

Sample Student Writing: Literature Review

Grade this student received on this assignment: A+

Positive aspects of this work: this is a well-researched, nicely-organized, and clearly written literature review, which does a terrific job exploring the key debates in the literature on this topic—while effectively grouping the scholarship around a points of consensus and contention among scholars on this topic—developing substantive summaries of the different scholars’ works, and providing proper citations with page numbers.

Problem-areas with this work: the student only cites eleven of the sources provided in the bibliography and some of the student’s citations still lack specific page numbers (as opposed to citing all the pages of the work).

Literature Review Overview

As a result of the drastic uptick in incarceration rates at both the state and federal level since the late-1970’s, and especially since the late-1980’s, there has been increasing focus on the methods related to reducing prison populations. The growing interest in this subject is primarily the result of two sets of concerns. Firstly, there are a host of legitimate ethical concerns regarding the inequity with which certain demographic groups, more than others, have become perpetually ensnared in the criminal justice system. Put simply, persons of color and citizens from relatively poorer economic backgrounds are overrepresented in prison populations. Secondly, in a climate of ever-increasing budget constraints, brought on by competing priorities ranging from transportation infrastructure to education, it has become progressively more unsustainable, from a cost perspective, to continue to carry such large prison populations. While the former concern certainly deserves attention, I will primarily conduct my research and couch my policy recommendations within the context of economic outcomes. The content of the policy conversation, at least within Governor Hickenlooper’s administration and iterations of state agencies, actively assumes the need to address demographic disparities in reducing prison populations. Further, concerns related to engendering the buy-in of various stakeholders (e.g., agency staff, legislators, and voters) in Colorado generally demand any criminal justice reform efforts provide cost-savings for the state. As such, any policy recommendations that do not take these concerns into account will likely fail to be implemented. The literature, more often than not, acknowledges this reality through a discussion of the economic costs or benefits of programs aimed at reducing prison populations.

Therefore, the paper will be especially devoted to exploring how prison populations can be viably reduced specifically in Colorado, where the criminal justice system is still used to house those with mental health disorders who have not committed a crime. As such, special attention will be paid to the diversion models implemented in other states relating to those within the criminal justice system that have been diagnosed with a mental health issue. While the bulk of the literature on this topic agrees on the need to reallocate these populations away from a prison setting, it disagrees on the most appropriate policy tools to do so. Similarly, there is a gap in the available literature regarding the mechanisms causing the continuous, cyclical transferring of mental-health-diagnosed citizens between prison and health care settings. The literature related to methods used in reducing prison populations helps underpin my claim that the best way to reduce prison populations in Colorado will be to end the overreliance on prisons as a means to house and treat Coloradans with mental health disorders. However, due to the high-needs nature of this population, and its attendant high rates of recidivism, any efforts that do not include bolstering both community corrections and health care infrastructure will likely prove inadequate in improving recidivism rates and lowering

systemic criminal justice system costs. Finally, the literature is especially quiet, in terms of an extended discussion of the infrastructure strains generated from shifting populations from prison to a community and/or health care setting. This literature review will highlight this dearth of infrastructure improvement recommendations, and, therefore, justify the usefulness of my eventual recommendations.

Section one of this literature review will present the background of the problem of growing prison populations facing many states, as discussed in the literature, as well as desirable policy outcomes (i.e., cost savings and/or public safety). Section two will contain a treatment of disagreements in the literature regarding the efficacy of diversion programs. Section three will outline the divisions in the literature regarding mandated versus nonmandated diversion programs. Section four will discuss differences in literature regarding where communication improvement efforts should be focused. Finally, I will conclude by briefly summarizing the relevant points made throughout this literature review, as well as by reiterating the gaps in the literature that were previously discussed with each respective piece.

Section 1: Background of Rising Prison Populations

Rates of incarceration and total prison populations have been on the rise in the U.S. since the late-1970's. This trend accelerated rapidly during the 1980's as a tough-on-crime approach to legislation swept the nation. 1994's Violent Crime Control and Law Enforcement Act further cemented this legislative approach at the national level, effectively tying the hands of judges and lawyers via mandatory minimum sentencing. Mandatory minimum sentencing imposes specific lengths of sentences, respectively, onto various types of crimes. Daniel Patten explains how these changes had a deeply scarring impact on the national psyche of the American public, engendering widespread support for what was becoming an increasingly retributive criminal justice system. Patten points to the proliferation of tough-on-crime legislation even as the majority of crime rates (e.g., violent crime, property crime, etc.) were dramatically falling. Further, the author argues that the United States, even in the context of falling crime rates, is misallocating resources in spending more on its criminal justice system than its education system. Crucially, this poor management of financial resources, Patten posits, is simply exacerbating the problem of increasing prison populations, rather than working to mitigate it.¹ Therefore, a change in what the general public came to define as the central purpose of the criminal justice system, namely, that locking up criminals was an end unto itself, only hastened the growth of prison populations in the U.S. even further.

