

successful. Keep people with mental health issues in treatment and out of jail, it takes partnerships with organizations outside the judicial branch and dedicated case workers.

Ever. One. Me. Ar saw in her courtroom that morning had been diagnosed with a severe and persistent mental illness, a traumatic brain injury or an intellectual and developmental disorder—including the college student who stole the vitamins.

Instead of going to criminal court, the student had agreed to abide by a treatment plan and check in regularly with Me. Ar and a probation officer for a set amount of time.

In return, Me. Ar agreed to put her guilt plea on hold during that time—a stay of adjudication—and then dismiss it if the student successfully completed the program.

The student appeared to be well on her way. She said she was stabilized on medication, holding a 4.0 grade point average and just starting an internship.

Me. Ar smiled.

“You’re doing great,” the judge said. “Keep it up.”

The use of special diversionary courts for people with substance abuse problems or mental illness has expanded rapidly since the nation’s first drug court was [established in 1989 in Miami](#).

Their goal is to keep people in treatment rather than incarcerated. Their rising popularity is driven by the increasing number of people with substance abuse or

Me Ar's court reserves Wednesday for misdemeanor offenders. Those who commit non violent felonies are also eligible for mental health court but have hearings on Tuesday

Several people around the table groaned and one let out a mild expletive.

The probation officers are the foot soldiers in the Hennepin County Mental health court's model.

The monitor random drug and alcohol tests and medication adherence, set up stop gaps psychiatric appointments for people in crisis and help coordinate housing and employment assistance.

Meier tells the program participants to call their probation officer if they need help.

But several of the probation officers said help can sometimes be hard to find —



Another officer said she received a call from one of her participants whose two young children were starting school the next day and needed supplies. She made a shopping trip and delivered two full backpacks later that night.

That's not in the job description, but she said the trust she built with that one act will go a long way if she ever needs to try to convince the woman to take her medications or go to therapy.

More success than failure

Treatment compliance can be an ongoing struggle for some participants. If they decide not to comply with their treatment protocol, Meier can send them back to traditional criminal court to face the charges she put on hold when they joined the program.

That appeared the likely outcome for one of the participants in September. His probation officer told Meier that the man was refusing treatment, even though he admitted he had trouble controlling his anger and alcohol intake.

"That's what he said: He's not willing to do treatment and he's not willing to do therapy," the officer said.

Meier sighed.

"I hope he's willing to do time," she said. "Because that's about all I got left."

Dropouts are the minority in Meier's mental health court. About 60 percent of those who enter the program complete it, and even those who drop out tend to require fewer hospitalizations and incarcerations afterward.

The court is funded with local dollars supplemented by state and federal grants that require extensive reporting on outcomes.

"We're pretty well aware of our recidivism rates and our graduation rates and our relapse rates," Meier said. "We keep track of it, and we think we're doing well and reducing the number of new criminal cases among our population."

- [As inmates' mental health needs skyrocket, KDOC works to adapt](#)
- [KDOC steps up supports for parolees with mental health issues](#)
- [Mental health issues drive some Kansans to repeated jail stays](#)