

Peterborough Support Court Approaches to Decreased Recidivism

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Abstract

Support Courts are specialized courts that treat individuals involved in the justice system and who suffer from a mental illness or substance abuse problem, with the intention of decreasing potential criminal acts in the future. The purpose of the research project was to assess the treatments that the Peterborough Community Support Courts provides to offenders and recommend other treatments to utilize. A literature review and a survey of courts in Ontario were conducted to identify effective treatments for reducing recidivism among offenders. Results from the literature review showed that cognitive-behavioural therapy (CBT) is an effective treatment to reduce recidivism and is considered a best practice, but its impact varies. Motivational interviewing is also considered a best practice to use in drug treatment courts. Programs that focus on addressing housing, by ensuring that individuals have easy access to these supports, is impactful for individuals attending the sessions. Based on the results of the lit review and the survey, the Peterborough Community Support Court should continue to use CBT treatments and motivational interviewing. More research is needed to examine the magnitude of the effects that specific CBT treatments have. It is also recommended that the Support Court looks at other forms of individual counselling. Increasing availability to treatment methods and support services as well as increasing funding, will enhance the effect that the services provided, have on individuals.

Introduction and Background

Rehabilitation of offenders is a main issue that criminal justice systems have to address, as the number of prisoners has elevated worldwide (Ganapathy, 2018). Recidivism is defined as the likelihood of someone who has been convicted of a crime, to reoffend and high rates of recidivism indicate that offenders are not sufficiently ready to reintegrate into the community (Ganapathy (2018; Mpofu et al., 2016). A study conducted by the Ministry of the Solicitor General collected adult recidivism rates from 2001 to 2015 in Ontario. Recidivism rates were gathered for individuals who reoffended within two years of completing probation, parole, conditional sentence or prison time equal to or greater than 6 months. It did not include individuals in the federal correctional system. A risk assessment was conducted for offenders

who were in community supervision and offenders who were completing provincial prison time that was greater than 90 days (Rates of Recidivism, 2019). The risk assessment considered elements that are related with the likelihood of an individual to reoffend such as substance abuse and education/employment factors. High risk offenders were identified by the risk assessment as those most likely to re-offend. The study found that the number of offenders in Ontario that are at a higher risk have an effect on the recidivism rates as a whole (Rates of Recidivism, 2019).

Adult Recidivism Rates, 2001 to 2015		
Year	6+ month jail sentences	Community supervision
2001/02	55.2%	21.2%
2002/03	49.6%	20.8%
2003/04	38.7%	20.8%
2004/05	41.8%	21.9%
2005/06	45.4%	22.7%
2006/07	40.5%	23.8%
2007/08	42.8%	24.0%
2008/09	44.7%	23.4%
2009/10	43.5%	24.5%
2010/11	43.6%	23.6%
2011/12	43.9%	22.3%
2012/13	42.9%	20.7%
2013/14	37.4%	21.4%
2014/15	34.9%	20.7%
2015/16	37.0%	22.6%

Figure 1 Adult Recidivism Rates in Ontario from 2001 to 2016 (Rates of Recidivism, 2019)

Criminology literature has shown that occasionally, criminal acts are not just generated from a person’s bad decisions, but instead from tough life situations that a person faces (Slinger & Roesch, 2010). Traditional criminal justice systems can be ineffective at preventing recidivism among particular offenders (Bales et al, 2012). Specialized courts have been created to focus on

the root cause of criminal behaviour by helping those individuals who are involved in the justice system and who are suffering from a mental health issue or addiction (Slinger & Roesch, 2010; Livingston, 2008). They are established on the Therapeutic Jurisprudence and Restorative Justice theories which suggest that the justice system use a problem-solving approach and their authority to create a positive impact on offenders (Goldberg, 2011; Burns et al, 2013). Specialized courts focus more on rehabilitation methods for offenders as opposed to the traditional justice system. Two of the main specialized courts in Ontario are the Mental Health Courts and the Drug Treatment Courts (Slinger & Roesch, 2010). There are a number of Support Courts located in various regions throughout Ontario including Barrie, Kawartha Lakes and Toronto (Mental Health Courts in Ontario, 2017; How to Set Up a DTC, n.d.). Specialized courts vary from the common criminal justice system in that they provide a collaborative method that is targeted towards a therapeutic result rather than an adversarial method that is focused on a legal result (Goldberg, 2011). As well, many individuals are involved in the process of specialized courts such as judges, lawyers, case managers and psychiatrists compared to traditional criminal justice system where only a few individuals are involved (Burns et al, 2013).

