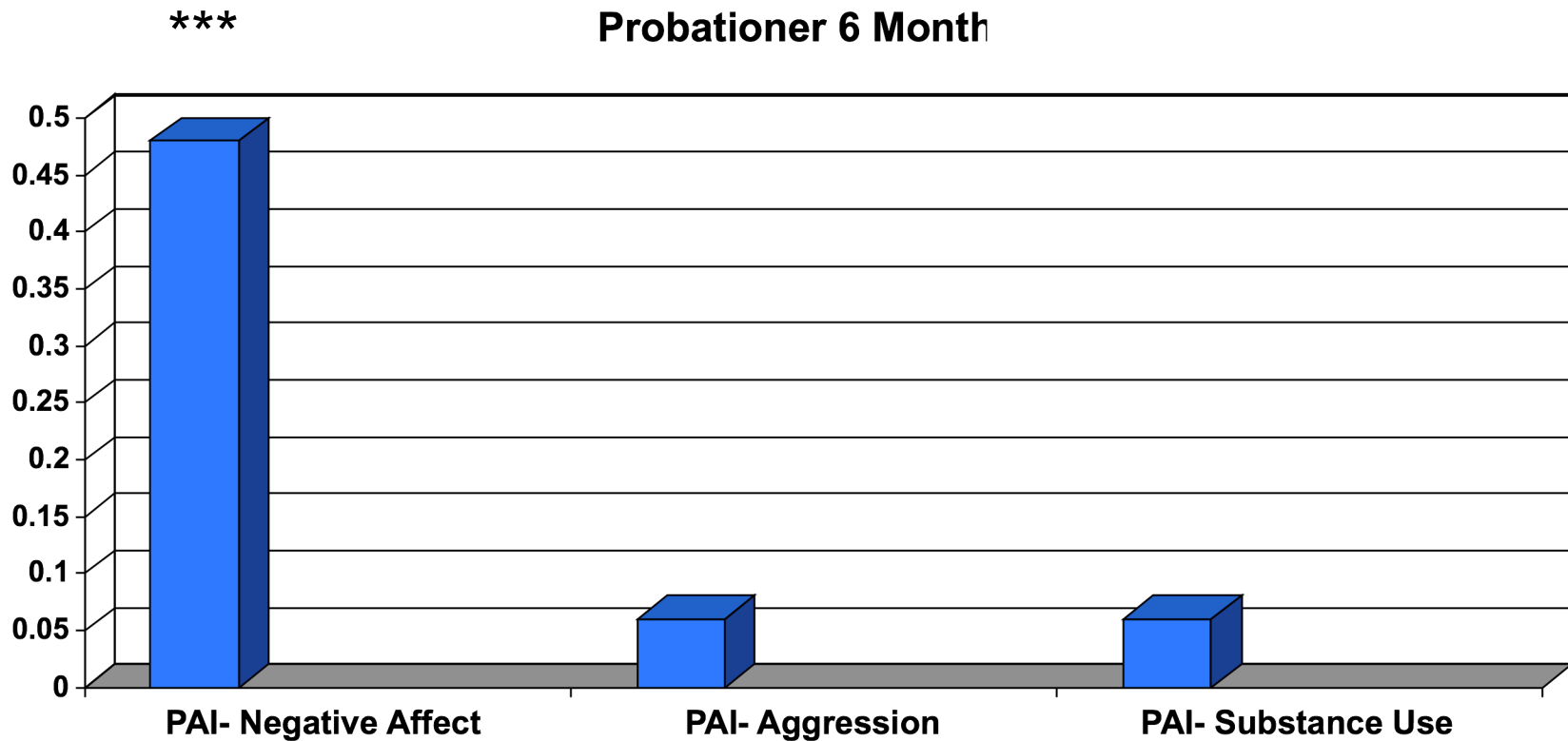
- Probationer interview

- Number and type of mental health treatment sessions
- Brief Medication Questionnaire

