The Citizenship Project Part II: Impact of a citizenship intervention on clinical and community outcomes for persons with mental illness and criminal justice involvement.
Clayton A., O'Connell M.J., Bellamy C. et al.
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This US study found that among people with serious mental illness and a history of criminal justice involvement, an intervention intended to foster citizenship through peer mentoring, education and activities, reduced alcohol and drug use and enhanced quality of life and satisfaction with social, leisure and work activities.

SUMMARY This US study assessed the effectiveness of an intervention based on a theoretical framework of citizenship at reducing psychiatric symptoms, alcohol and drug use, and increasing quality of life for people with serious mental illness and a history of criminal justice involvement.
Recruited through mental health and social welfare services, 114 adults with these characteristics (70% had co-occurring psychiatric and substance use diagnoses) participated in a trial which randomly allocated them to a four-month citizenship intervention versus usual services.

The citizenship intervention matched participants to peer mentors who helped them identify goals and set priorities for achieving them, sharing their own coping strategies and lessons learned as people working on their own recovery, and advocating for participants’ access to social services, employment, education, and housing. Citizenship classes aimed to enhance participants’ problem-solving and other life skills for daily living, their abilities to establish social networks based on mutual trust and shared interests, and their knowledge of community resources. After completing the classes, participants drew on their life experiences and class learning to design and participate in an eight-week ‘valued roles’ exercise that encouraged them to ‘go back’ to the community, also teaching other community members that the participants can fulfill valued roles in society. Valued-role projects were determined by participants themselves, with input from fellow students (as participants in the project were called) and consultation with the project director and peer mentors. Upon completion of the citizenship intervention, a ‘Citizenship Graduation Ceremony’ was held at the city’s city hall. Family members, friends, and mental health and other professionals, were invited to attend.

Relative to how participants scored before the intervention and to a control group offered usual services, analyses assessed the degree to which the intervention had affected quality of life, psychiatric symptoms, trust in major institutions such as police and the legal system, and substance use. Assessed six and 12 months later, at both or either of these times participants allocated to the citizenship intervention reported significantly increased quality of life, greater satisfaction with and amount of social, leisure and work activities, higher satisfaction with work, and reduced alcohol and drug use. However, they also reported increased anxiety/depression and agitation at six months (but not 12 months) and significantly increased negative psychiatric symptoms (specifically, disorientation and emotional withdrawal) at 12 months. Race, sex and criminal justice status did not significantly affect the impact of the intervention.

Findings suggest that community-oriented, citizenship interventions for people with serious mental illness and a history of criminal justice involvement may facilitate improved clinical and community outcomes in some domains, but some negative clinical findings suggest the need for post-intervention support for intervention participants.

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