Mental Health Courts were created to decrease the number of arrests and imprisonments that occur with offenders who suffer from a mental illness (Burns et al, 2013). These courts provide an alternative option for mentally ill offenders that is more suitable than the traditional criminal justice system (Goldberg, 2011). The needs of individuals suffering from a mental illness are not being reached due to the length of time it takes to get a mental health evaluation done and the insufficient space to place these individuals in the hospital (Slinger & Roesch, 2010). Mental Health Courts acknowledge conditions of mental illness such as anxiety and depression that contribute to criminal acts and focus on decreasing the incidences of an individual from reoffending (Slinger & Roesch, 2010). The specialized court provides an alternate option for mentally ill offenders, which in turn, removes many added costs of keeping these repeat offenders in prison and reduces the number of individuals repeatedly returning to the justice system (Goldberg, 2011). Conversely, Drug Treatment Courts were created to address the amount of reoffending that is observed with individuals who have an addiction. These courts have required treatment programs, continual drug testing and court appearances to treat the addiction (Goldberg, 2011). Rewards are utilized to encourage offenders to complete the treatment program and deter from using (Goldberg, 2011). The belief and hope of the drug

treatment court are that by resolving an offender's addiction, it will result in no further criminal acts by the offender or, at least, a significant decrease in the number of criminal acts that occur (Slinger & Roesch, 2010).

The Peterborough Community Support Court, which is a drug treatment and a mental health court was founded in 2011 and is the only court in Ontario that is recognized as a drug treatment and a mental health court (Peterborough Community Support Court, n.d). The Community Support Court aims to reduce recidivism rates among offenders who suffer from substance abuse, mental health or intellectual disability (Peterborough Community Support Court, n.d). The main goal of this specialized criminal court is to treat individuals in the community who are involved in the justice system and assist them in the process of reintegrating into the community. The Community Support Court utilizes a simultaneous approach focusing on mental health and drug treatment (Peterborough Community Support Court, n.d).

The Community Support Court includes three tracks; Diversion, Track 1, and Track 2. Each of these tracks have different treatment plans, eligibility criteria and completion criteria. Individuals can be considered for the Diversion Track if they are suffering from a mental health issue or addiction, charged with a Class 1 offence such as fraud under \$5000, have no criminal record or a small criminal record and have no possibility of encountering serious prison time. The length of the treatment for this track is approximately 6 months.

To be eligible for Track 1, individuals would have a mental health or addiction issue, a charge or charges that authorize a conviction but not necessarily automatic jail time or would be encountering a prison sentence that is less than 90 days and presumably, has a criminal record. The individuals must also plead guilty to the charges. Track 1 has a treatment plan that has a probationary stage and three month-diversion.

Track 2 consists of individuals who have a mental health or addiction concern, are encountering prison time that is 90 days or greater and are pleading guilty to the charges. Sentencing for these individuals is suspended until the individual has finished the program. The treatment for Track 2 includes at least 12 months of participation, urine screenings occurring twice a week and three months of successive sobriety in the latter end of the program.

The Peterborough Community Support Court has a wide range of individuals in the programs. The most common diagnoses of people in these programs are; anxiety, depression, post-traumatic stress disorder (PTSD), bipolar disorders, schizophrenia and personality disorder.

They use different treatments depending on if the individual is participating in the drug treatment aspect of the court or the mental health aspect of the court. Motivational interviewing and dialectal behaviour therapy (DBT) are additional therapeutic interventions that are offered by therapy facilitators and justice workers. In many drug treatments, therapy facilitators and justice workers use a combination of motivational interviewing and DBT skills.

Cognitive behavioural therapy (CBT) is a popular therapeutic approach that is used for a variety of problems including substance use disorder, criminal behaviours, anger and aggression (Hofmann et al, 2012 & Barnes et al, 2017). CBT is a type of psychotherapy that identifies different methods for people to behave by altering their thoughts and aims to reduce the rates of recidivism among offenders (Mpofu et al, 2018). The success of CBT to decrease recidivism is theorized on the belief that accepting responsibility for the offence will draw a greater intake of the treatment effects (Mpofu et al, 2018).

Dialectal-behaviour therapy (DBT) is another type of treatments that is used among offenders. DBT is a type of psychotherapy and is founded on CBT. This treatment illustrates the components of CBT that have been discovered to decrease recidivism rates including skills-based, risk-focused and a structured framework (Tomlinson). This type of treatment was created for individuals diagnosed with a borderline personality disorder (BPD), but it can assist individuals suffering from other types of mental illnesses such as substance abuse, post-traumatic stress disorder and depression. DBT has a greater focus on the emotional and social factors of living, compared to CBT. It was developed to assist individuals with maintaining their emotions by teaching individuals to admit their feelings and thoughts and providing methods to alter them (Dialectical Behavioural Therapy, n.d). This treatment has been incorporated and integrated in many forensic psychiatric and correctional facilities to decrease recidivism (Tomlinson, 2018).