- Probation agency file review

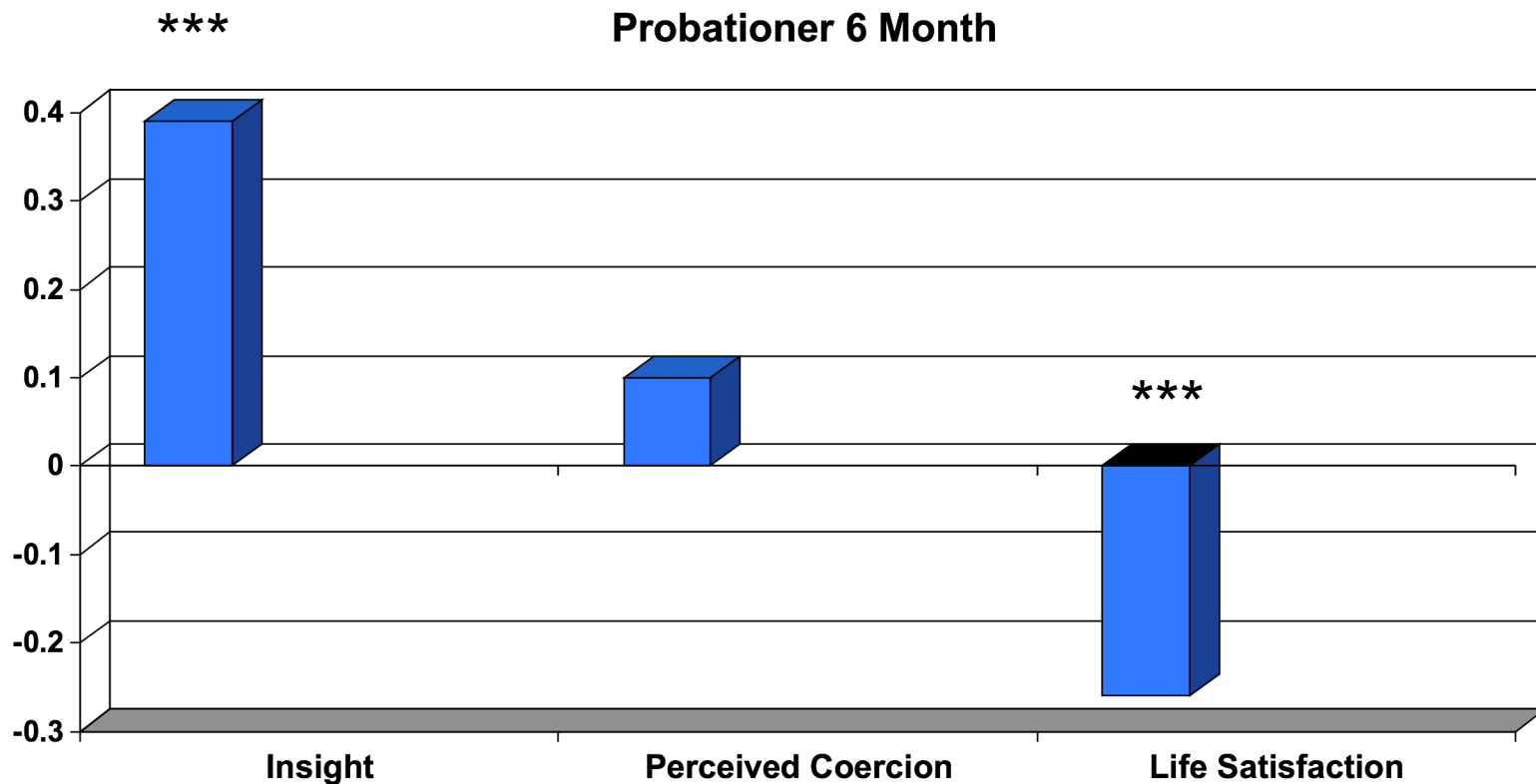
- Treatment noncompliance
- Failure to report
- Substance abuse
- Other

How does perceived stigma in PMDs relate to theoretically relevant mental health characteristics?



