

Anna Protano-Biggs  
Founding Director



# Mental Health Court

Chattanooga | Hamilton County



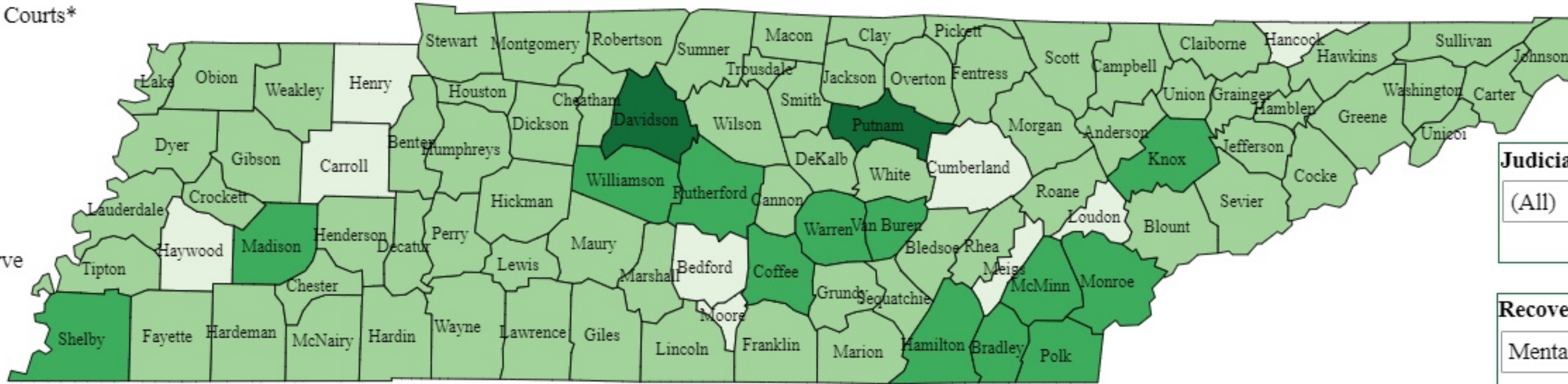
## Transforming Lives!

# Recovery Court Service Area

Number of Judicial District Courts\*

- 0
- 1-2
- 3-4
- >5

\*Individual courts might serve more than one county.



**Judicial County**

**Recovery court type**  
 Mental Health

Judicial District	Judge Names	Judicial County	Contact	E-mail	Telephone
10th Judicial District Mental Health Court	Andrew Frieburg	Bradley	Jill Barrett	jbarrett@bradleycountyttn.gov	423-339-0480
		McMinn	Jill Barrett	jbarrett@bradleycountyttn.gov	423-339-0480
		Monroe	Jill Barrett	jbarrett@bradleycountyttn.gov	423-339-0480
		Polk	Jill Barrett	jbarrett@bradleycountyttn.gov	423-339-0480
31st Judicial District Recovery Court	Larry Bart Stanley, Jr.	Van Buren	C. Brad Price	bprice@warrencountyttn.gov	931-474-1071
		Warren	C. Brad Price	bprice@warrencountyttn.gov	931-474-1071
City of Jackson Mental Health Court	Blake Anderson	Madison	Lindsay Reid	lindsay.reid@wth.org	731-499-3124
Coffee County Mental Health Court	Jere Ledsinger	Coffee	Mike Lewis	m.lewis.ccdcf@bellsouth.net	931-723-3051
Davidson County Mental Health Court	Melissa Blackburn	Davidson	Mark Winslow	tbreeding@rutherfordcountyttn.gov	615-862-8320
Hamilton County Mental Health Court	Don Poole/Lila Statom	Hamilton	Anna Protano Biggs	annab@hamiltontn.gov	423-290-2536
Rutherford County Mental Health Court	Barry Tidwell	Rutherford	Trish Breeding	tbreeding@rutherfordcountyttn.gov	615-217-7124
Shelby County Mental Health Court	Gerald Skahan	Shelby	Tiffany Hilson	Tiffany.Hilson@shelbycountyttn.gov	901-222-2043
Williamson County Mental Health Court	M.T. Taylor, Jr.	Williamson	Tracey McKinney	tracey@educareprograms.org	615-599-9917



# What is Mental Health Court?

- ❖ A **“one stop shop”** for justice-involved mental health consumers in Hamilton County, linking them to diagnostic help, treatment and necessary supports while in custody and upon reentry to our community.
- ❖ Works with consumers at **multiple intercept points within the criminal justice system**: Pre-arrest, On bond, In custody and on probation.
- ❖ Serves a **diverse group of justice-involved mental health consumers** and their families.