Motivational interviewing is a traditional method utilized for individuals in the justice system and the Peterborough Community Support Court provides it to individuals (Rotter & Carr, 2011). Specifically, it can be used for individuals who suffer from a substance abuse problem. It is a type of counselling method where the interviewer assists in the development of change and show acceptance for the individual. The general principles of this technique include showing empathy for the individual by listening, establishing differences between the individual's ambitions and their present actions, deterring from arguing with the client and

adapting when the individual is refusing and supporting enthusiasm (Center for Substance Abuse Treatment, 1999).

The purpose of this project was to evaluate the current treatments that the Peterborough Community Court provides to offenders and advise the Court if new programs should be implemented or if their current programs need to be altered in order to improve the rates of recidivism. The project was built from past research conducted in 2018 by a Trent University student who did an initial evaluation of the Peterborough Community Support Court. The student found that program completion was related to a decreased likelihood of an individual from reoffending for the first and second year following completion of a Community Support Court program. The current project builds off of past research conducted to develop a greater understanding of the effects that the Peterborough Community Support Court has on recidivism.

The research conducted was important because it was an exploratory study to find the most effective ways that significantly reduces recidivism rates which will decrease the number of crimes that occur in a community (9). The research project looked at what is currently being done within the Peterborough Community Support Court and looking at the practices they provide to examine if they are on the right track. Understanding the effects that treatment methods can have on recidivism, will improve the overall efficiency of the Peterborough Community Support Court and will give a clearer picture on the treatments that have a positive effect and those that do not.

One criterion for success was identifying the treatments and methods that the Peterborough Community Support Court are doing and examining if those methods and treatments they are using are working. Another criterion for success was discovering what else can be done within the Peterborough Community Support Court and looking at what other Support Courts in Ontario are doing that can be used for the Peterborough Community Support Court. The success of current treatments was assessed by discovering if they are evidence-based in the literature and are common treatments used to reduce recidivism among offenders. A criterion for failure were treatments that are not supported by research and studies and does not significantly impact recidivism in Support Courts.

Methodology

The Trent University library database was used to find scholarly articles that provided information on best practices used for individuals involved in the justice system, the effects various treatment methods have and factors that influence an individual's success. The criteria for finding sources was that multiple sources were referenced in the paper, they were peer reviewed, were published within the last 10-15 years, that the sources were written by professionals in the field and that the paper was published by well-known journals in the field such as the Criminal Justice Policy and the Journal of Community Mental Health. The types of databases that were used were Scholar's Portal, Wiley and Sage Journals. The studies and information of treatment methods expanded outside of Canada and looked into research studies that have been done in other countries such as the United States. As well, a survey was created using background information to help guide the questions that should be asked. The survey was sent out to courts in Ontario and information gathered from the survey was used. The secondary sources were relevant to the research because they provided information on treatments that have an impact on recidivism, provided explanations on how the treatments work, incorporated social determinants of health in certain programs and reinforced the importance of Support Courts. The survey that was created was relevant to the research because it provided information regarding the methods and approaches that other courts in Ontario are using for their clients and the way that they manage the offenders that are involved in their programs.

The variables/factors that were assessed for the survey that was created were, the conditions individuals suffer from (addictions, mental health, substance abuse), the type of offence committed before treatment, type of treatment and its association with recidivism and types of social determinants of health (employment conditions, income, physical environment). The treatment methods used in courts throughout Ontario were compared and contrasted to the Peterborough Community Support Court by identifying common treatments that were used among many courts in Ontario and seeing if the Peterborough Community Support Court possessed those treatments as well. This was comparable as these courts are the same type (drug treatment or mental health) and they come across similar issues in mental health or substance abuse that individuals have. One thing that made it hard to compare the Support Courts was that they vary in their eligibility criteria. Some courts allow certain types of offenders into their

program while others do not. For example, one court in the survey does not accept domestic-related offenses or 3rd class offences. However, the majority of the courts accepted similar individuals who suffer from a mental illness, addiction or who have acquired a brain injury. As well, studies in the literature were hard to compare as they used different components in their study such as sample size, type of participants etc. This was overcome by identifying the general conclusions that were consistent with multiple studies and looking at studies that had large sample sizes.

