



Young People, the Criminal Justice System and Mental Health: What's Our Plan?

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Mental health in the general population (young people) in Ireland

According to research published by RCSI (Royal College of Surgeons in Ireland) (2013) one in five young Irish adults aged 19-24 and one in 6 young people aged 11-13 were experiencing mental disorder at the time they took part in two HRB-funded studies on mental disorders among Irish youth.

The research also found that experiencing mental ill-health in early life places young people at increased risk of further episodes of mental ill-health during their adult years (2013).

Criminalisation of the mentally ill?

People with mental illness are significantly overrepresented in the criminal justice system. Many policy makers and practitioners have labelled this phenomenon the 'criminalisation of the mentally-ill' (Ringhoff et al, 2012).

This holds true for young people in the youth justice system (McCormick et al, 2014). A recent study in the area of youth justice in Ireland found that a significant cohort of young people with mental health difficulties are being 'managed' in the youth justice system – ad hoc diversionary model (Quigley, 2015).

Criminalisation of the mentally ill young people?

'I can think of a number of my clients where really if we had the possibility of doing a hospital order, that would be where they should be and if you want to detain somebody it should be to deal with their mental health issues'.

'if therapeutic supports were put in place it wouldn't have been necessary [criminal justice intervention] but they hadn't been put in place and they're not achievable so ehmmm. I feel your ehmmm the child is being let down to the criminal justice system, to detention putting it bluntly, and I get really distressed about that. I actually get personally distressed about it.'

'if you take an analogy of a cliff and you have a barrier to stop people heading towards the edge and you have a barrier at the edge and you have the ambulance at the end. The Children's Court is the ambulance at the end. Right, we're there with the [sic], hoping that we can bounce the child off destruction but they have already passed through several barriers before they get to that point.'

Adults in prison in Ireland

Research conducted in 2009 on psychiatric morbidity within the male prison population indicated prevalence rates for psychosis of –

- 5.1% for remand prisoners
- 2.6% amongst the sentenced population

The prevalence rates for major depressive disorders was found to be similar for both the remand and sentenced populations

- 4.5% and 4.6% respectively

Schizophrenia and organic psychoses were the most common psychoses and the findings of the study overall indicate there is significant psychiatric morbidity in Irish committal prisoners (Kennedy et al, 2009).

Adults on probation in Ireland

Probation Officers conducted a total of 6,018 LSI-R assessments in 2012 on 4,884 clients nationally.

Cotter (2015) analysed the responses to five questions specifically targeting psychological or psychiatric functioning

It emerged that -

- 33.7% of clients assessed in 2012 responded as having had 'mental health treatment in the past'
- 15.8% were engaged in some form of psychiatric treatment at the time of the assessment
- 12.6% identified as requiring a psychological assessment
- 3% were identified as having an active psychosis
- 30.8% were classified as experiencing 'moderate interference', meaning they were assessed as exhibiting some signs of distress, mild anxiety, or mild depression

What about young people?

Lack of comprehensive prevalence data in Ireland regarding young people with mental health in contact with the criminal justice system

Particularly in the area of non-residential young people

Recent review of 100 pre-sentence reports in Ireland showed that young persons' mental health was discussed in 38% of reports (Quigley, 2014)

International studies vary - suggest that the prevalence rate is approximately 50% (Wasserman et al, 2005)

Some studies have found higher – 67% (Wasserman et al, 2004); 69% (Wasserman et al, 2002); 69% (Teplin et al, 2002); 70% The National Centre for Mental Health and Juvenile Justice (NCMHJJ)

