APA Recovery to Practice Curriculum

11. Forensic Issues II
Forensic & Related Issues II: Interventions, Transition Planning, Follow Up

Essential Components of Recovery Service Provision are Missing in Most Criminal Justice Settings:
- Respect
- Autonomy
- Person centered
- Evidence based practices

To Break the Cycle of Incarceration, Release, Symptom Exacerbation, and Re-incarceration:
- Mix of services
- Designed for and with the individual
- Tailored to his or her complex needs

Many Complex Dynamics in Such Settings – Requires Resources not Typically Available
Interventions for People with Serious Mental Illnesses in the Criminal Justice/Forensic System

- Where provided, medication – often too much
- Currently only provided in the best facilities – social learning programs to improve adaptive behaviors
- Clinical interventions adapted for justice involved population:
  - Forensic Assertive Community Treatment
  - CBT
  - Concurrent Disorders Treatment
  - Supported Housing

**Essential & critically needed** for this population:
- Trauma informed & specialized services
Forensic & Related Issues II: Interventions, Transition Planning, Follow Up

Forensic Assertive Community Treatment (FACT)

- Distinguished from ACT in four ways:
  - Participants have criminal justice histories
  - Preventing arrest and incarceration are explicit outcome goals
  - Majority of referrals come from criminal justice agencies
  - Supervised residential treatment is incorporated into the program

Supported Housing

- Usually offered together with FACT
- Considered important for keeping people connected to treatment and out of the justice system
Cognitive Behavioral Therapy (CBT)

Implements interpersonal functioning & reduces impact of substance misuse

Considered essential for those with conduct disorders & antisocial personality disorder

Aims:

- Control anger, reducing aggression
- Impulsivity, violent behavior
- Maladaptive patterns of thinking
- Associations with pro-drug and antisocial peers
- Poor social skills
Concurrent Disorders Treatment

Extremely high rate of co-occurring substance abuse and mental health disorders among forensic/criminal justice populations

Treatment widely recognized as essential

Components include:
- Psychotropic medication
- Motivational interviewing
- CBT interventions

Providers must:
- Engage the person and encourage commitment
- Take steps to ensure continuity of care from one setting to another
- Provide comprehensive services
- Provide on-going assessment and services tailored to the needs of each individual

SAMHSA GAINS Center, Treatment of People with Co-occurring Disorders in the Justice System (undated)
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Trauma Informed Specialized Care

- Severe trauma is so prevalent that it is considered the norm for this population – virtually 100% for women
- Many have developed extreme coping strategies
- Requires specialized professional training
- For women, especially important and NOT in mixed group!
Trauma Informed Specialized Care, cont’d

Components:

- Learning skills for coping with anxiety (such as breathing retraining or biofeedback) and negative thoughts (cognitive restructuring)
- Managing anger
- Preparing for stress reactions (stress inoculation)
- Handling future trauma symptoms
- Addressing urges to use alcohol or drugs when trauma symptoms occur (relapse prevention), and
- Communicating and relating effectively with people (social skills or marital therapy)

Trauma Informed Specialized Care is essential for this population!
Mental Health Courts

- Specialized court dockets:
  - Deal exclusively with people with mental health disorders in the criminal justice system
  - Combine community treatment services with criminal justice supervision
  - Provide a range of high intensity interventions needed by this population

Mental health courts hold promise of helping individuals remain out of the forensic/criminal justice system and achieve a stable and satisfying life in the community
Transition Planning and Follow up - Essential but Usually Lacking

Inadequate transition planning puts people with co-occurring disorders who enter jail in a state of crisis back on the streets in the middle of the same crisis.

The period immediately after release is critical – the first hour, day or week can determine success or failure - high intensity interventions that support the person during this time are essential.

Without immediate monitoring and follow up many miss the first crucial health and social service appointments:

- Do not have medications
- End up on the street
- Quickly return to the criminal justice/forensic system
If People with Serious Mental Illness in the Criminal Justice and Forensic Systems are to Succeed

WE MUST PROVIDE:

- Complete range of clinical and justice related interventions aimed at ensuring best psychological treatment, proper housing, and successful employment for those who can work
- Superior transition planning
- Help with medical and mental health follow up
- Community integration that diminishes stigmatization
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Citation for the full Curriculum:


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