# Mission, Purpose and Goal



Mental Health Court transforms lives so individuals, families and our community can flourish and thrive while enhancing public safety and reducing the cost to our County. It is a win-win for our community.

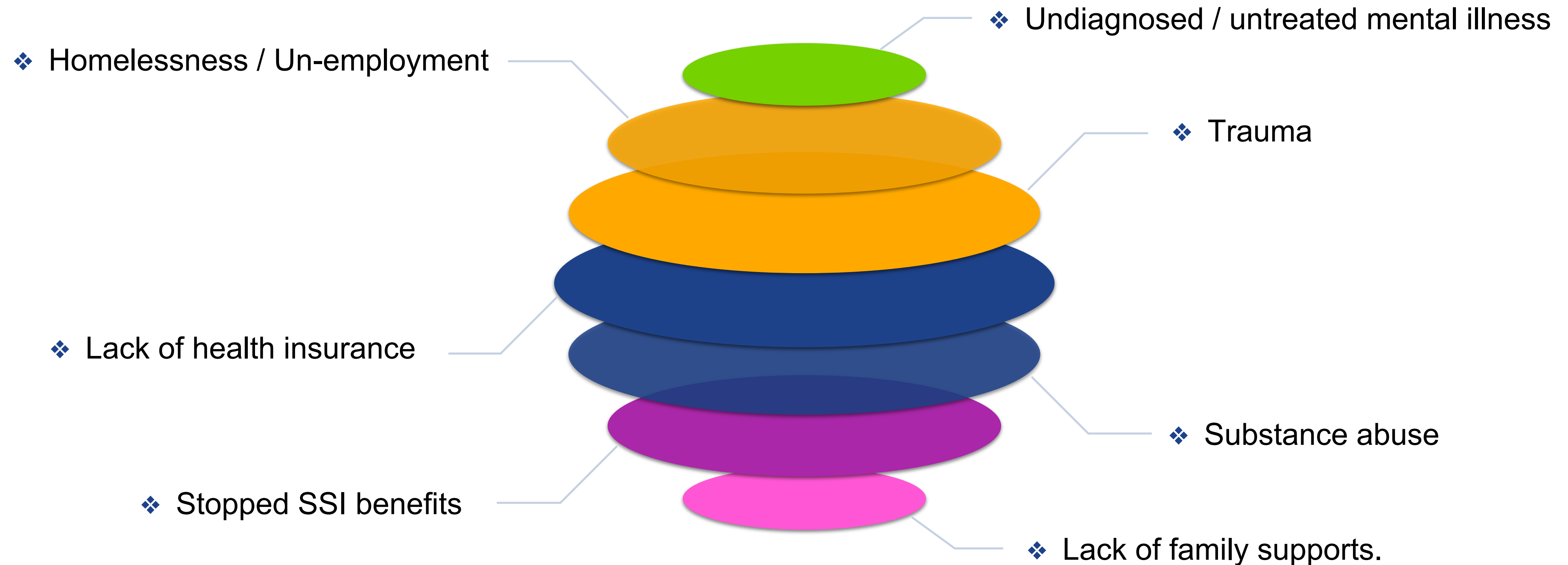




# Goals

- ❖ ***Reduce recidivism rates*** amongst justice-involved mental health consumers
- ❖ Provide individuals with the ***knowledge of resources*** available to them in the community
- ❖ Provide ***encompassing support and treatment*** to our participants to empower them to make positive change in their life
- ❖ Provide ***treatment*** in order to assist with trauma, mental health, and co-occurring substance abuse needs

# Barriers for Participants



These barriers lead to a great social and economic cost to our community.

