Conceptual Tools for the Mental Health Court Professional

Stage-Based Modeling in Mental Health Courts
The Leitmotif for Program Development

Application of Assimilation, Transtheoretical, and Mythic Hero Models in the Mental Health Court Program

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“No mind is better than the precision of its concepts.”

Ayn Rand

Philosophy: who needs it
“Mental health court” is not merely a fusion of terms but represents a fusion of disciplines where both mental health and criminal justice professionals share clinical and legal knowledge of theory, doctrine, methodology and psycho-legal principles of practice that builds an effective circle of influence relative to the mentally ill offender.
Domains of Influence

- Comprehensive Law
- Stage-Based Paradigms
- Therapeutic Communication
- Rhetorical Persuasion
Domains of Influence – Ingredients

**COMPREHENSIVE LAW**
- Therapeutic Jurisprudence
- Procedural Justice
- Restorative Justice

**STAGE-BASED PARADIGMS**
- Organizational Assimilation
- Stages of Change
- Monomythic Hero

**THERAPEUTIC COMMUNICATION**
- Solution-Focused Dialogue
- Motivational Dialogue
- Transformational Dialogue

**PERSUASIVE RHETORIC**
- Ethos (Credibility)
- Logos (Reason)
- Pathos (Emotion)
Stage-based Paradigms

ORGANIZATIONAL ASSIMILATION
- Stages of organizational assimilation

TRANSTHEORETICAL STAGES OF CHANGE
- Stages of self-change

MONOMYTHIC HERO
- Stages of the heroic quest
Presentation Contents

Part I. The Leitmotif of the Stage Paradigm

Part II. Stages of Assimilation

Part III. The Stages of Change

Part IV. Stages of the Monomyth

Part V. Infusion of Stage Paradigms in Program Phases
The Value of Conceptualization

Concepts are the constituents of thoughts and are crucial to such psychological processes as categorization, inference, memory, learning, and decision-making.
What is a Conceptual Tool?

Conceptual tools are generally philosophical and/or psychologically oriented ways to look at and think about the work of the mental health court program.

These tools are designed for the legal and clinical practitioner as a means of expanding their perspective of the mentally ill consumer generally and the work of the MHC program specifically.

The conceptual tools provide mental health court program practitioners with a basic cognitive structure or framework for fulfillment of program objectives.
Every theoretical and doctrinal principle applied in the psycho-legal work of the mental health court is typically more extensive than can be embraced entirely or presented in a brief lecture.

Given the burdens of volume and scope, the application of the various forms and patterns of theoretical and philosophical thought cannot be completely incorporated with any degree of practicality or manageability.

These concepts have at least some kinship to program logic and operation, however, they may in some cases appear as distant relatives, not necessarily embodying every aspect of theory and principle to complete fidelity, but associated closely enough to provide an adequate conceptual structure for program development.
The mental health court program should retain the same contextual aspects for each participant, but effectively scale participation to the functional level of the participant.
Process Consistency

Process aspects of the program are applied similarly to all program participants and will typically vary only in the schedule of transition through the process.

- All participants transition through the same process of assimilation.
- All participants transition through the same process of change.
- All participants transition through the same process of the heroic quest.
Not every participant may be functionally capable of gainful employment, but all are likely capable of some level of productivity.
Not every participant may be functionally capable of college education, but all are likely capable of some level of continuing education.
Not every participant may be capable of functional mastery, but all are likely capable of some level of improvement in functional living and functional coping.
The late 20th Century philosopher Ludwig Wittgenstein in his work *Tractatus Logicol-Philosophicus* provided an illustration of perspective utilizing descriptive geometry. He states:

“To perceive a complex means to perceive that its constituents are combined in such and such a way. This perhaps explains that the figure [below] can be seen in two ways as a cube; and all similar phenomena. For we really see two different facts. (If I fix my eyes first on the corners *a* and only glance at *b*, *a* appears in front and *b* behind, and vice versa.)”

The mental health court program may be perceived differently from different perspectives depending on the point of view of both participants and practitioners alike. This flexibility in perspective can be utilized to illustrate hidden depth and dimension in the program including the distinctions between process and practical program applications.

“This is connected with the fact that no part of our experience is also a priori. Everything we see could also be otherwise. Everything we can describe at all could also be otherwise.”
Process and Practical Program Applications

- Generalized
  - Process of Assimilation: Productive Activity
  - Process of Change: Educational Activity
  - Process of Heroic Quest: Therapeutic Activity