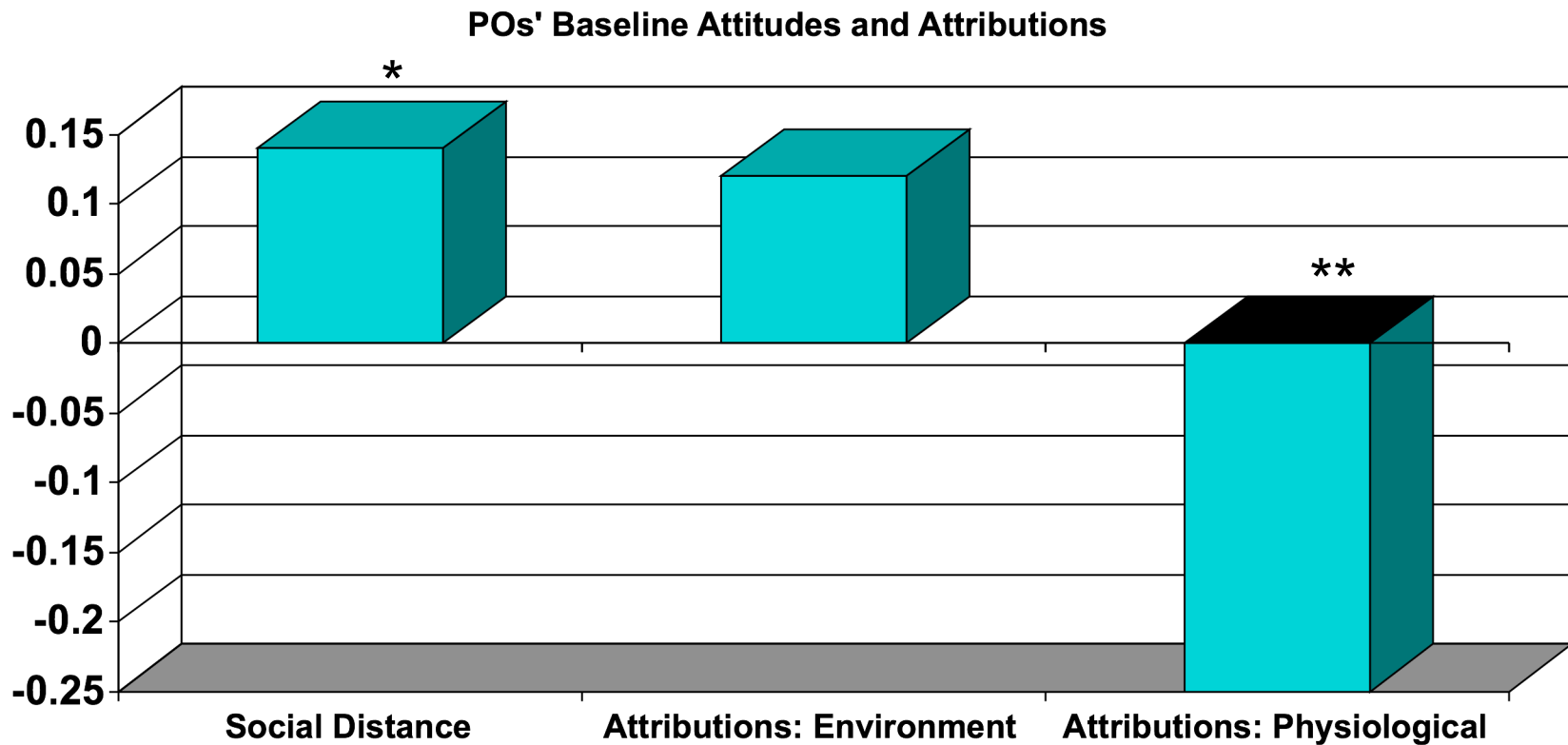
*** $p < .001$

How does perceived stigma in PMDs relate to theoretically relevant mental health characteristics?