While these attitudinal changes regarding the criminal justice system were, in part, driven by policy makers, policy makers were also responsive to these changes in their efforts to mitigate prison population growth. Elizabeth Deschenes and Susan Turner explore the policy response by the State of Minnesota, with origins dating back to the late 1980's. Deschenes and Turner discuss the need, in making programs aimed at reducing prison populations politically viable, to design population reduction programs in such a way that the offender's punishment is seen as appropriately retributive. The authors describe Minnesota's program, which was community based and implemented with an awareness of political viability in mind, as one that included strict supervision, employment conditions, substance (i.e., drug and alcohol) testing, and victim reparation requirements, etc. Deschenes and Turner highlight how these strict supervision guidelines impacted the selection criteria for offender eligibility for Minnesota's program. A large percentage of offenders for Minnesota's program were either not qualified (due to their higher level of perceived risk to the public in community, versus prison, settings) or chose not to apply. The authors go on to discuss how

¹ Patten, Daniel. "The Mass Incarceration of Nations and the Global War on Drugs: Comparing the United States' Domestic and Foreign Drug Policies." *Social Justice* 43, no. 1 (January 2016): 86.

either case (i.e., those not qualified *and* those choosing not to apply) meant that Minnesota's program was perhaps not as effective as it could have been, in the absence of such strict program criteria, in reducing prison populations and systemic costs. However, data reporting requirements built into Minnesota's program meant policy makers became aware of this problem and, over the course of two to three years, amended the program accordingly to better achieve population and cost reduction goals. Ultimately, Minnesota's program was more effective at reducing prison costs, while being less impactful in curtailing rising prison populations.² Deschenes and Turner fail to include in their discussion a treatment of the state's mental health infrastructure. Minnesota failed to fund, in parallel with their community corrections diversion program, an increase in dedicated mental health care infrastructure (e.g., hospitals, psychotherapists, etc.). Without such an increase, those suffering from mental illness would still essentially remain in a purely correctional setting, regardless of whether they are in prison or supervised within the community. In other words, Minnesota's failure to reduce its prison population may be due to the fact that it did not provide appropriate levels of health care to its offenders in diversion programs. Therefore, the authors may be attaching too much blame to the inadequacies of Minnesota's diversion program, and not enough to Minnesota's failure to enhance their mental health infrastructure.

Minnesota's ability to improve cost-outcomes without necessarily reducing prison populations is by no means unique. This suggests that this may be a failure not only of policy, but of the ways in which policy is formulated and implemented. In illustration of this point, Edith Coakley offers three possibilities. Firstly, Coakley posits that these failures may be Kafkaesque in nature. Coakley proposes that bureaucratic barriers, such as failures in eliciting the buy-in of agency staff and leadership, may be delaying the successful implementation of reforms aimed at reducing prison populations. Alternatively, Coakley argues that there may be ideological resistance on the part of those working in the criminal justice system towards convicts receiving taxpayer funded benefits over-and-above basic benefits inherent to prison settings (e.g., housing, food, basic health care). This resistance may be undermining the implementation of alternative placement or diversion programs in that institutional actors may be preventing certain candidates from placement in these programs. Finally, Coakley references Robert Behn's concept of the "tacit knowledge problem," which suggests that policy makers are not as effectual as they should be in constructing programs that are both potent and politically viable. According to the tacit knowledge problem, policy makers have a tendency to want to export successful programs from other states for implementation within their own states. However, contextual differences between states frequently preclude those programs' success.³

It is not just policy makers, however, who contribute to the problem of increasing prison populations. Forbes Earl et al. argue that the actions of law enforcement can play just as big a role in reducing prison populations as policymakers can. The authors scrutinize the impact of training programs for law enforcement officials that are aimed at improving outcomes resultant of interactions between law enforcement and citizens with mental health disorders. The authors, in analyzing the results of this particular community outreach program (at nine and fifteen month intervals), find that better training for law enforcement officers led to lower rates of involvement in the criminal justice system (i.e., incarceration) for those suffering from a mental illness. Training efforts within this program were geared towards teaching law enforcement officials best practices for interacting with the mentally ill. These practices emphasized peaceful de-escalation followed by transportation to a mental-health care professional for more specialized treatment. Over time, the

² Deschenes, Elizabeth Piper, and Susan Turner. "A Dual Experiment in Intensive Community Supervision: Minnesota's Prison Diversion and Enhanced Supervised Release Programs." *Prison Journal* 75, no. 3 (September 1995): 330.