- Individualized

Process Applications

Practical Applications
## Scope of Process and Practical Work in MHC Phases

<table>
<thead>
<tr>
<th>PROCESS WORK</th>
<th>PRACTICAL WORK</th>
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<tbody>
<tr>
<td>The process work of the program involves those activities that are not ends in and of themselves, but which comprise a succession or compilation of activities that combine to achieve an end.</td>
<td>The practical work of the program involves specific areas of individual activity related to productivity (i.e., paid and unpaid work), formal education, and therapeutic or rehabilitative work toward mental health recovery.</td>
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<table>
<thead>
<tr>
<th>PHASE I</th>
<th>PHASE II</th>
<th>PHASE III</th>
<th>PHASE IV</th>
<th>Process of Assimilation</th>
<th>Process of Change</th>
<th>Process of Questing</th>
<th>Productive Activity</th>
<th>Educational Activity</th>
<th>Therapeutic Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anticipation</td>
<td>Encounter</td>
<td>Metamorphosis</td>
<td>Disengagement</td>
<td>Anticipation</td>
<td>Pre-contemplation</td>
<td>Departure</td>
<td>Individualized activity including volunteer work, sheltered employment, supported employment, supportive employment, etc.</td>
<td>Individualized educational activity including, literacy education, parenting classes, GED, technical education, college education, etc.</td>
<td>Individualized therapeutic activity including psychotherapy, behavior management, skills development, medication management, etc.</td>
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<tr>
<td>Pre-contemplation</td>
<td>Preparation</td>
<td>Action</td>
<td>Maintenance</td>
<td>Initiation</td>
<td>Return</td>
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### Generalized Application

The process work of the program is essentially generalizable, meaning that they are applicable across all program participants to the same degree more or less with the exception of duration, or the amount of time spent in any particular process.

### Specialized Application

Specialized application means that although each participant may be required to demonstrate activity in each of the three practical domains, the specific type or level of activity is individualized to the particular functional level of the participant.
Scaling Program Materials to Differing Audiences
PART 1
The Stage Paradigm as a Conceptual and Practical Leitmotif
Why Program Phases?

Multidimensional approach to program development and advancement that corresponds to participant variability in:

- Type of illness
- Severity of illness
- Functional level
- Educational level
- Motivational level
Staging Advancement

- Creates flexibility
- Reinforces feasibility
- Increases manageability
- Promotes sustainability
The Axiology of the Stage Paradigm

Stage-based models are designed to represent a temporal dimension in which individuals are viewed as evolving over time through advancing phases of cognitive, emotional and behavioral development.

The stage paradigm is consistent with the temporal dimension of criminal justice which involves significant time spans relevant to the imposition of legal penalties and probationary systems that extend beyond the immediacy of the criminal act.

The value of the stage paradigm is that it structures the work of therapeutic jurisprudence into a more manageable succession of progress toward clinical and judicial reconciliation, that is better suited to the mentally ill offender.
The Leitmotif of the Mental Health Court Program

What is a Leitmotif?

A leitmotif (ˈlaɪtmoʊˌtiːf), sometimes written leit-motif, is a musical term (though occasionally used in theatre or literature), referring to a recurring theme, associated with a particular person, place, or idea. It is closely related to the musical idea of idée fixe. The term itself comes from the German Leitmotiv, literally meaning "leading motif", or perhaps more accurately, "guiding motif."

The stage-based models applied here, and their characteristic feature of ascending or progressive paths toward fulfillment, together represent the “leitmotif” or recurring thematic concept and guiding conceptualization of the mental health court program.
Program advancement is conceptualized as an ascending scale of participation.
The focus of the mental health court program is centered on the psycho-legal issues of change, both in terms of the defendant’s mental health recovery as well as the reconciliation of the defendant’s criminal conduct. The task of change in either domain requires a consistent effort and represents an upward climb on a progressive and ascending course.

The stage models utilized in the Mental Health Court program (i.e., assimilation, stages of change, and the hero motif) are all representative of ascending paradigms that are progressive, incremental, and transformational toward some defined end in which the individual arrives at a pinnacle of success.

Although the journeyman may encounter obstacles that impede progress or even retrograde setbacks, on balance in most cases, regression should not outweigh progression, and defendants, if properly motivated, should be moving in an affirmative direction through the levels of program advancement. Otherwise, the labor is one of hopeless futility, of which it has been said there is no more dreadful form of punishment (Camus, 1955).
Although progressive ascension is idealized as the preferred course, it is not uncommon for participants to reach a plateau in motivation or even retrogress to preceding levels of participation.

The factors of motivation and the level of commitment in the pursuit of personal change as opposed to only token and placated effort in pursuit of the avoidance of punishment is the program ideal.

The metaphor of Sisyphus as an absurd hero who cheated the gods and incurred a penalty devised as an endless labor of futility is what we wish participants to avoid.
The Stages of Program Advancement

• Recognizing the stage aspects of human change, the First District Mental Health Court attempts to utilize a blend of stage-based models as a logical method to structure the fulfillment of the mental health court program.

• Three models that utilize a stage paradigm are brought together as a conceptual, organizational, and practical framework for addressing the work of program advancement.

• These stage-based models and their characteristic feature of ascending or progressive paths toward fulfillment, together represent the “leitmotif” or recurring thematic concept and guiding conceptualization of the mental health court program.
Mental health court program advancement is conceptualized and operationalized from the perspective of three stage-based models of organizational, personal, and cultural paradigms that structure program progression into a succession of ascending steps toward a defined goal.

- Organizational Assimilation Model
- Transtheoretical Model
- Mythic Hero Model
All three stage models employed in the conceptualization of the mental health court program involve some scale of ascension or movement through successive levels of engagement and activities of commitment.

In the hero motif the adventurer’s quest must proceed across the threshold of initiation through an ascending succession of trials before the boon is obtained.

Assimilation theory progresses through the succession of anticipation and encounter before a metamorphosis or change is achieved in the individual’s relationship to the social entity.