# The need for Mental Health Court

- ❖ 1 in 4 Adults experience mental illness
- ❖ Jails and prisons are becoming psychiatric hospitals with 35-40% of population on psychotropic medication.
- ❖ Twice as many mental health customers incarcerated than gang members.
- ❖ Cost \$103.05/day to house an inmate in Hamilton County.
- ❖ Psychotropic medications can double the cost for the mentally ill inmate.
- ❖ Justice-involved mental health consumers stay in custody 8 time longer at a cost to our County of 7 times more.
- ❖ Many cycle in and out of criminal justice system over 30 times and mental hospitals over 12 times
- ❖ At \$103.05/day, the average mental health consumer may serve 11 months 29 days, each time they come back at a cost of \$37,510.20 - not including cost of medication, additional staff, transportation, etc.

# How the MHC Department Operates

## Judicially – Supervised Program

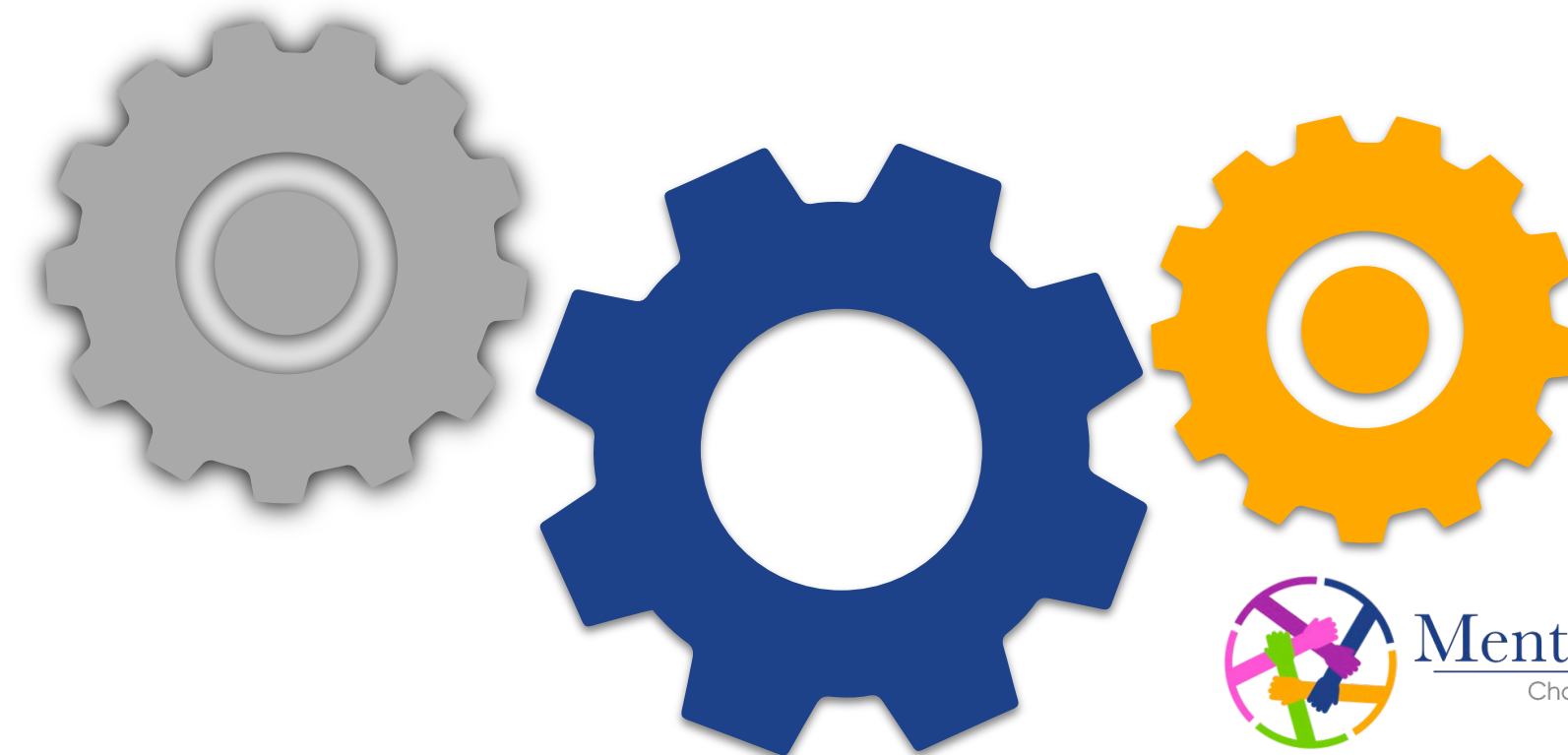
Criminal Court  
2 years

General Sessions  
11 months & 29 days

- ❖ Everyone who enters Mental Health Court has a **professionally diagnosed serious mental illness**.
- ❖ Participants progress through **5 phases to graduate**: Transition, Stability, Resilience, Growth, and Success
- ❖ Participants are connected to: mental health care, medical care, safe housing, transportation, employment opportunities, etc.