³ Coakley, Edith. "Mental Redemption: How Transitional Services Win the Fight Against Crime." *Kennedy School Review* 10, (January 2010): 14-15.

authors of the study found that increasing the efficacy of law enforcement, in terms of communicating and interacting with the mentally ill, is associated with a corresponding decrease in a community's prison population.⁴ In other words, if law enforcement in a given region is ill-equipped to deal with individuals with mental illness, then that region's prison populations are likely to increase, irrespective of the reform efforts of policymakers. However, Earl et al., in their recommendations, do not prescribe (beyond the mere presence of mental health professionals) the minimum infrastructure required to complement the increased efficacy of law enforcement officials in communicating with mentally ill members of their community. This is problematic in that their conclusions imply prisons populations can effectively be reduced merely by increasing law enforcement training. Colorado, a state that actively employs such training programs (at least within urban law enforcement agencies), still struggles with rising prison populations (especially in urban prisons). As such, their study is incomplete, since it makes no efforts to describe what concurrent efforts, in addition to law enforcement training, need to be made.

Section 2: To Divert or not to Divert

While there is some evaluation, in the literature, of the different outcomes and mechanisms related to diversion in a court setting, versus a prison setting, most attention is paid to diversion programs themselves. Program analysis ranges from assessing diversion generally, to more specifically contrasting the two types of diversion programs. In their discussion of diversion within court settings, Lisa Callahan et al. argue that treatment courts (e.g., courts dealing specifically with drug offenses or those with mental health disorders) are appropriate in their aim both to reduce recidivism as well as steer individuals towards community based programs. In this way, the authors warrant that diversion programs are effective in their prison population reduction goals. The authors outline the history of these courts, describing their increase in number from the late-1980's through to today. This growth, argues Callahan, has been fueled by an expanding appetite, on the part of the general public, to see judges adjudicating cases within that particular judge's scope of expertise. This piece goes on to describe the disparate methods used to achieve a reduction in prison populations. Specifically, the prevalence, in terms of utilization by judges, of seven types of sanctions and six types of incentives is evaluated. Similarly, outcomes associated with various sanctions and incentives are documented. Ultimately, the authors are concerned with how effective these courts are at reducing prison populations and, therefore, focus on the use of prison as a type of sanction. They find that three-quarters of the courts within the study used prison as a sanction in only roughly one-fifth to one-third of all cases. Meanwhile, one-quarter of these courts do not use prison as a sanction at all. Therefore, Callahan et al. cautiously conclude that judges in treatment courts are contributing to reduced prison populations. However, the authors also highlight the same problems related to program eligibility and self-selection that Deschenes and Turner do in their discussion of Minnesota's diversion program. Here, Callahan et al. note that many offenders' cases are deemed ineligible for trial within treatment courts or, simply, that many offenders choose not to have their case heard outside of a traditional court. In that way, it is possible that these treatment courts are not truly diverting offenders from prison, and thereby not reducing prison populations, since these courts are largely hearing cases that would likely have resulted in a community corrections sentence, or no sentence at all, in a traditional court.⁵ Callahan et al. do not discuss how the availability of well-funded and properly constructed diversion programs, dedicated to the needs of those suffering from mental health issues, may impact on the decision making of treatment court judges. In other words, the authors do not control for the availability of effective programs for these judges to divert offenders

⁴ Earl, Forbes, et al. "Neighbourhood Outreach: a Novel Approach to Liaison and Diversion." *Journal Of Forensic Psychiatry & Psychology* 26, no. 5 (October 2015): 578.

⁵ Callahan, Lisa, Henry J. Steadman, Sheila Tillman, and Roumen Vesselinov. "A Multi-Site Study of the Use of Sanctions and Incentives in Mental Health Courts." *Law and Human Behavior* 37, no. 1 (2013): 1.

into. Arguably, a state's policy making decisions in this area (e.g., providing funding, or not, for mental health-dedicated beds within hospitals, etc.) would play a crucial role in allowing judges to work more actively towards reducing prison populations.