The Transtheoretical Model of change necessitates travel along a progressive and ascending spiral toward the maintenance of new patterns of adaptive behavior.
The mental health court program is designed to transition the participant through a succession of phases corresponding to a variety of stage-based models.
Programmatic Goals – How to it

How do we assist the MHC participant through the stages of assimilation?

How do we assist the MHC participant through the stages of change?

How do we assist the MHC participant through the stages of the heroic quest?
Program Form and Substance

- **Working through the stages of assimilation**
  - How the program is organized and structured through the development of incremental phases of activity.

- **Working through the stages of change**
  - How the program is designed and delivered in the clinical setting.

- **Working through the stages of the heroic quest**
  - How the program is communicated to the participant.
Conceptual Tools for the Mental Health Court Professional

Organizational Assimilation Theory

• The stage model utilized for the process of socialization of the participant into the organizational culture of the mental health court program.

Transtheoretical Stages of Change

• The stage model utilized for the process of the participant’s work of self-change in the mental health court program.

The Heroic Quest

• The stage model utilized for the process of advancement through the ascending phases of the mental health court program.
In 1941, the Swiss mathematician Alfred Korzybski, in his work *Science and Sanity*, introduced the notion of map-territory relation as an element in the evolution of human communication. **The map is not the territory** as remarked by Korzybski, encapsulated his view that an abstraction derived from something, or a reaction to it, is not the thing itself, e.g., the pain from a stone falling on your foot is *not* the stone; one's opinion of a person, favorable or unfavorable, is *not* that person; a metaphorical representation of a concept is *not* the concept itself; and so on.

British anthropologist and social scientist Gregory Bateson (1904-1980), in "Form, Substance and Difference," from *Steps to an Ecology of Mind* (1972), elucidates the essential difficulty of knowing exactly what the territory is, as any understanding of it is based on some linguistic representation.

Bateson points out that the usefulness of a map (a representation of reality) is not necessarily a matter of its literal truthfulness, but its having "**a structure analogous, for the purpose at hand, to the territory.**"
A structure analogous, for the purpose at hand, to the territory – Conceptual Map

**Comprehensive Law**

(“Law as a Healing Profession”)

**Therapeutic Dialogues**

**Self-efficacy theory** (Capability)

**Functional Skills Development**

**Stage-based Models**

(Leitmotif of the MHC program)

- **MHC CLIENT**
  - **Restorative Justice**
  - **Procedural Justice**
  - **Transformational Dialogue**
  - **Motivational Dialogue**
  - **Solution-Focused Dialogue**

**Social Cognitive Theory** (Agency)

**Moral Reasoning**

- **External Extrinsic**
- **Introjected Extrinsic**
- **Identified Extrinsic**
- **Integrative Extrinsic**
- **Intrinsic**

**Intentionality**

- **Forethought**
- **Self-reactiveness**
- **Self-reflectiveness**

**Comprehensive Law**

- **Therapeutic Jurisprudence**
- **Assimilation Model**
- **Stages of Change Model**
- **Motivational incentives and sanctions**

**Therapeutic Dialogues**

- **Solution-Focused Dialogue**
- **Motivational Dialogue**
- **Transformational Dialogue**

**Vicarious Modeling**

**Persuasive Socialization**

**Personal Mastery**

**Emotional Management**

**Participation: Voice, and dignity in the legal process**

**The court and legal system as agents of change**

**Cultural hero motif defining stages of the mythic adventure generally as initiation, atonement, fulfillment, and return.**

**Organizational assimilation theory defining stages of anticipation, encounter, metamorphosis and disengagement.**

**Transtheoretical model defining stages of change through contemplation, preparation, action, and maintenance.**

**Procedural Justice**

**Mythic Hero Model**

**Functional Mastery Skills**

**Functional Assertion Skills**

**Functional Survival Skills**

**Satisfaction - Focused Dialogue**

**Transformational Dialogue**

**Motivational Dialogue**

**Solution-Focused Dialogue**

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PART 2
The Stages of Assimilation
The mental health court system is a dynamic and complex adaptive system that involves the collaboration and cooperative interplay between the defendant and respective judicial and clinical entities. For the mentally ill offender, full program socialization, engagement, and compliant participation in part depend upon the function of assimilation.
Assimilation Theory

Proposed by Fred Jablin (1982), Organizational Assimilation Theory attempts to explain how individuals new to an organization or organizational entity, assimilate by using communication.

Jablin describes three stages that occur as one enters an organized system as Anticipatory Socialization, Encounter, and Metamorphosis.

How and in what ways an individual socializes into an organizational system can significantly impact his/her success within that organization.
Anticipation Stage

*Anticipation* is where the individual is introduced to the organizational entity and the compliment of existing personnel and begins the orientation to their particular role and function within the established hierarchy of the social matrix.

Here the newcomer begins to anticipate the various possibilities relative to their organizational future, forms opinion as to particular likes and dislikes of the system, and begins to determine their level of commitment to organizational pursuits.
• The individual at some point moves from the anticipation of organizational fit to the stage of *encounter*, where they are more directly engaged in the experience of the organization.

• In this stage individuals either initiate more invested and committed levels of organizational activity or remain on the fringe and periphery of the system, participating when required but never really generating independent and self-determined contributions to personal and organizational improvement.
Metamorphosis Stage

Metamorphosis refers to a stage of transition from initial and limited system and organizational encounter to full engagement and committed participation where the defendant begins to self-initiate program activity.