## Client Assistance Program

- ❖ Designed to assist those individuals who are justice – involved with behavioral health needs who are either not eligible or inappropriate for the judicially – supervised program.
- ❖ Provides linkage and referrals to resources in the community





# Trauma Track

## In – Reach

(Classes provided at Silverdale Detention Center to teach inmates (men and women) how trauma impacts them and how to heal from it)

\*\* Any individual who attends these classes is eligible for all other services once released

## Peer Support Group

(Weekly for people with history of sexual trauma, led by a peer who has their own history of sexual trauma)

\*\* This group is open to ANYONE in the community.

## Resource Linkage and Support

We provide information for and linkage to a variety of resources to mental health care, primary care, substance use treatment, victim services, etc.

## Trauma Therapy Services

These services can be provided by the Trauma Clinician or by a preferred provider in the community.

## Outpatient Mental Health Services at Helen Ross McNabb Center

(including med management, therapy, case management, Intensive Outpatient, and peer support)

\*\* If individual does not have insurance, the TT has funding to pay for these services.

## Trauma – Sensitive Yoga

Fridays from 2:30 – 3:30  
Peace.Strength.Yoga  
Zoom

## Therapeutic Art Classes

Mondays from 5:00 – 7:00  
Mark Making



# Trauma Symptoms:



## Arousal/Reactivity:

- Irritability
- Outbursts
- Reckless/Self – Destructive Behavior
- Sleep Disturbances
  - Easily Startled/Jumpy
  - Reactive

## Avoidance:

- Attempts to Avoid:
- People, Places & Things
  - Feelings, Thoughts, & Memories
    - ... related to their traumatic experiences.

## Intrusive Symptoms:

- Recurrent Dreams/Nightmares
- Dissociative Reactions
- Flashbacks
- Intrusive Memories
  - Physiological Reactions

## Altered Cognitions:

- Memory Impairment
- Negative Core Beliefs
- Depressive Symptoms
- Difficulty Feeling Love & Happiness