One type of potential bias present was question-order bias. This bias can occur in my survey. One question that I created could have impacted answers of questions that follow as respondents are thinking about ideas presented in the previous questions, which affects their thoughts and feelings on questions that follow. This bias was accounted for by asking questions that are general first, then specific questions and asking positive questions followed by negative questions. Also, questions were grouped around a frequent topic to try to minimize this type of bias such as treatments provided and social determinants of health.

Another potential bias present was non-response bias where some individuals do not participate in the survey which could have affected the results that were received. For example, if some courts in Ontario refuse to participate or forget to complete the survey, then all the treatments that are being used across Ontario are not included in the research. This bias was accounted for by ensuring participants that their names will not be published, giving participants ample time to complete the survey, sending out reminders of the survey in case people have just forgotten to do it and ensuring that the survey is not too long. As well, the survey questions were very specific and targeted to ensure that the research questions were answered clearly and completely.

The research methods that were used for this study were a literature review and a survey. The review was used to obtain an understanding of the best practices to be used for Support Courts and the role of Support Courts in the justice system. As well, the literature review was used to comprehend how a treatment works and why it is successful for offenders. This type of information was found by using journal articles that were available on the Trent University's library database. The information gathered from this method was a combination of qualitative and quantitative. The qualitative component explained the components of a treatment and how they are implemented into a program. The quantitative component included rates of recidivism

correlated with a specific treatment. The information from the literature review gave an understanding of main treatments that are currently being used. As well, the literature review helped guide the type the of questions that were asked in the survey by developing an understanding of current research in order to create specific survey questions that were aimed at gathering particular information from the courts in Ontario.

Another research method that was used to answer the research questions was a survey. The survey was created on Qualtrics because this software was available. The survey consisted of 20 questions. The features of the survey were the respondents had the ability to go back to previous questions and save the survey and continue at a later time. As well, a message was displayed to the respondent if a question was not answered. The respondents had the ability to go back to previous questions in case they wanted to add more information. HSJCC provided a list of courts in Ontario to distribute the survey link to. The types of courts that were invited to participate in the survey were Mental Health Courts and Drug Treatment Courts. The criteria for inclusion were courts that were involved the rehabilitation process of offenders. Criminal courts such as the Ontario Court of Justice were not included to participate in the survey.

The courts that were invited to participate in the survey were located in various regions in Ontario such as York Region, Haliburton and Waterloo Wellington An email explained the research that was being conducted and inviting participants to participate in the survey went along with the survey link. A consent form was attached to the survey and outlined the study and informed the participants any risks that may exist. Participants could view the form and decide if they wanted to participate. The survey was voluntary, and participants had the option of discontinuing their participation in the research at any time. The participant had to agree to the consent form before completing the survey. The names of individuals who participated in the survey were not published in the final paper. The survey should not have taken more than 1 hour to complete and was available for two weeks to ensure that the courts in Ontario had enough time to complete the survey. The survey asked questions regarding treatments that are provided to individuals, which treatments the respondents feel are effective, the treatment that is most currently utilized, how their court measures recidivism, what type of offenders are eligible for their program and the types of social determinants of health that they address. The information from the survey was mainly qualitative as it was asking for details about the court and the participant's opinion and view. This information was included because a component of the

research was looking at what other Support Courts are doing and seeing if it can be used in the Peterborough Community Support Court. As well, seeing what other Support Courts in Ontario are doing is useful because the Peterborough Community Support Court treats similar offenders who suffer from a mental illness, brain injury or addiction. The qualitative data was analyzed by reading through the responses for a particular survey question and then grouping the data into initial themes. The responses were examined again, and the categories were refined.

When the survey closed, the responses were viewed, and a comparison was made of treatment methods in other courts, to the Peterborough Community Support Court. Treatments that were similar and also those that varied between the courts were identified. The information from the literature and from the survey was grouped by category and similar themes. Major findings were developed using the knowledge from the survey and from the preliminary literature to discover methods that are suitable for the Peterborough Community Support Court and that will contribute to decreasing the amount of recidivism.

The proper steps for this research project were completed to address any ethic concerns and safety regarding the research. An ethics application was completed for the research project and a consent form was attached, detailing the outline of the research project and the purpose of the survey. The survey was reviewed and approved by the ethics board before it was sent out to participants.