In the metamorphosis stage, the program participant undergoes the transformation of attitude, perspective, motivation, and identification necessary to move toward the intentional fulfillment of program completion.

The transformational defendant contributes their energy, thought, talent, creativity, and individuality in pursuit of self-determined success. The metamorphosis stage of assimilation also incorporates the principles of self-determination consistent with the recovery process model of rehabilitation.
Disengagement Stage

• Disengagement refers to the individual’s graduation from the mental health court program and exit from the diversion system.

• Although disengaged from the judicial aspects of the court program, the individual is expected to continue in therapeutic services to the completion of their individualized rehabilitative treatment plan.

• However, the mental health court program graduate may be asked to return to the court for the purpose of mentoring other defendants, providing consultation, reinforcement or testimonial, or in show of support for future participants. In this way the graduate is able to make a contribution to the future success of other participants which further benefits the community in general.
PART 3
The Stages of Change
Behavior Change

• Regardless of who the participant is or what mental illness condition they may have, the mental health court program is ultimately about effective behavior change, sustainability of behavior change, as well as psycho-legal recovery and reconciliation.

• This is true for all self-defeating behavioral issues the mental health court may encounter relative to the mentally ill offender, including:
  
  • Criminal Behavior
  • Substance Use/Abuse Behavior
  • Treatment Avoidance Behavior
  • Self-harm Behavior
  • Counter-motivated Behavior
  • Ambivalent Behavior
  • Poor Coping Behavior
The transtheoretical model was developed primarily by James Prochaska (1979), in collaboration with John Norcross, and Carlo DiClemente. It is a model of intentional self-change that utilizes principles and processes from many different psychotherapeutic theories and systems.

The basic premise is that behavior change is not a single step or lineal process, but is accomplished in definite stages.

The transtheoretical approach to behavior management is designed to assist individuals and groups as they transition through the stages of change until old behaviors are relinquished and new behaviors successfully maintained.
The Stages of Change

- **Precontemplation**: Stage in which awareness of problem behavior is typically denied.
- **Contemplation**: Stage of consideration, ambivalence, procrastination, and decisional balance.
- **Preparation**: Stage of decision making and commitment about change.
- **Action**: Stage in which the commitment and plan for change is carried forward.
- **Maintenance**: Stage of continuing commitment, long-term effort, and lifestyle revision.
The transtheoretical model represents a paradigm shift away from previous action oriented models which have dominated behavior change programs for the past three or four decades.

In the action paradigms, change as an event was assumed to occur dramatically and discretely. Clients were generally enrolled in brief programs and were expected to take rapid action to change, which if unsuccessful, was an indication of client resistance.

Under the stage paradigm, action is simply one of six distinct stages which both follows and precedes other stages in a process. In reality, change as a process means that no single stage is any more or less important than any other stage.
A true lineal progression of change along a continuum of stages, although ideal, is actually relatively rare. Instead, the average self-changer will usually relapse at some point, return to an earlier stage in the change process, and subsequently renew their efforts a number of times before they are able to maintain a new behavior.

Relapse is therefore the rule rather than the exception, however, although setbacks are common, the stages of change tend to spiral upward.

Recycling back through a previous stage seldom means that one starts completely over, rather, most return briefly to a phase of re-contemplation, where the lessons learned from earlier efforts quickly help people resume their assent toward successful change.
Illustrating the Spiral Nature of Change
## Processes of Change

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<tbody>
<tr>
<td>(1)</td>
<td>(2)</td>
<td>(3)</td>
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<tr>
<td>Consciousness Raising</td>
<td>Social Liberation</td>
<td>Emotional Arousal</td>
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<td>(4)</td>
<td>(5)</td>
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<tr>
<td>Self-Reevaluation</td>
<td>Commitment</td>
<td>Countering</td>
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<td>(7)</td>
<td>(8)</td>
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<tr>
<td>Environmental Control</td>
<td>Reward</td>
<td>Helping Relationships</td>
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## Processes of Change

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<thead>
<tr>
<th>Process</th>
<th>Description</th>
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<tbody>
<tr>
<td>Consciousness Raising</td>
<td>Increasing awareness or any knowledge about a problem behavior.</td>
</tr>
<tr>
<td>Social Liberation</td>
<td>Social alternatives that help someone begin or continue the self-change process.</td>
</tr>
<tr>
<td>Emotional Arousal</td>
<td>An emotional awareness and experience connected to the problem behavior (emotional consciousness raising).</td>
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<tr>
<td>Self-Reevaluation</td>
<td>A comparative self-analysis of how the problem behavior fits with the individual's personal values.</td>
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<tr>
<td>Commitment</td>
<td>Acceptance of personal responsibility for change (self-liberation).</td>
</tr>
<tr>
<td>Countering</td>
<td>Substituting healthy behaviors for unhealthy behaviors.</td>
</tr>
<tr>
<td>Environmental Control</td>
<td>Reorganizing the environment to remove things that stimulate problem behavior.</td>
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<tr>
<td>Reward</td>
<td>Positive reinforcement of responsible behavior.</td>
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<tr>
<td>Helping Relationships</td>
<td>Allowing others to assist in the change process.</td>
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## Processes of Change Objectives