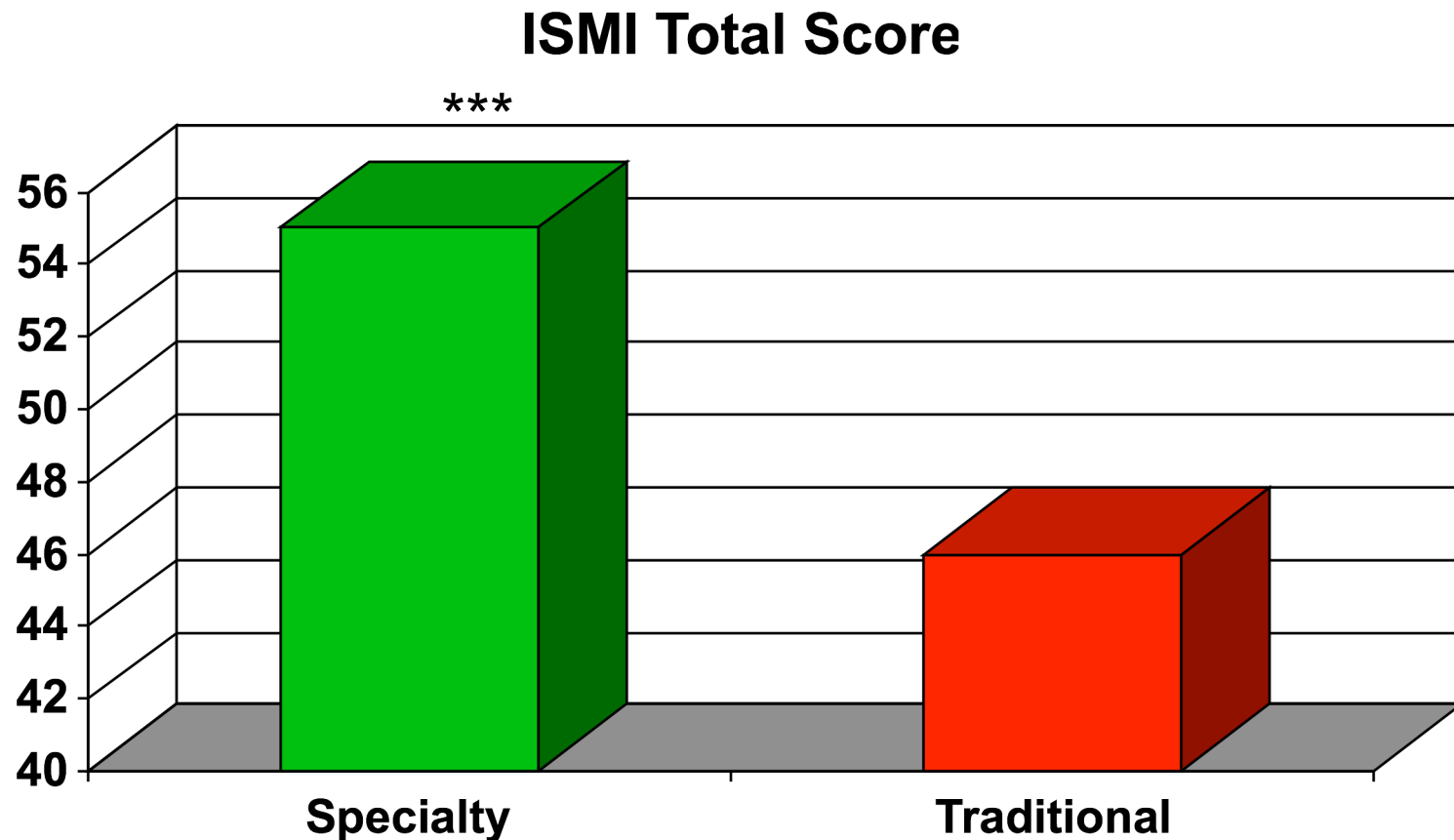
*** $p < .001$

How are probation officers' attitudes and attributions about mental disorder related to PMDs' perceived stigma?