Results/Major Findings

There are a variety of treatment methods that can be utilized to help offenders reintegrate into the community and reduce the likelihood of an offender from reoffending. Examples of treatments used for rehabilitation include CBT, DBT, motivational interviewing and individual counselling. The literature review identified CBT as a popular method utilized to significantly decrease recidivism. Cognitive-behavioural treatments that are organized, directed at risk and built on skills have shown to decrease the amount of recidivism (Tomlinson, 2018)

Meta-analyses have demonstrated that cognitive behavioural therapy is an effective treatment method for decreasing recidivism among offenders. An 8.2% decrease in recidivism has been shown for general offenders who have finished a CBT program (Rotter & Carr, 2011). Other research has also discovered that CBT programs that are skills-based, risk-focused and structured result in a decrease in recidivism up to 55% (Tomlinson, 2018). As well, CBT

programs have a significantly greater effect in decreasing recidivism when more program components are included with the general CBT. Examples of added program components are anger control and interpersonal problem solving. Greater number of sessions for CBT also contribute to the significant effect of reducing recidivism (Tomlinson, 2018). Additionally, many CBT programs are provided in a group setting but there is evidence that suggests having this type of program in an individual setting as well, further decreases recidivism than having it in group format only (Tomlinson, 2018).

Many studies have supported the statement that CBT is an effective treatment for decreasing recidivism rates, but the amount of decrease varies by the type of offender (Wilson, 2005). For example, a metaanalysis examined how effective CBT- based anger management interventions are for decreasing recidivism in adult offenders who are male as shown in Figure 2 (Henwood, 2015). This study displayed that anger management programs structured around CBT, can be effective in decreasing recidivism, specifically for recidivism that is violent (Henwood, 2015).

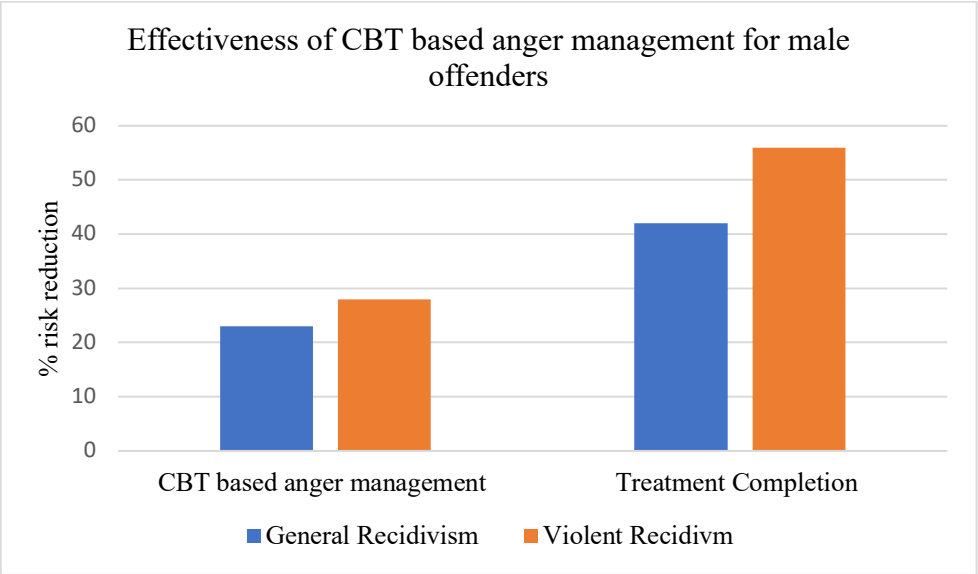


Figure 2 Effectiveness of CBT based anger management on decreasing recidivism for male offenders (2015)

Additionally, cognitive behavioural therapy-based alcohol treatment programs have been broadly utilized to separate the connection between crime and alcohol. One study conducted in

2015, examined the effectiveness of alcohol treatment programs on recidivism for male offenders. Individuals who participated in an alcohol treatment program displayed a significant decrease in recidivism compared to individuals who did not participate in the program. Specifically, individuals who did not attend a program were greater than 2.5 times more likely to perform another criminal act (Needham et al, 2015). In addition, a sufficient amount of literature supports the claim that CBT is effective, but it is still not known what specific treatments are most effective with a particular type of drug use (Lutze, 2007).

CBT makes up a variation of treatment programs like the drug abuser treatment program, the sex offender treatment program and the violent offender program (Barnes et al, 2017; Someda, 2009). The variations of the CBT programs are all established by the general framework of CBT (Someda, 2009). However, due to these variations in treatment, meta-analyses have demonstrated that the extent of the effect can differ extensively due to variables such as the type of offender, length of treatment, target population, program size and funding (Rotter & Carr, 2011; Duwe et al, 2015). One meta-analysis particularly examined the influence of CBT programs that were specifically created to reduce recidivism using a small sample size (Barnes et al, 2017). The analysis recommended using CBT to decrease the likelihood of individuals to reoffend (Barnes et al, 2017). The study was conducted many years later but with a bigger sample size. The study discovered a mean decrease of 27% for recidivism. Many other meta-analyses also showed effective results for programs that incorporate the CBT framework (Barnes et al, 2017). However, it is important the CBT programs that aim at reducing recidivism, possess the main framework of CBT and do not stray too far from it (Duwe et al, 2015).