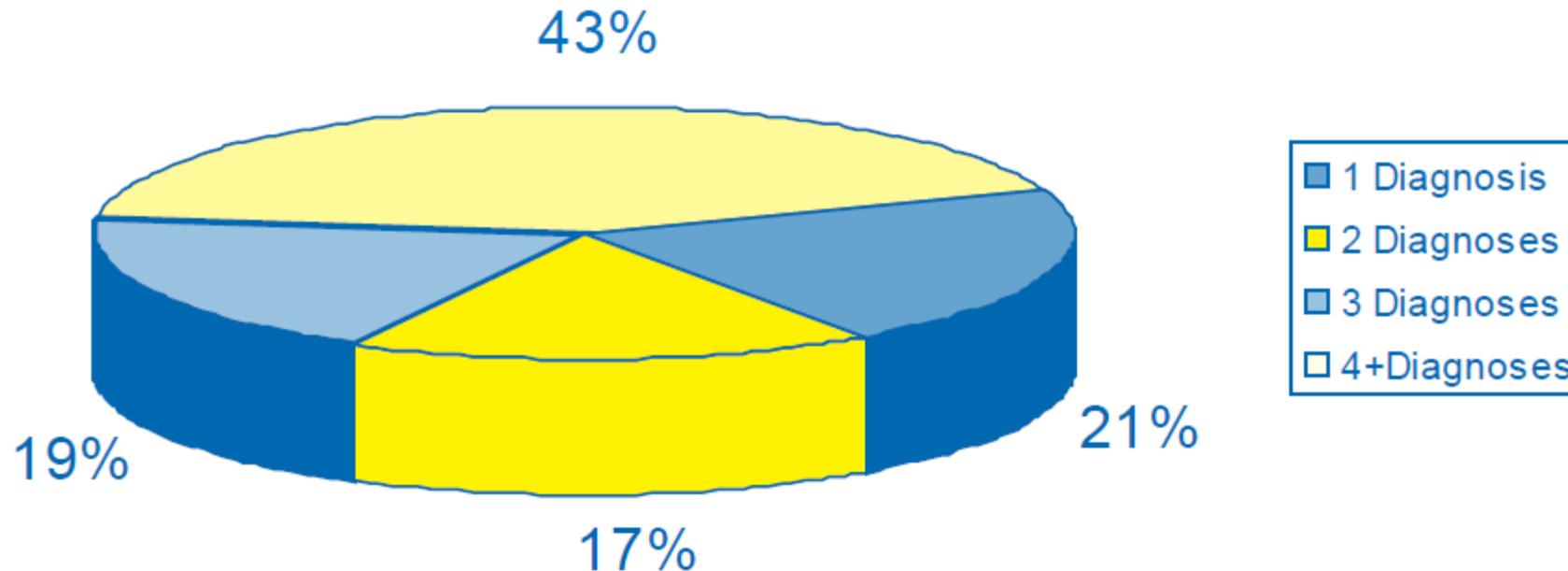
Internationally (particularly the US) there is a move towards exploring mental health difficulties through screening and assessment instruments

National Centre for Mental Health and Juvenile Justice (NCMHJJ) Study

- 1,400 young people
- 29 different programmes
- The majority of young people included in the study who met criteria for DSM-IV diagnosis - met the criteria for multiple disorders
- 79% who met the criteria for one disorder actually met the criteria for two or more
- Over 60% were diagnosed with three or more mental health disorders
- Study found that these young people often had a complex diagnosis – with a large percentage (61%) also having the complication of substance misuse
- Finally, prevalence of severe mental health disorder has been difficult to measure as a result of definitional issues – it is estimated that it around the 20% mark