<table>
<thead>
<tr>
<th>Processes</th>
<th>Objectives</th>
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<tbody>
<tr>
<td>Consciousness</td>
<td>Acknowledgement and elimination of common patterns of denial that prevent self-awareness.</td>
</tr>
<tr>
<td>Raising</td>
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<tr>
<td>Social</td>
<td>Finding social activities that offer alternatives to the problem behavior.</td>
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<tr>
<td>Liberation</td>
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<tr>
<td>Emotional</td>
<td>Getting in touch with feelings about the destructive nature of problem behavior.</td>
</tr>
<tr>
<td>Arousal</td>
<td></td>
</tr>
<tr>
<td>Self-Reevaluation</td>
<td>Honestly examining and comparing the problem behavior in contrast to personal values.</td>
</tr>
<tr>
<td>Commitment</td>
<td>Choosing and committing to act and strengthening a belief in the ability to change.</td>
</tr>
<tr>
<td>Countering</td>
<td>Substitution of a healthy behavior for the problem behavior.</td>
</tr>
<tr>
<td>Environmental</td>
<td>Avoiding or eliminating stimuli that elicit problem behaviors.</td>
</tr>
<tr>
<td>Control</td>
<td></td>
</tr>
<tr>
<td>Reward</td>
<td>Self-reward or rewards from others for making behavior changes.</td>
</tr>
<tr>
<td>Helping Relationships</td>
<td>Enlisting someone in a close relationship to help in making behavioral changes.</td>
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Precontemplation

People at this stage are typically not thinking about behavior change and are often unaware of the need to change, either due to a delay in negative consequences or due to denial in one form or another about problem behaviors.

Precontemplators typically underestimate the pros of changing, overestimate the cons, and often are not aware of making such mistakes.

One of the most effective steps that others can help with at this stage is to encourage them to become more mindful of their decision making and more conscious of the multiple benefits of changing a self-defeating behavior.
This stage is marked by ambivalence... It’s analogous to a "defense attorney" and a "prosecutor" rising up on the inside of the person considering the change... The defense attorney presents evidence why the adjustment is not necessary... The prosecutor presents evidence it is indeed necessary to make modifications.

If - as they often do - a loved one takes on the role of prosecutor it leaves the role of defense attorney to the person who has the problem... This is often referred to as Enabling Behavior because it allows the problem to continue by externalizing the internal battle.

Enabling allows the problem person to avoid the pain of listening to his/her own prosecutor (conscience) by staying in the defense attorney role -- rather than working through it to a point where the internal "judge" can make an accurate decision.
Preparation is the stage in which the individual is intending to take action in the immediate future, usually measured as the next month.

Individuals in this stage have typically taken some significant action in the past year, typically have a plan of action, and have organized the steps they will take to achieve a behavior change objective.
Action is the stage in which the individual has made specific and overt modifications in their life-style within the past six months.

Since action is observable, behavior change often has been equated with action, although not all modifications of behavior count as action in this model.

People must attain a criterion sufficient to reduce the risks of self-defeating behavior.
Maintenance is the stage in which the individual is working to prevent relapse and sustain the progress they have made through previous stages as well as maintain the change processes and techniques they have acquired throughout the transition to a healthier lifestyle.

Although they do not apply change processes as frequently as do people in action, they are less tempted to relapse and increasingly more confident that they can continue their functional improvement long-term.

The Transtheoretical Model therefore addresses the underlying structures of change that are common to both self-administered as well as psychotherapeutic courses of treatment and draws on the fundamental tenants of many diverse theories of psychotherapy as well as having been empirically tested in more than fifty distinct studies.
The ultimate goal in the change process is termination. Although the concept of true termination relative to human change is often disputed among clinical practitioners, as many view change as a life-long pursuit, still, from the stages-of-change perspective, termination means coming to a conclusion or exit point from the spiraling cycle of the change process in which there is at times a relapse to previous change stages. At this stage, the individual no longer finds that previous circumstances or conditions present a significant temptation or threat; the mental health court participant in this position will experience an elevated confidence and a high degree of moral certainty that he can cope with psychosocial stress events without fear of relapse to previous self-defeating behaviors.
Generally, the Transtheoretical Model considers four defining criteria that represent termination as distinct from the lifetime endeavor of the maintenance of change. These are described as:

- Development of a new or improved self-image:
- Development of adequate protective skills to manage situational temptation:
- Development of a high degree of perceived self-efficacy:
- Development of a healthier change of lifestyle:
PART 4

The Stages of the Monomyth

(Living life heroically instead of tragically)
"Only if we know that the thing which truly matters is the infinite can we avoid fixing our interests upon futilities and upon all kinds of goals which are not of real importance."

Carl Jung
What is the Monomyth?

Joseph Campbell’s *monomyth*, or the *hero's journey*, is a basic pattern that its proponents argue is found in many narratives from around the world. This widely distributed pattern was described by Campbell in *The Hero with a Thousand Faces* (1949). An enthusiast of novelist James Joyce, Campbell borrowed the term *monomyth* from Joyce's *Finnegans Wake*.