* $p < .05$, ** $p < .01$

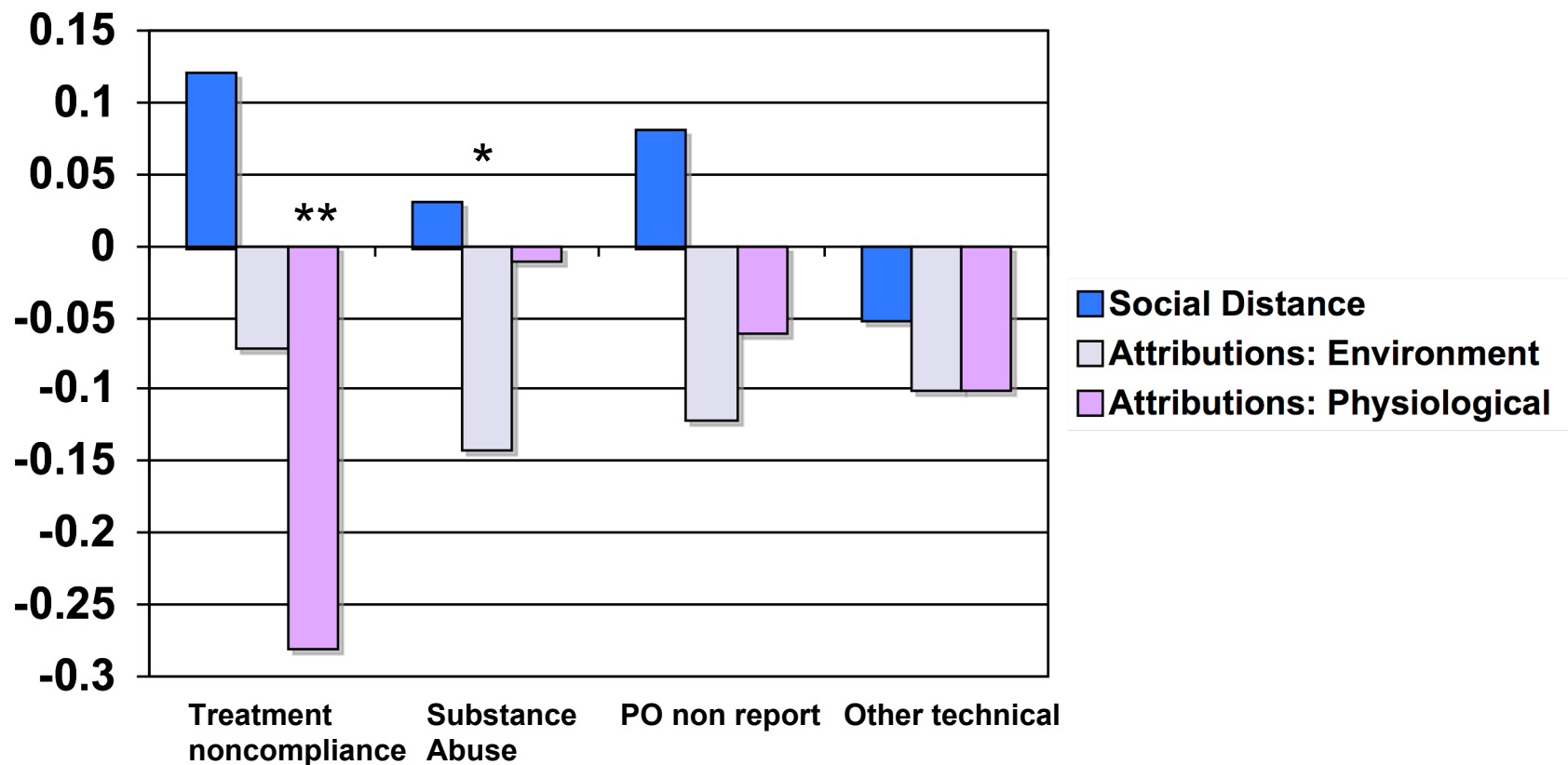
Are there differences in perceived stigma for probationers in specialty and traditional agencies?



$t(275) = 5.81, p < .001$

How do POs' attitudes and attributions about mental disorder relate to probationers' outcomes?