The literature review also discovered DBT as another treatment method that could have potential in decreasing recidivism among offenders. One application for DBT is providing it for individuals who have been diagnosed with BPD. DBT has been shown to reduce violent events and to decrease anger as disclosed by individuals who have a borderline personality disorder (Rotter & Carr, 2011). Furthermore, DBT has been utilized for offenders that are identified as stalkers who probably have BPD. Offenders who finished the DBT program that consisted of six months, had a significant decrease in re-arrests from stalking than individuals who did not finish the program (Rotter & Carr, 2011). DBT has been found to be effective in treating difficult populations like individuals who have borderline personality disorders or eating disorders (Tomlinson, 2018).

Results from one study that examined DBT programs illustrated that DBT has the prospect of decreasing the amount of recidivism particularly if it is used within the requirements of the Risk-Need-Responsivity (RNR) model (Tomlinson, 2018). The Risk-Need-Responsivity framework is an evidence-based approach for the assessment and treatment of offenders and consists of three principles: The Risk principle, the Need principle and the Responsivity Principle (Public Safety Canada, 2018). However, the rapid integration of DBT in numerous facilities has exceeded the research into the effectiveness of this treatment for diminishing recidivism for various types of offenders (Tomlinson, 2018). More studies and research are needed to examine the present DBT programs that are being utilized to decide if they are being incorporated within the best methods for the rehabilitation of offenders, using the criteria of the RNR model. As well, additional research needs to identify if DBT programs are truly effective at reducing recidivism among offenders (Tomlinson, 2018).

Motivational interviewing is an evidence-based treatment and was identified as a best practice method from the literature review for drug treatment courts to use (Drug Treatment Court Feasibility Study, 2017). Meta-analyses have supported its use as an effective treatment method on its own and also as a preliminary treatment with a more rigorous treatment to follow for individuals with a severe substance abuse problem or alcoholism (McMurran, 2009). Motivational interviewing is a type of counselling method and courts in Ontario use counselling as a common method for individuals attending session. The Peterborough Community Support Court should continue to provide motivational interviewing for individuals in session who have a substance abuse problem or addiction to help decrease the number of reoffences.

Support Court treatments should be individualized to tailor to each offender's needs because every individual in the Support Court will have slightly dissimilar needs to another individual and will not react in the same way to different types of treatment (Lutze & Wormer, 2007). The courts in Ontario who participated in the survey stated that their programs are client-centered, and they individualize their treatment to accommodate the specific needs of a particular offender whether they suffer from a brain injury, mental illness or addiction. Individualized treatments also help make the treatment more effective as the courts believe that the mind-set of the offender determines the effectiveness. If the offender is in the right mind-set to seek treatment and participate fully, then the treatment will be more effective than for someone who is not ready to get the help and support they need. As well, having workers who interact with

offenders, who are more empathetic and successful at engaging with the individual is beneficial, when the individual does not have a lot of motivation or intuitiveness.

Social determinants of health are social and economic factors that impact one's health (Government of Canada, 2019). It is important for programs to address social determinants of health as they can be barriers for offenders to have a successful rehabilitation. Common social determinants of health included in programs for various courts in Ontario were food, education, finances, housing and transportation. The greatest social determinant of health that courts in Ontario believed to reduce recidivism rates was access to safe, affordable and stable housing. The results from the survey yielded safe, affordable and stable housing as the greatest social determinant of health. Courts in Ontario address the different types of social determinants of health by ensuring that individuals have easy access to these services and the courts rely on funding to be able to provide these services. Courts address transportation by providing individuals with bus passes. They provide bus passes to clients to make it easier for them to get to services within the community. The courts address the barrier of food by ensuring that individuals have access to food programs, food banks and shelter systems that help with food insecurity. Additionally, courts ensure that individuals have access to shelter systems to alleviate insecure housing and to ensure that individuals have access to intensive case management for housing. The social determinants of health that need to be addressed in order to reduce recidivism rates for individuals are food, education, finances, housing and transportation. Programs can be better implemented to address social determinants by increasing access to services such as food banks and shelter systems.