Campbell held that numerous myths from disparate times and regions share fundamental structures and stages, which he summarized in *The Hero with a Thousand Faces*:

A hero ventures forth from the world of common day into a region of supernatural wonder: fabulous forces are there encountered and a decisive victory is won: the hero comes back from this mysterious adventure with the power to bestow boons on his fellow man.
When they were all there now, matinmarked for looking on. At the carryfour with awlus plawshus, their happyass cloudious! And then and too the trivials! And their bivouac! And his monomyth! Ah ho! Say no more about it! I’m sorry! I saw. I’m sorry! I’m sorry to say I saw!

James Joyce

Finnegan’s Wake and the Monomyth

- Joseph Campbell quoting James Joyce says: “The monomyth is an everlasting reiteration of unchanging principles and events inflected in particular and unique ways.” That is to say, fundamentally, there is one narrative. However, this form demands of us that we live our unique narrative out. We cannot live someone else’s narrative. Campbell was insistent that we enter the woods alone where it is thickest and where no path exists.

- The monomyth is the journey each of us is on. “Myth commonly is an allegory or metaphor of the agony of self-completion through the mastery and assimilation of conflicting opposites. The process is described in the typical symbolic terms of encounters, perils, feats, and trials [in myths].”
Utah law fundamentally categorizes four constructs of relationship between mental illness and criminal justice:

- The Diminished Capacity Defendant
- The Incompetent to Proceed Defendant
- The Not Guilty by Reason of Insanity Defendant
- The Guilty but Mentally Ill Defendant
At first, the hero slumbers unreflectively within the conventions of society like the rest of us. To a large extent, the culture’s conventional beliefs are accepted as reality, its morals deemed appropriate, and its limits seen as natural. This is the developmental stage of conventionality, where most of us languish unquestioningly throughout life. Conventionality is an essential stage of life’s journey, but it can be a stopping point or a stepping stone. Since our culture rarely recognizes further possibilities, most people settle here and die here. But if there is one point on which Master Game players agree, it is that though conventionality may be a necessary stage of life, it is definitely not the highest.

In fact, the conventional way of being and state of mind are considered as suboptimal, clouded, and inauthentic. In Asia, this clouded state is described as maya, illusion, or dreamlike. In the West, existentialists label it as automaton conformity, everydayness, or inauthenticity. Likewise, psychologists describe it as a shared hypnosis, a collective trance, or to use Freud’s term, “the psychopathology of the average.” Whatever its name, the painful implication is that most of us sleepwalk through life, ignorant of our potential, and unaware of our clouded trance because we are born into it, we all share it, and because we live in the biggest cult of all: cult-ure. The hero’s task is to go beyond these conventional limitations.
Ouspensky and the Psychology of Cognitive Evolution

P.D. Ouspensky, an early 20th century Russian esotericist and philosopher studied human development from the point of view of potentiality, or the possibility of what the individual could become.

For Ouspensky, development meant the process of change, which could only begin with a change in the understanding of the meaning of consciousness, and especially consciousness associated with a particular kind of self-awareness.

He defined four possible states of consciousness: (1) sleep; (2) waking consciousness; (3) self-consciousness; and (4) objective consciousness. He considered that most people reside in the first two states, like living in a four-storied house but only occupying the first and second floor.
The Four Stories of Conscious Living

- Sleep:
- Waking Consciousness:
- Self-Consciousness:
- Objective Consciousness:
P.D. Ouspensky considered that events in human life were the result of three basic laws of occurrence. He stated that “what happens or may happen to us may depend upon three causes: upon accident, upon fate, or upon our own will” (Ouspensky, 1931). Ouspensky believed that such as we are, relative to our limited self-consciousness, the human being is almost wholly dependent upon accident.

The law of accident he defined as the intersection of two lines of events or a combination of circumstances which are not a result of intentional action or fate. Fate, for Ouspensky, was anything inherent or with which the individual was born with, including birth and death as unintended consequences, biological or genetic endowments such as physical and intellectual capacity, as well as our ancestry, including genetic or biological vulnerabilities. He equated the phenomena of will with intentionality and stated that “if we had will, then through this alone we should know the future, because we should then make our future, and make it such as we want it to be” (Ouspensky, 1920). “for the purposes of classification, every intentional action of another person may be called the result of this person’s will” (Ouspensky, 1949).
Behavior Change

Existential Awareness
Knowledge that we are actively pursuing a course of lifestyle change consistent with a change in our belief about our behavior

(Objective-Consciousness)

Emotional Awareness
Knowledge of the characteristics and attributes of a problem behavior and its negative impact on self and others. This level of awareness represents a change in our feeling about our behavior

(Self-Consciousness)

Cognitive Awareness
Knowledge of the existence of a problem behavior. This level of awareness represents a change in our thought about our behavior and confronting patterns of denial

(Waking-Consciousness)

Sleep
The concept of will as distinct from accidental living is given by Rollo May in his book “The Discovery of Being”. Quoting Nietzsche he writes:

“The near-most essence of Being,” Nietzsche writes, “is will to power.” ... The phrase “will to power” means self-actualization...The “will to power” is a call to man to avoid the putrescence and to affirm himself in his existence with strength and commitment. The “will to power” is built into every individual because it is inseparable from life itself. “Wherever I found life,” writes Nietzsche, “there I found the will to power.” His concept of “will to power” implies the self-realization of the individual in the fullest sense. It requires the courageous living out of the individual’s potentialities in his own particular existence...Kaufmann succinctly summarizes Nietzsche’s belief ... Man’s task is simple: he should cease letting his “existence” be “a thoughtless accident.” (May, 1983).
This was also an important therapeutic ingredient for other theorists such as Viktor Frankl, who insisted that voluntary choice and the act of striving toward meaning is a more accurate picture of the human experience than that of the analytical conceptualization of individuals as essentially drive dominated.