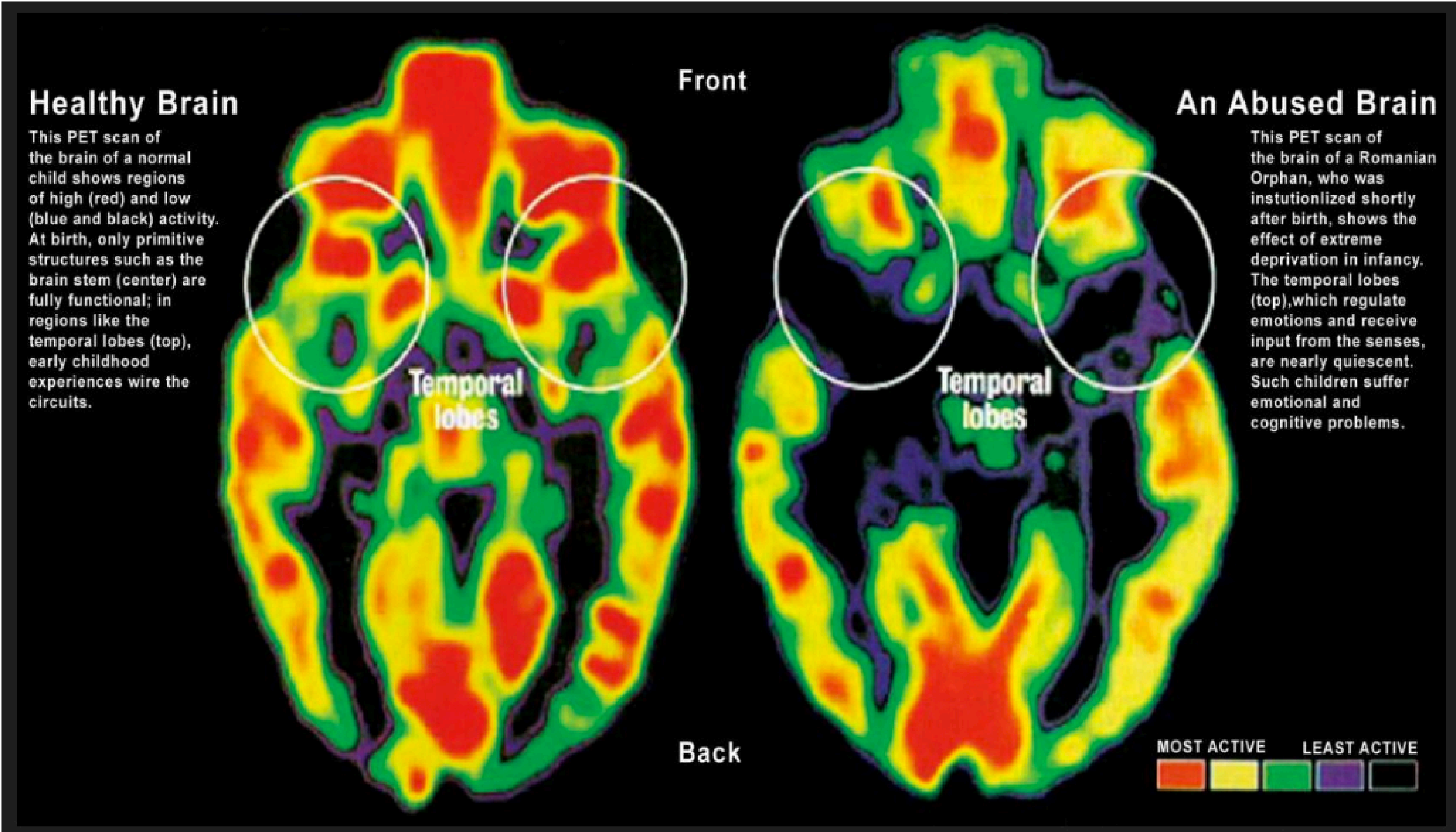
# What Trauma Responses Can Look Like



There isn't ONE WAY to respond to trauma. Every response is different and VALID.

- A survivor may be shy and quiet and avoids anything that reminds him/her of the trauma
- A survivor may be triggered by the way someone looked at him/her and then he/she starts swearing and throwing things
- A survivor may have sudden outbursts of tears when you have no idea what caused those tears
- A survivor may have poor sleep because he/she is having nightmares
- A survivor may have a flashback doing an every day activity
- A survivor may be lying to you because he/she doesn't trust you because he/she doesn't trust anyone
- A survivor may be going back to old negative, self-destructive behaviors because that is easier than the fear of starting over

# Healthy Brain v. Abused Brain





# Why Should We Care?

The experience of trauma among people with substance abuse and mental health disorders, especially those involved with the justice system, is so high as to be considered an almost *universal experience*.



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# What does it mean to be Trauma – Informed?

We must understand that there is a connection between trauma, substance use, and mental health

We must understand that in order for substance use and criminal behavior to end, trauma needs to be treated.

We must understand that there is a connection between those things and criminal behavior.



# How You Might Look to Them





# SAMHSA's Four R's

## Realize

the widespread impact of trauma and understand potential paths for recovery

## Recognize

the signs and symptoms of trauma in participants, families, and staff

## Respond

by integrating knowledge about trauma into policies, procedures, and practices.

Actively

**Resist Re –  
traumatization**

**TRAUMA  
COMPETENCY**  
means changing your  
perspective.



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# The Four Things to Establish Above All

SAFETY

TRUST

RESPECT

A SENSE  
OF  
CONTROL



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# Changing the Court's Approach

## ○ Old Approach

- Adversarial
- Incarcerate
- Punishment
- Order
- Authoritarian

## ○ New Approach

- Collaborative
- Treat
- Healing
- Partner
- Empowering

Changing the conversation from What is Wrong  
with You to **“What Happened to You?”**

# Collaboration



- ❖ Criminal justice (DA, PD, TDOC, Jail), treatment providers, dedicated case managers, MHC team.
- ❖ Open communication between team and participants leads to faster responses to needs.
- ❖ Commitment to SAMHSA's 10 essential elements of a Mental Health Court which are grounded on multi-system collaboration and addressing mental health courts within wider community planning.