Individuals who participated in the survey stated that the implementation of social determinants of health in the programs can be improved by increasing supports and funding for housing and income needs. As well, greater access to services like housing supports and focusing on decreasing the length of time it takes for individuals to receive services such as housing would be ideal. A housing pilot project in Winnipeg was launched in 2010 which focused on giving acceptable housing and housing supports for individuals participating in a support court program. The program included employing housing support workers full-time and house mentors (Department of Justice, 2017). Housing support workers were employed to examine individuals needs regarding housing, to collaborate with community agencies that supply services for housing and assist individuals in finding and keeping appropriate housing. House mentors were

employed to manage transitional houses and give support to the individuals who are staying there. The pilot project also had transitional housing funding for individuals who were in need of a place to stay or have worsening housing situation (Department of Justice, 2017).

Another factor that can be included in programs is considering the role of the judge and how they influence the success of rehabilitation for the offender. A report conducted in 2005 examined the role of the judge in drug treatment courts and its impact on offenders. The report stated that they did not anticipate that the judge's attitude and behaviour would have positive or negative effects for the offender (King & Pasquarella, 2016). A list of studies discovered it seemed that although the judge did not have an effect on substance use, criminal acts and participation in the program, an effect was present for the kind of individual. Individuals in drug treatment courts who were identified as a greater risk, had a greater beneficial influence from judges who were more involved in their program. There was no benefit for individuals who were identified as a low risk (King & Pasquarella, 2016). One study discovered that more than 80% of individuals who had a previous drug treatment in the past, completed the program when they met with the judge every two weeks. Conversely, lower than 20% of individuals who saw the judge when required did not complete the program (King & Pasquarella, 2016). Judges could have a beneficial impact on the result for the offender, but the impact varies depending on the type of individual. Additionally, there are greater results for decreasing rearrests when judges complete many rotations in the court (King & Pasquarella, 2016). Furthermore, courts in Ontario felt that judges that show empathy, compassion and are empathetic towards individuals in session have the greatest positive impact on individuals and results in decreasing the likelihood of an offender from reoffending.

Discussion and Conclusions

The Peterborough Community Support Court includes a few best practices that the literature suggests specialized courts should contemplate utilizing in their programs (Drug Treatment Court Feasibility Study, 2017). Best practices are defined as methods that are continually updated with available evidence about what functions well for decreasing the likelihood of reoffending for offenders that suffer from mental illness, addiction or brain injury (Livingston, 2008). The best practices that the Peterborough Community Support Court have are

CBT and motivational interviewing. The Peterborough Community Support Court should continue to use motivational interviewing for individuals attending treatment because literature has supported in using these methods to treat offenders and reduce recidivism. Many studies have supported using CBT as an effective method to decrease recidivism among offender populations. As well, motivational interviewing is a promising treatment to reduce recidivism. The Peterborough Community Support Court should also consider other types of individual counselling as courts in Ontario utilize this method frequently.

Moreover, the court should continue to use DBT as a treatment they provide to individuals because DBT is a particular type of CBT. CBT has been identified as a best practice in the literature to decrease recidivism among offenders and DBT is built from CBT. However, they need to make sure that the DBT treatment includes the general structured framework of CBT to ensure that it is effective. There have been preliminary studies that show promising results regarding the effectiveness of DBT. More studies and research need to be conducted to examine the full extent of its impact in order to ensure that DBT can be used as a treatment method to significantly reduce recidivism rates. If DBT continues to be used without extensive research being conducted to examine its effectiveness, then this could result in the Peterborough Community Support Court not seeing a continuous positive improvement in their recidivism rates. It is recommended that the Peterborough Community Support Court monitor the impact DBT has in their court by tracking the number of offenders who reoffend after completing this treatment. Also, it would be beneficial if they tracked whether there is a significant decrease in recidivism by using DBT for a specific type of offender such as an individual who suffers from a bipolar disorder compared to someone that suffers from a personality disorder. As well, the court should consider implementing additional CBT programs that are targeted at reducing recidivism as these treatments are applicable to mentally ill offenders and preliminary studies have shown promising results (Rotter 2011). The Toronto Drug Treatment Court and the Vancouver Treatment Court use CBT approaches to treat individuals that need a substance abuse program. It might be useful to see the structure of their program that they are using and incorporate those elements into the programs provided by the Peterborough Community Support Court (Canadian Centre on Substance Abuse, 2007). Moreover, the programs that the court provides to offenders should all be individualized to tailor the needs of offenders. Additional changes in programs might have to be done for individuals who are not ready for treatment. As well, courts should

consider not allowing offenders into the program who are not ready to seek treatment as these types of offenders are not motivated to change and are more likely to reoffend. Other best practices that the court should contemplate implementing are problem solving skills, skill building programs and the risk-need-responsivity model (RNR) (Drug Treatment Court Feasibility Study, 2017).