Conversely, Henry Steadman et al. conclude that, precisely because of these issues of self-selection and eligibility criteria, it is difficult to affix a unifying descriptive or explanatory model to outcomes associated with treatment courts. The authors note that there is wide variance, in terms of acceptance criteria and trial outcomes (i.e., prison placement or diversion into community settings), across treatment courts. Some mental health courts set a lower bar for the minimum level of mental health diagnosis (i.e., type of mental illness) they will accept than others. Further, Steadman found that some courts favored particular demographics (e.g., older, white females) over others, while demographics held little significance, in terms of outcomes, in other courts. Crucially, most treatment courts reflect the values of the state, and sometimes city, in which they are located.⁶ In this way, Steadman et al. rebut the qualified claim, that treatment courts can be shown to reduce prison populations and that diversion programs are an appropriate policy tool in that regard, made by Callahan et al. Steadman, however, is squarely in the minority in terms of advocates against diversion programs. Again, however, similar to Callahan et al., Steadman et al. do not control for the availability of viable mental health diversion infrastructure, which may be impacting the treatment court outcomes they describe.

Section 3: Mandated versus Nonmandated Diversion

From this point, amongst those that argue in favor of diversion programs, the literature diverges in terms of preference for mandated, versus nonmandated, diversion. Elizabeth Deschenes and Susan Turner, as well as James Bonta et al., argue in favor of mandated diversion programs. Deschenes and Turner contrast outcomes from Minnesota's diversionary Intensive Community Supervision (ICS) and their parole based Intensive Supervised Release (ISR) program. The ICS program falls into the mandated category of diversion programs. Deschenes and Turner posit that mandated diversion typically entails such features as house arrest or community supervision, regular substance (i.e., drug) tests, regular meetings with health care professionals, licensed social workers, and probation officers, as well as social skills/job training classes.⁷ Deschenes and Turner, in addition to delineating admissions criteria for both ICS and ISR, found the ICS to be more effective than ISR from a cost-savings and public safety (i.e., reduced rates of recidivism) standpoint. As noted in the previous discussion of the Deschenes and Turner piece, health care infrastructure is somewhat excluded from their conversation.

James Bonta et al., in examining a community based diversion program, advocate (with qualified optimism) for the effectiveness of restorative justice efforts, a common mainstay of mandated diversion programs. As such, their supportive position towards mandated diversion programs is less enthusiastic than is the position taken by Deschenes and Turner. Restorative justice, for Bonta, is a means of bringing resolution to the victims of crime by building, in collaboration with lawyers, judges, offenders, and finally the victims themselves, a rehabilitation plan. This highly structured aspect of restorative justice programs, for Bonta, is precisely why such programs are commonly found within mandated diversion efforts. However, restorative justice initiatives, the authors caution, commonly place too much focus on the victim, without giving enough concern to rehabilitating the offender. This lack of attention to the offender does nothing to address the

⁶ Steadman, Henry J., et al. "From Referral to Disposition: Case Processing in Seven Mental Health Courts." *Behavioral Sciences & The Law* 23, no. 2 (March 2005): 215-226.

⁷ Deschenes, Elizabeth Piper, and Susan Turner. "A Dual Experiment in Intensive Community Supervision: Minnesota's Prison Diversion and Enhanced Supervised Release Programs." *Prison Journal* 75, no. 3 (September 1995): 330-356.

underlying cause of the criminal behavior, especially from a mental health standpoint, and will therefore not ultimately address an offender's odds of recidivating. However, Bonta et al. did find that restorative justice programs found within mandated diversion initiatives, flawed as they may be, still reduce recidivism rates and prison populations more than prison incarceration does.⁸ Here, as with previously discussed authors, Bonta fails to account for the presence, or lack thereof, of mental health infrastructure. Such infrastructure may be the tool that would allow for an increased focus on the offender, thereby addressing Bonta's concerns regarding the common shortcomings of restorative justice schemes.