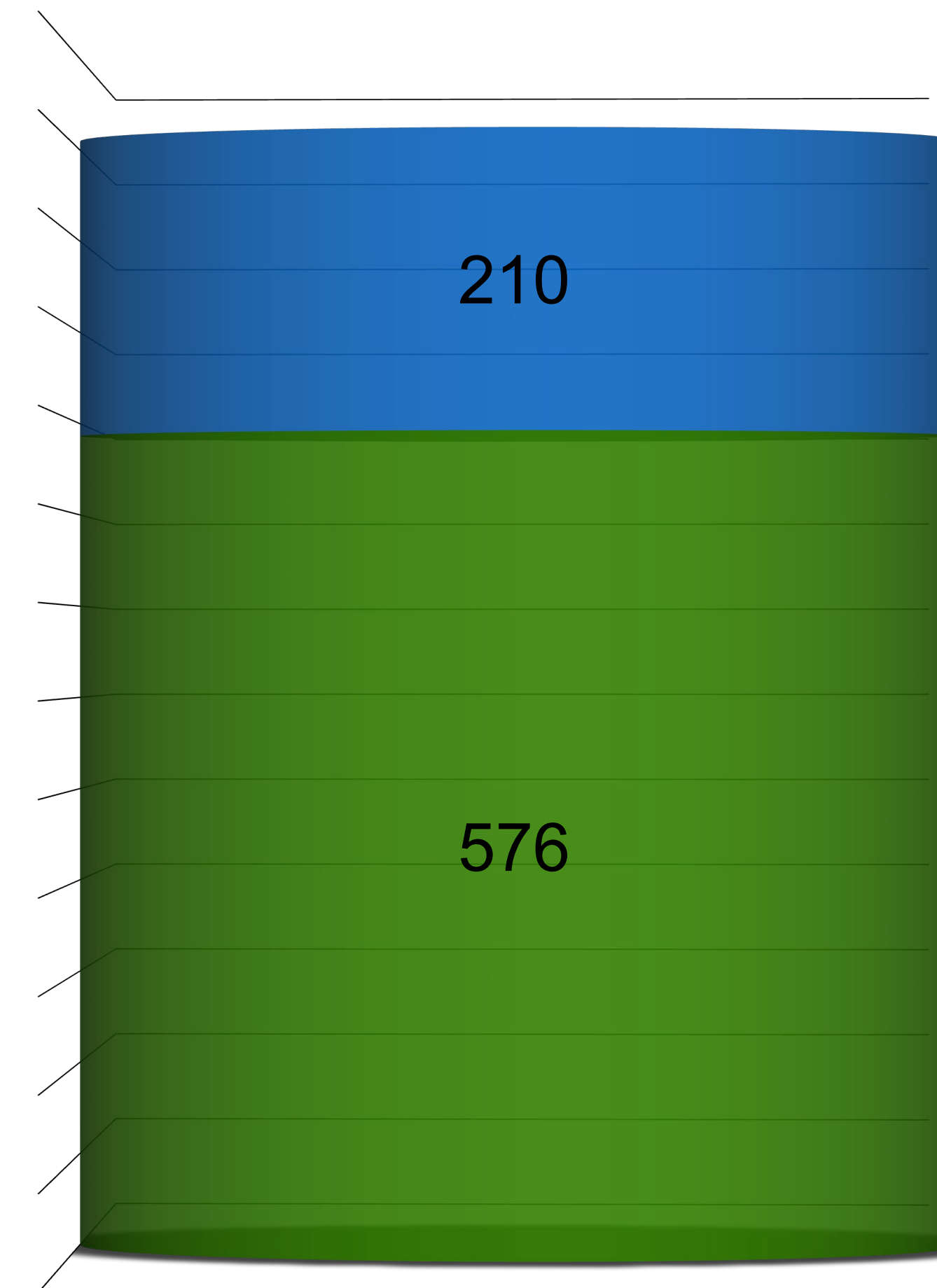




# By the numbers

- ❖ Mental Health Court has received over **576** requests for help to date.
- ❖ In FY 21 - helped over **210** people access treatment resources for crisis and long-term management.
- ❖ To date, we have graduated **52** participants from our judicially-supervised program with more scheduled to graduate in November this year.