It is recommended that the Peterborough Community Support Court focus on safe affordable housing in their programs as all respondents from the survey believed this to be the greatest social determinant of health that reduces recidivism rates. When individuals are unable to access safe and affordable housing, they could stay in environments that support their addiction (Department of Justice 2017). Providing the court with increased funding, would allow them to provide greater access to individuals for a variety of services including housing supports and address the issue with housing. Increased funding will assist support courts in decreasing the length of time individuals have to wait to receive particular services and give additional transitional housing for individuals (Department of Justice, 2017). Also, it is recommended that the Peterborough Community Support Court employ housing support workers full time and house mentors to assist individuals participating in a program with their housing needs. Implementing this initiative could follow the similar framework of the pilot project in Winnipeg. This will ensure that the barrier of housing is being addressed and will contribute to the offender's success when they transition back into the community. The social determinants of health can be addressed by providing individuals with bus passes, access to food programs and food banks and assisting them with finances. It is also advisable that the judge play a bigger role in an individual's journey especially for high risk offenders and schedule regular meetings with the judge (i.e. every two weeks) than just when it is necessary. Allowing positive judges to have a greater role in an individual's progress will contribute to a successful rehabilitation into the community.

There were limitations associated with this research project. One limitation was that there were only a limited number of responses from the survey. Therefore, a full picture of the treatment methods and practices that are used in all Support Courts in Ontario could not be developed. As well, the Trent University library database was used to find literature on this topic because it was accessible. This database is smaller compared to other databases from other universities which restricted the access of information. Another limitation was that many Support

Courts do not track various factors such as recidivism rates, completion rates and the most frequent type of individual that reoffends. This made it challenging as the various treatment methods that the Support Courts use could not be compared with recidivism rates. Furthermore, the Support Courts are not able to identify potential gaps in their treatments by using data and examine the true effects that the treatments have on recidivism rates in their community. This made it hard to determine what the best practice was and methods that should be used. As well, there are too many factors that affect recidivism rates program which makes it challenging to determine a cause and effect. Some factors are previous criminal history, length of program and family/marital factors. There is not one factor that causes recidivism but a combination of factors that influence the number of reoffences. Furthermore, there has not been a lot of studies conducted on the impact that treatment methods have on recidivism other than CBT. Research has looked at the overall effect CBT has on recidivism but there has not been extensive research on the specific types of CBT that can impact recidivism rates (Duwe et al, 2015). There also has not been extensive research examining other different treatment methods that can be used for offenders in session.

The next steps regarding this topic are looking at the effect that various types of CBT treatments have on specific offenders and if there are specific CBT treatments that are more impactful than others for certain variables such as the length of the program. For example, comparing the effects that a CBT program of 6 months long has on a mentally ill offender to a CBT program that is 12 months long. It would also be beneficial if more studies were conducted that thoroughly examined the effect that DBT has. As well, it would be useful if a provincial data collection and tracking measurement system was put in place for Support Courts to use. Support Courts currently do not track recidivism rates as they are not required to collect this type of data and there is no method currently in place to track this type of data. Tracking recidivism rates would be helpful to see the variables that have a huge impact on recidivism. Also, Support Courts personally tracking completion rates or rearrests after completing a treatment program would indicate the methods that are working and the ones that are not. Research could look into creating a tracking system that could be implemented for Support Courts in Ontario to use. Another next step is to monitor the impact that addressing the social determinants of health have on recidivism especially for housing. Investigating if increasing access to support services as well as funding, results in contributing to a significant decrease in recidivism rates.

The research project was an exploratory study that looked into what is being done for offenders who are attending a Support Court in Ontario and improvements that can be made to decrease the number of offenders who reoffend. Peterborough Community Support Court includes good practices such as motivational interviewing and CBT treatments that have positive effects on individuals that have been involved with the criminal justice system. Literature has identified using these methods to treat individuals involved in the criminal justice system in decreasing recidivism. However, further research needs to examine the impact that different types of CBT have and identifying the most appropriate method for the type of offender. As well, focusing on ensuring that individuals have easy access to safe and affordable housing will overcome a main barrier that individuals face. Also, increasing funding and availability to treatments and support services will help individuals in a positive way. The future goal would be standardizing the treatments and support services across all Support Courts in Ontario. This would make it easier for practices to be reviewed and ensure that consistent treatments and support services are provided to offenders throughout Ontario. The impact that treatments have on the rehabilitation of offenders could be identified and any necessary improvements could be made to significantly decrease the amount of recidivism across Ontario as a whole.

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