An unbiased observation of what goes on in mankind when oriented toward meaning would reveal the fundamental difference between being driven to something on the one hand and striving for something on the other.

It is one of the immediate data of life experience that human beings are pushed by drives and pulled by meaning, and this implies that it is always up to the individual to decide whether or not to fulfill the latter. Thus, meaning fulfillment always implies intentional and proactive decision making (Frankl, 1969).
Carl Rogers places the philosophy of will within the context and contrast of the paradox of freedom and determinism. Speaking of this dilemma in the therapeutic relationship he said:

... some of the most compelling subjective experiences are those in which the client feels within himself the power of naked choice. He is free – to become himself or to hide behind a façade; to move forward or to retrogress; to behave in ways which are destructive of self and others, or in ways which are enhancing; quite literally free to live or die, in both the physiological and psychological meaning of those terms...He wills or chooses to follow the course of action which is the most economical vector in relationship to all the internal and external stimuli, because that is the behavior which will be most deeply satisfying. But this is the same course of action which from another vantage point may be said to be determined by all the factors in the existential situation. Let us contrast this with the picture of the person who is defensively organized. He wills or chooses to follow a given course of action, but finds that he cannot behave in the fashion that he chooses. He is determined by the factors in the existential situation, but those factors include his defensiveness, his denial or distortion of some of the relevant data. Hence it is certain that his behavior will be less than fully satisfying. His behavior is determined, but he is not free to make an effective choice. The fully functioning person, on the other hand, not only experiences, but utilizes, the most absolute freedom when he spontaneously, freely, and voluntarily chooses and wills that which is also absolutely determined (Rogers, 1961).
According to Albert Bandura, to be an agent is to intentionally make things happen by one’s actions. Agency embodies the endowments, belief systems, self-regulatory capabilities through which personal influence is exercised. The core features of agency enable individuals to play a decisive part in their self-development, adaptation, and self-renewal in a dynamic and changing social environment.

The predominate features of the agentic perspective include:

1. Intentionality
2. Forethought
3. Self-reactiveness
4. Self-reflectiveness
The concept of “functional consciousness” is a characteristic of the social cognitive theory of Albert Bandura and relates to the issue of personal agency.

The change processes that relate to the evolution of consciousness or the progression of awareness about problem behavior is essentially the process in which conscious awareness becomes functional as it involves a purposive assessment and evaluation of information in order to plan and carry out a course of action.

Functional consciousness as an element of personal agency proposes that individuals do not just undergo life experiences, but are in fact agents of those experiences and as such determine the meaning and direction of their own actions, including the action of change.
The Hero Motif – Awakening from Conventional Slumber

• Every hero must first accept the call to adventure, whether that adventure is a challenge-by-choice or something initially unwanted that occurs as a result of a mistake or blunder.

• Mentally ill offenders may either intentionally or inadvertently, through choices that place them within the jurisdiction of the criminal justice system, blunder into an unwanted adventure.

• However, usually once charged, the possibilities of either escape or avoidance are often out of reach and the defendant must now decide the context of their circumstance, whether their approach will be to refuse the call to adventure and either actively or passively resist the challenge, or whether they will accept the challenge and proceed through the hero’s quest as a committed participant.
• Every hero must first accept the call to adventure, whether that adventure is a challenge-by-choice or something initially unwanted that occurs as a result of a mistake or blunder on the part of the hero.

• Although the hero motif is both mythological and metaphorical in nature, its utilization as a model for growth and development relative to the issues of functional responsibility and accountability are clearly applicable. It is important for every defendant to understand that the activity of criminal conduct and the avoidance of mental health treatment is the antithesis of heroism and represents a problematic path that leads to a destination of predicament.

• The structure and operation of the mental health court through the use of the hero motif attempts to reframe the defendant’s predicament within the context of possibility. Through committed participation lies the possibility of judicial resolution, the possibility of social restoration, the possibility of functional rehabilitation, and the possibility of personal recovery. The pursuit of these opportunities through the process of accountability is the hero’s adventure.
Every hero must pass the first threshold and survive a succession of trials. The threshold of the mental health court is representative of the referral and eligibility process and is the boundary between the known world of the defendant and the unknown territory of the mental health court program.

Once the mental health court participant crosses into the realm of therapeutic jurisprudence they will essentially encounter a series of trials and tasks that ultimately prepare the individual to achieve metaphorically, the mythological goal, and in reality the goal of program graduation that merges the success of judicial rehabilitation with the success of clinical rehabilitation.

The trials of program participation are intended to move the participant along an ascending continuum of growth and development toward personal recovery.
• Every hero must return with the trophy and begin the labor of bringing the runes of wisdom back into the kingdom of humanity, where the boon may redound to the renewing of the community (Campbell, 1949).

