

Youth Forensic Mental Health

A Comprehensive System of Care
Approach

Definitions – Youth Forensic

- Young people with a mental illness who come before the courts (i.e. have a live legal issue)
- Young people within the criminal justice system who have or develop a mental illness

Core Principles

- Every young person suffering from a severe mental illness should have equitable and timely access to high quality mental health care.
- No subgroup should be actively excluded
- More complex presentations require integrated multiagency collaboration to achieve meaningful outcomes

Why a Separate System of Care?

- inadequate screening and assessment
- lack of training, staffing and programmes necessary to deliver mental health services within the juvenile justice system
- lack of funding and clear funding streams to support services
- confusion across services/agencies at both the policy and practice levels as to who should be responsible for providing service to these youth
- a lack of research that adequately addresses the level and nature of mental health disorders experienced by these youth and the effectiveness of treatment models and services.

- *“Whilst the Criminal Justice System is notoriously bad at detecting these needs, CAMH Services are also not good at meeting them even once the right people have been referred. Providing for these young people within existing services should not imply any major changes in types of provision, but they do imply the need for improvement in interagency communications, understanding and delivery that is tailored to the stage in the Criminal Justice System at which the young person is engaged”.*

Prevalence

- Elevated rates for:
 - Conduct disorder
 - ADHD
 - Depression, Bipolar disorder
 - Anxiety disorders, PTSD
 - AOD use disorders
 - Psychosis
- 15% have severe mental illness

Youth Offenders

- Most studies show between 40-60% prevalence of mental illness (excluding conduct disorder)
- One study – 52% had 3 or more axis 1 diagnoses
- 60-80% AOD use disorder

- Adolescents who commit serious offences are much more likely to have a broad range of psychological and social problems.
- Over 80% will have discontinued formal education (95% from incomplete local data)
- Link between untreated mental illness and recidivism

“without addressing mental health needs, the bottom line is that criminal justice interventions will not successfully address re-offending, and young people will not be successfully reintegrated into their communities or develop into well functioning adults”.

Incarcerated Youth

- 10% have a psychotic illness
- 15% severe affective disorder
- Cohort 1829 youth in detention centres
 - 65% males, 75% females had ≥ 1 Axis I disorder (excluding conduct disorder)
 - 15% received treatment in detention, 8% as outpatients on release
- 7x mortality rate of general population

NZ Data

- YJ North facility:
 - 56% suffered psychiatric disorder (higher in females)
 - 76% AOD use disorder
- >2 times general population, yet don't gain access to assessment or treatment (MoH 2008)

- 50-70% YJ population Maori (70-90% in midland region).
- High rates of:
 - Mental illness
 - Complexity, comorbidity
 - Substance abuse (75%), dependence (30%)
 - Transition to Adult Forensic Services

System of Care - Components

- Effective care for severe mental illness
- Kaupapa Maaori approach
- Youth court liaison (screening) and reporting (S333)
- Inreach to youth units in prisons, Youth Justice residences/facilities
- Community youth forensic MH care
- Secure Youth inpatient forensic MH care
- Liaison with CAMHS's, CYFS, Probation, Police, A&D services, EI services

Court Liaison - Screening

- 80% youth diverted (AA, FGC)
- Goal is to screen all youth in youth court
- Pre-appearance identification and screening
 - Police, CYFS data (YOTS)
 - Court staff (youth court lists)
- Use of screening instruments (Te Kupenga, MAYSI-2)
- Advice to court re need for s333, referral

Section 333 Reports

- Court ordered in depth assessments
- Focus on needs of young person within clear legal context
- Competence/fitness
- Relationship between illness and offending
- Disposition/treatment needs
- Risk
- Obligations of report writer

FGC Liaison

- Presentation of S333 findings, with permission of court
- Consultation and liaison re mental illness to inform FGC plans/outcomes
- Shared decision making re treatment provision involving multiple providers
- Facilitation of referral for treatment

Referral for Treatment Provision

- Service coordination role
- Treatment recommendations
- Liaison/education role with treatment providers (eg CAMHS, AOD, YHT)
- Mental Health, AOD, Dual Diagnosis

Specialist Community Care

- High quality mental health care for severe mental illness
- Need for assertive follow up and case management, focus on engagement, developmentally appropriate, systemic whanau based interventions with strong consultation & liaison capacity
- ?specialist or CAMHS role
- Access is key issue

Youth Detention Inreach

- Midland Region
 - Waikeria Prison Youth Unit
 - 40 youth aged 14-17yrs
 - No screening, assessment or treatment
 - No data on ethnicity, illness or outcomes
 - Springhill Prison Youth Unit
 - ? Provision for 40 youth
 - No arrangements for cover
 - Midland Region YJ Residence (2010)
 - 40 beds initially

- Clinic based
- Reception MH screening
- Consultation liaison with prison staff, corrections primary care service
- Capacity for acute response
- Capacity for transfer to secure IPU

Secure Inpatient Facility

- Cannot develop a safe and effective system of care without an inpatient facility
- Not appropriate to utilise general adolescent IPU or adult forensic IPU
- Difficult, complex and often severely unwell population presenting high levels of risk.
- Often prolonged admissions

Multi Agency Liaison

- Youth Advocates (Lawyers)
- Youth Court officials (Judges, registrars, managers)
- CYFS FGC coordinators, YJ case workers
- Police Youth Aid
- CAMHS, other treatment providers
- Education
- MoH, Adult Forensic Services

Ngaa Ringa Awhina – Te Ara Kaupare

- Multiple referral sources
- Pre appearance screening
- Court Liaison
- S333 report writing
- FGC Liaison, multi-agency liaison
- Prison Youth Wing inreach
- Training – Certificate in Kaupapa
Maaori Youth Forensic Mental Health

YOUTH FORENSIC SYSTEM OF CARE