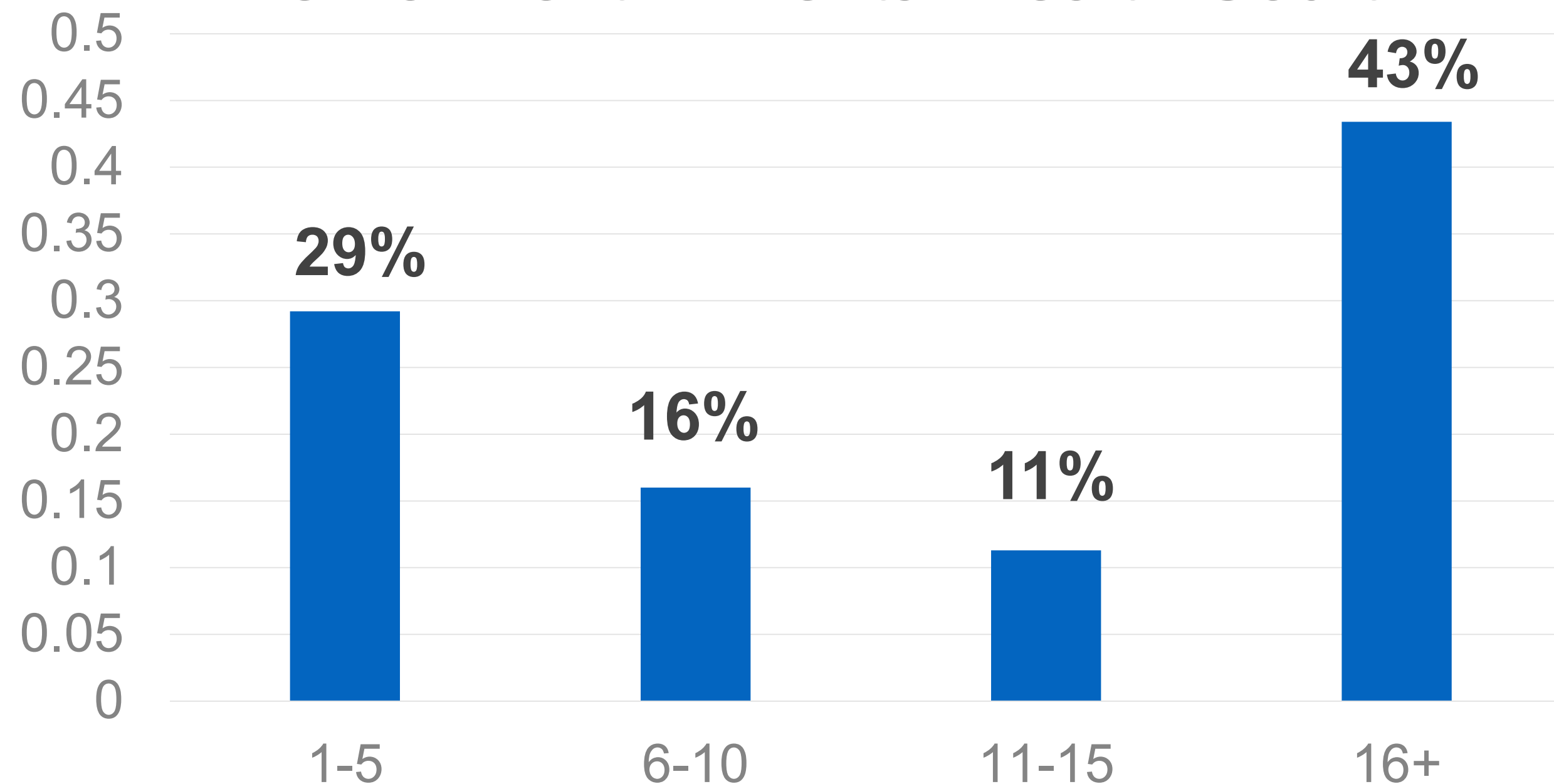
- Requests for Help
- FY 21 Client Assistance



Number

# By the numbers

Number of committals prior to enrollment in Mental Health Court



**Collectively**, these 106 clients spent a total **86,125 days in jail** prior to enrolling in Mental Health Court: Sexual Trauma Track and the **average length** of incarceration for each committal was **48.5 days**.