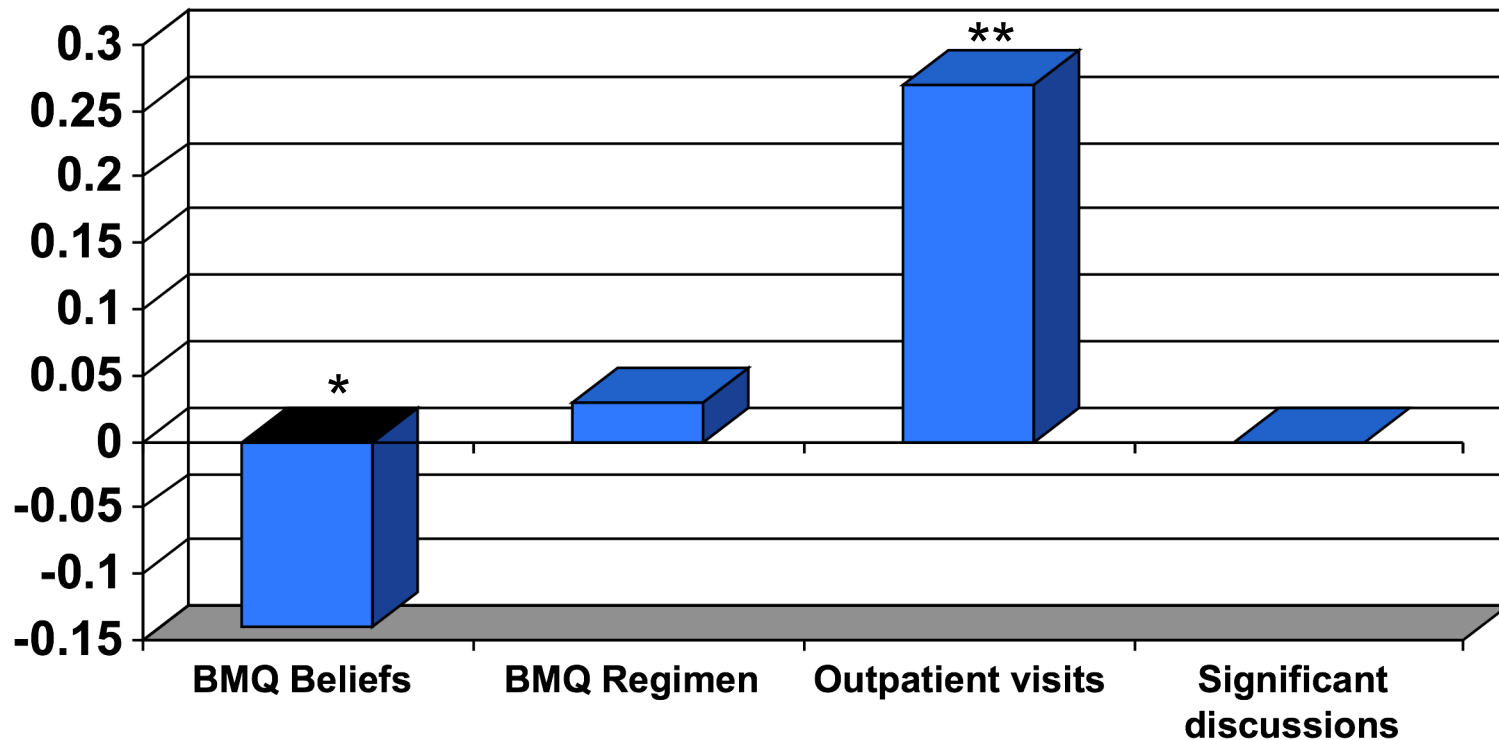
12 Month technical violations



* $p < .05$; ** $p < .01$

How does perceived stigma relate to probationers' outcomes?

