

NYS DCJS JMHCP Technical Assistance Bulletin

Intercept 5: Probation, Mental Health and Peer Specialist Supervision Groups

Introduction:

Peer support is getting help from someone who has been there. People with similar experiences may be able to listen, give hope and guidance toward recovery in a way that is different, but just as valuable as other services.

Forensic Peer Specialists are persons with histories of mental illness or co-occurring disorders and criminal justice involvement helping those with similar histories. Across the nation a number of state and local authorities have supported the development of a new 'forensic peer specialist' workforce to meet the needs of either jail diversion or re-entry programming initiatives.

This bulletin provides the context to examine the "Probation, Mental Health and Peer Support Supervision Groups" in the Schenectady Probation Department. The specific background information and materials for the program will be available in a separate toolkit.

Rights:

The combined advocacy of people with disabilities moved the government to enact The Americans with Disabilities Act (ADA) that was signed by President George H. W. Bush on July 26, 1990. This major legislation was intended to create more access in communities and workplaces across the nation for almost 40 million people with physical, psychiatric and developmental disabilities. The ADA was passed to create access in transportation, physical environments, equal opportunities in independent living, employment, education, and housing; and freedom from abuse, neglect, and violations of patients' rights. On June 22, 1999, the United States Supreme Court held in *Olmstead v. L.C.* that unjustified segregation of persons with disabilities constitutes discrimination in violation of Title II of the Americans with Disabilities Act. The Court held that public entities must provide community-based services to persons with psychiatric and developmental disabilities when such services are appropriate; are wanted; and can be reasonably accommodated.

Recovery:

The belief that individuals can recover from mental illness has evolved and developed since the 1990's. *Illness Management and Recovery* is a mental health Evidence - Based Program that involves teaching individuals skills and techniques to reduce the impact of psychiatric symptoms. It is a step-by-step approach that assists people to set meaningful goals for themselves, make informed decision about their treatment, to acquire information and skills to develop greater management over their symptoms, and make progress toward their own personal recovery.

There are four major components of life that support recovery:

- **Health:** overcoming or managing one's disease(s) or symptoms - for example, abstaining from use of alcohol, illicit drugs, and non-prescribed medications if there is an

addiction problem - and for everyone in recovery, making informed, healthy choices that support physical and emotional wellbeing;

- **Home:** a stable and safe place to live;
- **Purpose:** meaningful daily activities, such as a job, school, volunteerism, family caretaking, or creative endeavors, and the independence, income and resources to participate in society; and
- **Community:** relationships and social networks that provide support, friendship, love, and hope.

Forensic Peer Specialist:

A mental health promising practice is the employment of Forensic Peer Specialists in services and programs. It is a promising practice because there is currently limited research evaluating the practice. However, anecdotal evidence and some studies suggest that using Forensic Peer Specialists is promising and a cost effective practice.

Forensic Peer Specialists may serve as hands on assistance for someone leaving jail or prison for the community; support linkages to housing, education, benefits and other essential services and, perhaps most importantly; are role models and demonstrate the potential of recovery. Therefore, there may be many opportunities for Forensic Peer Specialists to become involved with thoughtful and committed justice and mental health staff in a variety of situations.

The “Probation, Mental Health and Peer Specialist Supervision Groups” are the result of collaboration between a Schenectady Probation Supervisor and a Clinical Supervisor from a local hospital with a Peer Advocacy Program. The individuals involved shared a common belief that individuals with psychiatric disabilities on Probation could benefit from a planned, organized and supportive Supervision Group. The “Probation, Mental Health and Peer Specialist Supervision Groups” program is:

- A 12 week curriculum that addresses challenges specific to individuals with mental illness whose behavior has resulted in criminal justice involvement and who are currently under Probation supervision;
- The ideal starting size of the group is 8-12 members and participation is voluntary;
- Groups last from 60-75 minutes;
- The group is implemented using a cognitive/behavioral focus. Emphasis is on members replacing behaviors that lead to unwanted outcomes with those resulting in positive outcomes.
- The participants are identified with mental health issues and are either currently receiving treatment, on wait lists to access treatment, or have a history of utilizing treatment;
- The participants are identified by probation officers and are asked to attend the first 2 session or are “strongly recommended” to join the group;
- Peer leadership emerged from the groups and now facilitation of the group is shared by a mental health clinician, probation supervisor and peer specialist/mentor.

A separate document, the Toolkit, will include the Supervision Group curriculum; peer training topics; key points regarding the Group; impact on persons on probation; background information on the Supervision group, the Schenectady Probation Department, Ellis Hospital Peer Services and contact information for the Probation Supervisor and Clinician.

Resources:

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