Nahama Broner et al. and Don Stemen et al., in arguing for nonmandated diversion, impart words of caution for those who view mandated diversion as panacea for the problem of rising prison populations. In studying a mandated diversion program in New York City, Broner finds that there is a negative correlation between treatment and recidivism rates. In other words, the more treatment an offender receives, the less likely he or she is to recidivate. However, Broner also finds evidence that offenders are less likely to enroll in treatment if they are aware that they are required to do so. Therefore, mandated diversion programs, in which various requirements are clearly defined and progress is regularly and strictly monitored, may lead to offenders receiving less treatment. This may reduce the chances of that offender successfully reintegrating into society, resulting in their return to prison. As such, Broner argues that nonmandated diversion programs, replete with looser guidelines and monitoring requirements than their mandated counterparts, actually result in offenders receiving more treatment. This means that nonmandated diversion programs, for Broner, would reduce recidivism rates (and therefore prison populations) more than mandated diversion programs.⁹ The Broner piece, then, is in the minority in the literature in that it is one of the rare pieces that directly discusses the impact and availability of health care infrastructure. However, New York City's infrastructure availability and needs is vastly different to Colorado's, where, for example, the availability of beds dedicated to mental health treatment is one of the lowest in the nation. As such, even as Broner discusses the impact of mental health treatment, this discussion is not necessarily germane to the specific context of Colorado and, as such, is lacking in terms of its applicability to Colorado.

Similarly to Broner, Stemen finds evidence, from a study of the outcomes of a law in Kansas (Senate Bill 123), that mandated diversion programs may lead to higher rates of recidivism. Stemen acknowledges, however, that it is unclear if these higher rates of recidivism are due to failures within Kansas' mandatory diversion program, or if they are due to increased incidences of technical violations. In this acknowledgment (that outcomes of Kansas' diversion program may be influenced by alternative variables), Stemen et al. differentiate themselves from Deschenes and Turner (who, as previously discussed, failed to account for the possibility of such variables in their analysis of Minnesota's diversion program). A technical violation occurs not when an offender commits a crime, but when they violate some term of their program (e.g., they miss one job training class, etc.). Thus, it may be that the increased rates of recidivism found in Kansas are for relatively innocuous occurrences, rather than an intrinsic shortcoming in the mandatory diversion program itself.¹⁰ However, Stemen, in placing the blame for Kansas' recidivism rate on harsh enforcement of technical violations, does not discuss the impact of mental illness on those technical violations. In other words, perhaps Stemen et al. did not go far enough in their identification of alternative variables. Kansas'

⁸ Bonta, James, et al. "An Outcome Evaluation of a Restorative Justice Alternative to Incarceration." *Contemporary Justice Review* 5, no. 4 (December 2002): 319.

⁹ Broner, Nahama, Damon W. Mayrl, and Gerald Landsberg. "Outcomes of Mandated and Nonmandated New York City Jail Diversion for Offenders with Alcohol, Drug, and Mental Disorders." *Prison Journal* 85, no. 1 (March 2005): 18-49.

¹⁰ Stemen, Don1, and Andres F.2 Rengifo. "Reconciling the Multiple Objectives of Prison Diversion Programs for Drug Offenders: Evidence From Kansas' Senate Bill 123." *Evaluation Review* 35, no. 6 (December 2011): 642-672.

government, especially within the last five to ten years, has expressed a clear preference for relatively large tax cuts, relatively smaller government, and significantly less funding for education and health care infrastructure. Arguably, increased funding for mental health infrastructure in the state would help improve behavioral outcomes for those within Kansas' diversion program, thereby reducing the number of technical violations and improving recidivism outcomes. Further, Stemen et al. fail to account for ongoing efforts made by Kansas towards increased interagency cooperation (e.g., cooperation between the Department of Corrections and the Department of Commerce as facilitated by the Kansas Offender Risk Reduction and Re-entry Program (KOR3P)).

Section 4: Importance of Interagency Communication versus Improved Communication between Law Enforcement and Health Care Providers

The piece by Sung Hung-En and Steven Belenko speaks to the impact of state-level interagency agreements that Stemen et al. overlook. Hung-En and Belenko argue that successful programs will seek to build interagency cooperation, continuously look to evaluate programs based on progress towards clearly stated goals, and frame those goals in an apolitical way.¹¹ Note, with the last component, echos of the importance of political viability that was also highlighted in the writings by Deschenes and Turner, Coakley, and Patten. Hung-En and Belenko make their case by using the example of New York's Drug Treatment Alternative-to-Prison