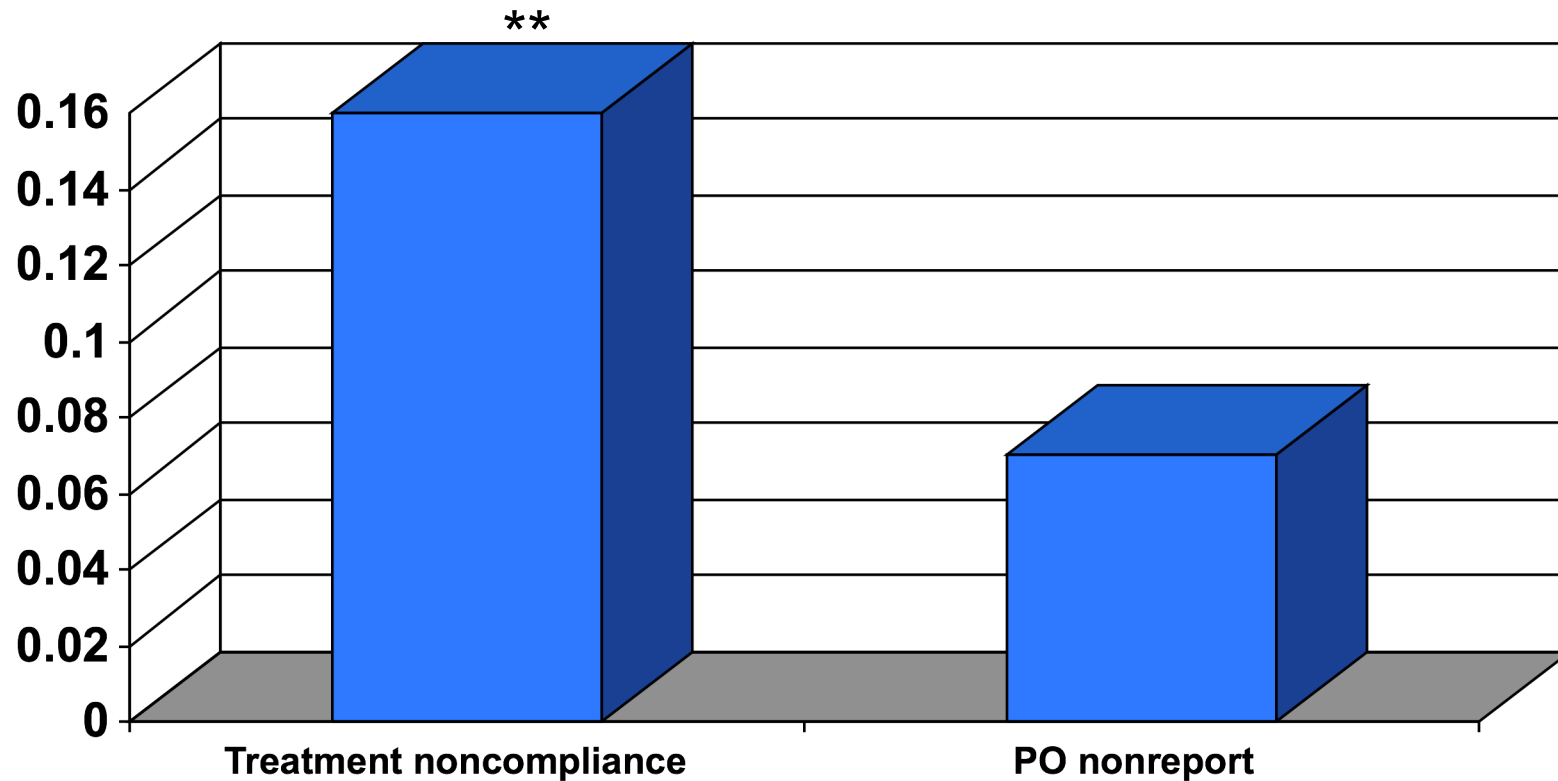
Treatment outcomes



* $p < .05$; ** $p < .01$

How does perceived stigma relate to probationers' outcomes?

Criminal justice outcomes



** $p < .01$

Key Findings



- Perceived stigma in probationers is related to theoretically relevant variables
- Probationers in the specialty agency experience more perceived stigma related to their mental disorder than do probationers in the traditional agency
 - Iatrogenic effect of specialty probation?
 - Insight/acknowledgement of mental disorder
- Stigma is related to treatment attendance and noncompliance



Implications

- Future research should address the process by which stigma affects outcomes for PMDs
 - Preliminary analyses indicate that stigma and site are strongest predictors of treatment
- We need to ensure that we are not creating negative outcomes (stigma) with specialty caseloads