From July 1, 2019 to present:  
**190** individuals have enrolled in the Trauma Track program.

**Average length of incarceration:**

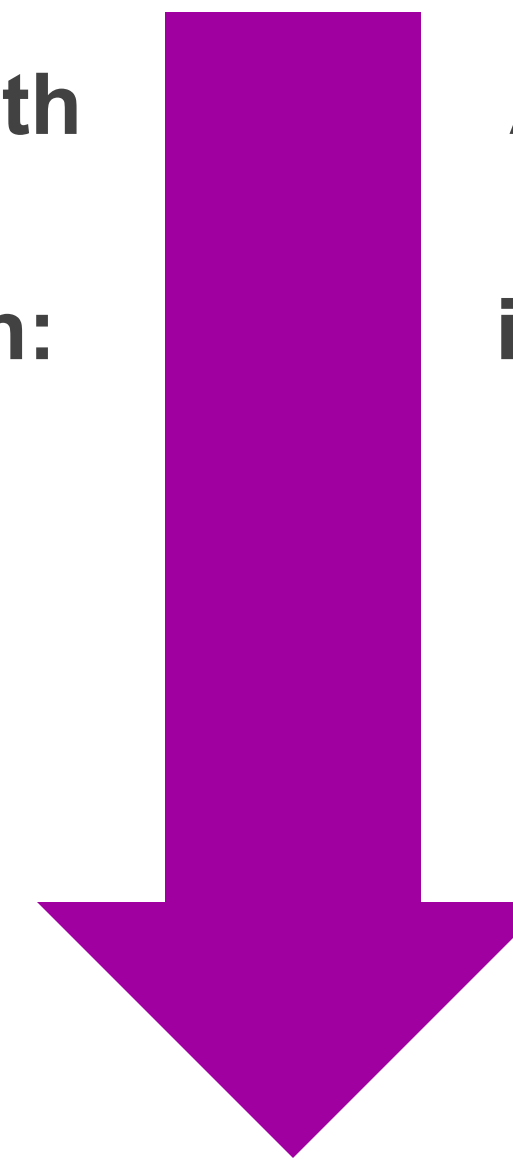
48.5 days

27.0 days

**Average cost of incarceration:**

\$4,997.43

\$2,782.35



# Perception



- ❖ *"If you can't pay your **rent** or you can't pay your **lights or water**, they direct you into the right way to get help."*
- ❖ *"They help you find housing. I've heard that they **help people get their check started**. Like really anything in life that you need help with."*
- ❖ *"They help you with **counseling, therapy, medication management, food stamps**."*
- ❖ *"**In mental health court they really focus on the underlying issues**....like what was making you get high or what triggered you. And they try to fix those problems, which helps more than 'Oh, you relapsed, we're sending you back to jail on a sanction.'...If you go to jail because you relapsed, it just shows there's no help out here. There's no hope. I'm going to continue down this path, the same path that I've been going down. But when you have someone that actually shows you that they care, and they want to talk about it, that they want to fix it, that just makes you want to try harder."*
- ❖ *"I just feel like **it made me realize that I am not my past trauma**... Like, I can move on from it and I can heal from it and I can learn from it and maybe help the next person if they've been through what I went through...I'm a totally different person today than I was when I entered the program, and a lot of people have told me that....Even though I graduated, I am still growing as a person....And with mental health court, even after you graduate and even today they still help me. **They don't just throw you away and say 'Oh, you're ok now.'** They help you even after the fact...They are still here for you. Like I can pick up the phone and call [name] and he's still going to help me just like if I were still in mental health court."*
- ❖ *"I always say 'it's a life-changing thing.' **I tell everybody that mental health court saved my life**. If it wasn't for mental health court, I wouldn't be alive today. I know that for a fact. If I would have continued down the same path I was going before I started doing my therapy, and got into the IOP class I attended, I would probably be still locked in my bedroom and not talking to anybody. But now I can live a fully functioning life."*



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