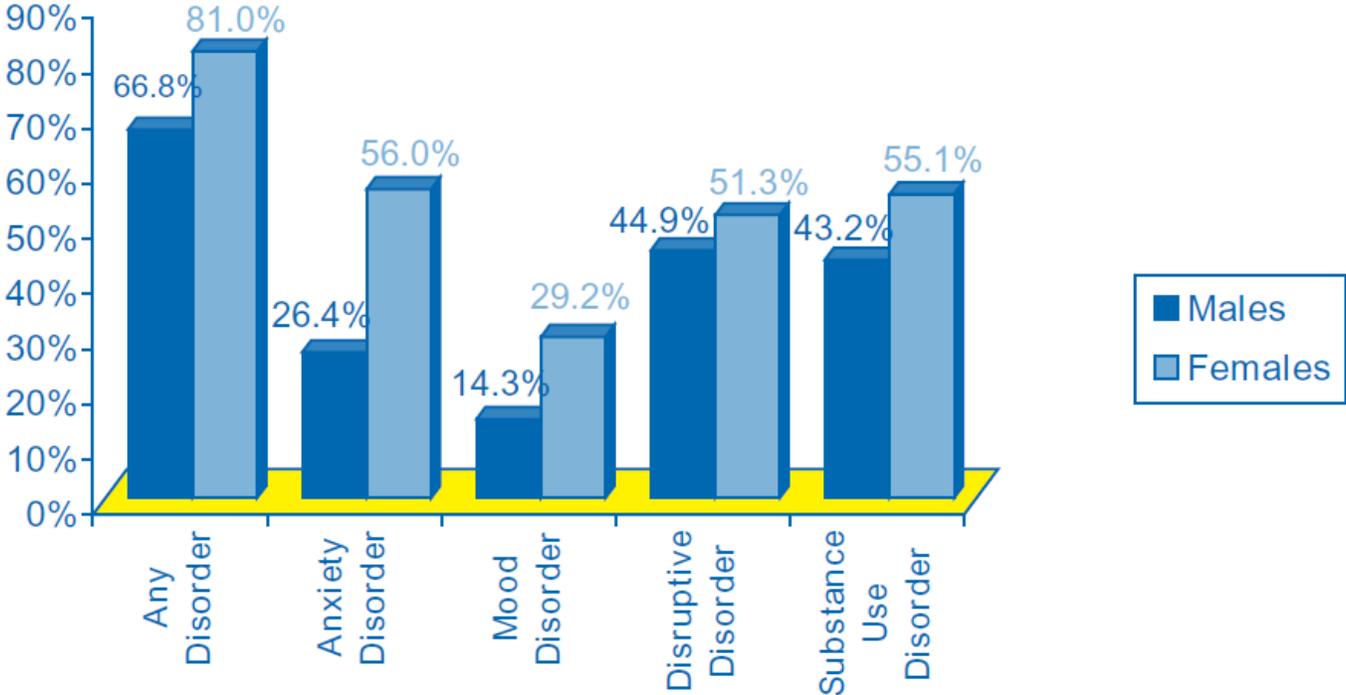
National Centre for Mental Health and Juvenile Justice (NCMHJJ) Study

Figure 1. Number of diagnoses among youth with at least one disorder.



Gender breakdown

Figure 2. Prevalence of mental health disorders among males and females in the juvenile justice system.



What can be done?

Targeted diversion of youth with mental health disorders to mental health treatment

Justice and social service agencies work together to divert young people from the criminal justice system into the mental health treatment system

Studies in the US have reported increased effectiveness amongst programmes which incorporate behavioural programmes and psychotherapy when compared to programmes which rely upon deterrence, vocational training and wilderness programmes (Lipsy, 1999)

Special Needs Diversionary Programme – US

- Mental health providers and specially trained probation officers
- Family participation was required
- 3-5 contacts per week with the treatment team
- Caseloads per team were limited to 15 young people
- Young people engaged with the team for 4-6 months (average 4.5 months)

Evaluation – (Cuellar et al, 2006)

148 participants

Those enrolled had lower probability of being re-arrested during the year following the programme (predicted number of re-arrests 0.86 [on programme] compared with 1.54 [not on programme])

What can be done?

England –

Youth Justice Liaison and Diversion (YJLD)

Mainly for young people who may have mental health and developmental problems

Two main aims of the programme –

- Improve access to specialist mental health services, through Child and Adolescent Mental Health Services (CAMHS)
- Divert young people from the youth justice system towards personalised packages of health and social care

Evaluation –

- 870 young people
- Whilst there was no significant difference in re-offending rates between those who engaged with the service when compared to those who did not those involved took longer to re-offend across 2 intervention sites
- 580 days vs 334 days; 220 days vs 84 days
- An improvement in mental health and well-being was found amongst the intervention cohort

What about Ireland?

1. Prevalence in Ireland
2. Develop and pilot a mental health diversionary scheme
3. Evaluate effectiveness – re-offending and mental health
4. With a view to scale up and roll out



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Thank you

Questions.....

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