• In the mythology of the hero motif it is not sufficient merely to accomplish the quest. No true hero retains the benefits to the exclusion of others or hordes the prize in dedication to self-interest.

• As indicated previously, successful graduates of the mental health court program are expected to contribute something in return to the court and/or community. As the mental health court graduate arrives at an awareness of the personal gains as a result of the program journey, the true spirit of the return is one’s bestowal of these gains to the society in which they reside.

• These acts of restoration complete the process of accountability and fulfill the participant’s journey. As indicated previously, the activities of advising, peer mentoring, education, consultation, and orientation are ways in which the graduate is able to focus attention to the benefit of others and bring their own experience to fruition.
PART 5
Mental Health Court Program Development
Infusion of the Stage Paradigms
Program Phase I

- Stage of Assimilation
- Stage of Change
- Stage of the Hero’s Quest
- Anticipation
- Pre-contemplation
- Departure
# Phase I Stage Conceptualizations

<table>
<thead>
<tr>
<th>Stage</th>
<th>Description</th>
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<tr>
<td><strong>Anticipation</strong></td>
<td>• <em>Program referral, application, introduction and initiation.</em></td>
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<tr>
<td><strong>Pre-Contemplation</strong></td>
<td>• <em>Little to no thought about behavior change.</em></td>
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<tr>
<td><strong>Departure</strong></td>
<td>• Accepting or rejecting the call to adventure.</td>
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Phase I (Anticipation phase) - Three months minimum

Phase I represents the entry phase of the program in which the participant goes through the referral process, legal and clinical screening for program acceptance, becomes informed about program requirements, enters a plea agreement, completes a mental health court observation period, and develops and initiates an individualized plan for mental health recovery. This phase involves serious contemplation about personal change and preparation for commitment and action to alter patterns of self-defeating thought and behavior.

Phase I is the call to adventure so to speak, and departure on the quest to embrace legal responsibility and accountability, work through the trials of criminal justice, and move along the path of mental health recovery.
Program Phase II

- Phase II
- Stage of Assimilation
- Stage of Change
- Stage of the Hero’s Quest
- Encounter
- Contemplation
- Initiation / the road of trials
• **Phase II** (Encounter phase) - Three months minimum

• Phase II represents the encounter phase of the program in which participants demonstrate a higher level of commitment and motivation. In this phase, participants work closely with the mental health court and treatment team to refine their treatment goals and objectives and begin a more intensive level of group and individual psychosocial and functional skill development.

• Phase II represents the work of preparation for personal change. This involves identifying and developing organized steps for personal recovery and development of objectives for education and possible employment. Preparation is a rehearsal for action as participants begin the process of substituting healthy activities for unhealthy ones, continuing to build confidence in decision-making, and looking more toward a successful future rather than focusing on a problematic past.
Program Phase III

Phase III

Stage of Assimilation

Stage of Change

Stage of the Hero’s Quest

Metamorphosis

Preparation / Action

Initiation / Apotheosis / the ultimate boon
- **Phase III** (Transformation phase) - Three months minimum.

- Transformation refers to full engagement and committed participation where participants begin to self-initiate program activity and engage in self-directed recovery. In this phase, the program participant undergoes the transformation of attitude, perspective, and motivation, necessary to move toward the intentional fulfillment of program requirements. Participants at this phase demonstrate greater contributions of thought, talent, creativity, and individuality in pursuit of self-determined success.

- Finally, phase III represents the stage of action in modifying personal patterns of self-defeating behavior that have been contributing factors in criminal conduct. This phase requires a greater commitment of time and energy and a greater demonstration of intent and activity dedicated to behavior change, community re-integration, and establishing and maintaining appropriate social, educational, vocational, as well as wellness oriented personal support systems.
Program Phase IV

Phase IV

Stage of Assimilation
Stage of Change
Stage of the Hero’s Quest
Disengagement
Maintenance
Return
• Phase IV (Disengagement phase) six months minimum

• Phase IV is a pre-graduation phase, where the participant must independently demonstrate a commitment to sustained behavior change prior to receiving an actual reduction or dismissal of charges. The process of disengagement also involves a return of community investment primarily through the activity of mentoring. Phase IV participants may work directly in peer support activities to assist other participants through the mental health court program.

• In Phase IV the participant demonstrates a period of autonomy where there is less supervision and monitoring by the court and more expectation for independent self-directed activity. Sustaining progress is the true measure of mental health court success which requires personal motivation to maintain the behavior changes and achieved during the course of the program and to continue in active mental health treatment without any micromanagement from the court.
Phase 1 includes the initial program referral, clinical and legal screenings, mental health assessment, initial court appearances, treatment planning, and participation in specific courses of treatment as prescribed by the treatment team.

Phase 2 is where new participants begin to perceive clear discrepancies between their preconceptions of the program and actual judicial and rehabilitative engagement and encounter, where treatment and wellness planning takes more specific shape and direction.

Phase 3 represents a metamorphosis or the transition to full engagement and committed participation where the participant begins to self-initiate program activity and shift from indifference or passivity to a more proactive level of empowerment and self-determination.

Phase 4 represents the completion of the participant’s journey and eventual disengagement from the program. Work in this stage is to establish and maintain habits of health and wellness and reinvest these personal gains through community service and reintegration.
Suggested Reading