(DTAP) program. The authors claim that this program's success is grounded in the buy-in, across multiple agencies, of staff and leadership. This buy-in was generated very early in the policy planning process, which facilitated a program that reflected the intersecting needs of different state agencies. Further, this increased the sharing of institutional knowledge amongst agencies that, previously, communicated little on such matters. This increased communication improved recidivism outcomes when DTAP was ultimately implemented. For example, the New York Department of Corrections had an open channel of communication with the New York Department of Health, which allowed for the seamless transfer of medical records. This facilitated the providing of mental health treatment, without any gaps between incarceration and release, thereby reducing recidivism rates. Here, similar to the Broner piece, the reality of New York's health care infrastructure is far different than Colorado's. Similar gaps, therefore, are present in this piece as those discussed in the Broner writing.

Tom Mason, in contrast to Hung-En and Belenko, places more importance on improving relationships between law enforcement officials and health care providers than on improving interagency cooperation. Mason details the importance of building more effective transportation and communication mechanisms between the criminal justice side and the health care side. Mason's piece argues for the importance of investing in security in health care facilities that accept diverted offenders. Further, Mason discusses the benefits of creating a diversion system that diverts offenders earlier in the process, via the court system (as advocated by Callahan et al.) rather than after they have been incarcerated (as argued by Deschenes and Turner, Bonta et al., and Stemen et al.). Mason makes this argument, in part, based on evidence that court diversion is more likely to result in treatment (the importance of which is highlighted by Broner et al.), leading to lower recidivism rates. In contrast to the previously discussed authors, however, Mason finds evidence that incarceration in prison settings, due purely to the negative aspects associated with such settings, can lead to the onset of mental health issues.¹² Mason does, potentially, focus too much of his discussion of health care infrastructure improvements on security concerns. As previously discussed, Colorado's needs do not

¹¹ Hung-En, Sung, and Steven Belenko. "From Diversion Experiment to Policy Movement: A Case Study of Prosecutorial Innovation." *Journal Of Contemporary Criminal Justice* 22, no. 3 (August 2006): 220-240.

¹² Mason, T., and P. Woods. "Admission trends to a special hospital: court diversion and prison transfers." *Journal Of Psychiatric & Mental Health Nursing* 5, no. 6 (December 1998): 479.

primarily lie in security but, rather, in other infrastructure shortcomings, especially bed space.

Section 5: Summary

The literature almost universally agrees that prison populations are rising to the point of threatening the sustainability of state budgets. Further, much of the literature acknowledges the need for solutions to this problem to be politically viable. With many states turning to diversion programs to reduce their prison populations, this eye towards political viability may necessitate programs with relatively stricter monitoring and testing regimes. In terms of failed efforts in reducing recidivism, there is some variance in the literature as to whether deficiencies associated with some policy making practices, as opposed to lack of training for law enforcement officers, are more to blame. Similarly, some authors argue that court diversion and thus, implicitly, diversion in general, is effective. Others, conversely, argue that diversion programs only focus on low risk offenders that would have left the criminal justice system sooner (or perhaps never entered in the first place), were it not for diversion programs. These authors, therefore, argue that diversion programs fail in their efforts to reduce prison populations. Within the majority of scholarship that favors diversion programs, there is disagreement as to whether mandated or nonmandated diversion is best at reducing recidivism rates. This dispute hinges in part on whether or not one type of diversion leads to increased mental health treatment than the other, and whether that treatment focuses sufficiently on addressing the root motivation of the original offense. Further, it partly relates to the strictness of enforcement mechanisms regarding technical violations. Finally, there is a lack of concurrence regarding the importance of improving interagency communication versus improving communication between law enforcement officials and health care providers.

Crucially, much of the literature fails to take into account health care infrastructure. This failure has arguably led to several possible shortcomings in the authors' various pieces. It may have led some authors to misidentify the primary causal factor leading to undesirable recidivism outcomes. Similarly, it may have caused some authors to take a less favorable view of diversion programs than perhaps those programs deserve. Further, the effectiveness of some policy tools, such as training for law enforcement officials, may be overstated. This "infrastructure gap" may have also caused some authors to arrive at an incomplete understanding of the behavior of treatment court judges. Finally, even those pieces that do acknowledge, even to a small degree, the relevance of health care infrastructure to diversion programs' efforts to reduce prison populations, do not offer any insight into Colorado's unique health care landscape. When taken collectively, this infrastructure gap invites further research towards the potential benefits associated with concurrent investment in health care infrastructure improvements and diversion program efforts.

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