



# Getting Out and Staying Out – the additional recovery challenges for forensic service users

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# Plan

- Introduction to study
- What we did
- How we did it
- What we found out – introduction to the GOSO recovery challenges
- Limitations of the study

# Making recovery a reality in forensic Settings (2014)

“Recovery for people with a mental illness in secure services is identical to mental health recovery”

.....Offence specific interventions

# Consultation to find question

- Carried out a consultation inviting patients living in the community.
- Outcome was:
  - What do patients in secure units need to prepare them for living in the community?
- .....we also had a team.....

# Participatory Study

Systematic inquiry with the collaboration of those affected by the issue being studied, for the purposes of education and of taking action or effecting change (Mercer et al., 2008).

# What we did preparation

- Training of service user researchers
  - Research skills
  - Interview skills
- Developed interview schedule
- University (FREGC), Ethics (REC) and Research and Monitoring (RAMC) approvals gained.

# What we did – participants

- Interviewed 6 participants
- Semi structured interview with three key questions:
  - What was it like in hospital?
  - What was your preparation for discharge?
  - What is it like living in the community?

# Data analysis

Three stage process:

1. Read each interview individually and discussed as a group

## 2. Identified broad categories

- Attitude through hospital
  - Work
  - Social inclusion
  - Relationships with staff patients
  - Offence
  - Disclosure
- What to do  
Medication  
Preparation for discharge  
Relationships with  
Relationships with family  
Difference to the mainstream

# Framework analysis (Ritchie and Spencer 2002)

Category: Relationships with staff	Your reflections
Treating me like a normal person and reaching out and actually communicating. 2.2	
The staff were great; there were very few members of staff that were just in it for the money. 3.1	
They forgive you, they don't judge you, they know exactly what you've done. 5.1	

# An example of a completed framework

Category: Disclosure	Framework Analysis SUR responses and discussion	Final distillation of responses: Key issues emerging
<p>I heard the other day that I'm obliged to give any potential employer some details as to my forensic history. I've been involved in drugs violence and I don't think people want to hear about that in my opinion. 1.2</p>	<p>True Has only just learned about this – not had a chance to think it through and plan.</p>	<p>Disclosure is an issue to consider with all contacts, not just when looking for employment.</p>
<p>I said I need a job and he said “what can you do?” and we got talking and within 5 minutes I'd declared all my forensic history to him and then it fizzled out and I got nowhere and I walked away thinking ouch, I didn't need to tell. 2.1</p>	<p>Learn from mistakes all have experiences of disclosing too quickly – unnecessary disclosure he doesn't know what the person is going to do – possibly made himself a target.</p>	<p>Disclosure of the offence is more difficult than disclosure of mental illness.</p> <p>Patients need to be prepared so they are less likely to disclose inappropriately</p>
<p>Not too bothered about disclosing about mental health. It was a bit more difficult about the ABH and assault. 3.1</p>	<p>People more accepting of mental health problems generally the offence is the problem.</p>	
<p>You don't want to be open, disclose to everyone, which I did in the beginning. I used to be open and true to people and they didn't want to know. So I'm at a little bit of a loss at the moment. 5.1</p>	<p>Drip feed information about yourself to new people – with everyone you meet it is a judgement of how much you say and when.</p>	

# Findings

Themes generally similar to mental health recovery

However

The fact that individuals had committed an offence rather than the specifics of the offence itself impacted on all aspects of mental health recovery making each aspect of recovery more complex.



All participants wanted to get out  
and stay out of hospital

# Getting Out and Staying Out (GOSO) Recovery Challenges

The additional challenges that a forensic service user may need to address as part of their mental health recovery. This can be due to their history of offending or another aspect of the secure pathway such as the hospital length of stay.

# GOSO Recovery Challenges: Good relationships

Good Relationships	Mental Health Recovery	GOSO Challenges
Staff acceptance	Staff acceptance of mental health difficulties (Onken et al., 2002)(W. Brown & Kandirikira, 2007).	Staff acceptance of both mental illness and offence
Family	Strain on relationships due to the stresses of mental illness symptoms (SIMS, 2014)(Tsang et al., 2002)(Lin, Kirsh, Polatatajko, & Seto, 2009)	Family relationships affected by both the mental illness and impact of the offence. <ul style="list-style-type: none"> <li>• Mental illness symptoms</li> <li>• Stigma of the offence</li> <li>• Length and location of stay makes it difficult to stay in contact (Canning et al., 2009)</li> </ul>
Friends	Impact of mental illness on friendships (MHF 2012) <ul style="list-style-type: none"> <li>•Mental illness symptoms</li> <li>•Stigma of mental illness</li> </ul>	Friendships interrupted by <ul style="list-style-type: none"> <li>• Length of stay in hospital</li> <li>• Stigma of the offence</li> <li>• Mental illness symptoms</li> </ul>

# GOSO Recovery Challenges: Occupation

Occupation	Mental Health Recovery	GOSO Challenges
Meaningful occupation	Sustaining links with education, and continuity with valued activities encouraged throughout admission (Nagle et al., 2002)(Shimitras et al., 2003b)	Community life, e.g. work education, leisure stopped due to length of stay and location of in-patient settings.  Need to identify valued activities in the community and re-establish links. (Lin et al., 2009).
Work	Employment continuity contributes to mental health recovery and is valued. (Boardman et al., 2003).	Employment valued and contributes to mental health and reducing risk of reoffending (Samele et al., 2009).  Employment options restricted due to offence.

# GOSO Recovery Challenges: Social Inclusion

Social Inclusion	Mental Health Recovery	GOSO challenges
Stigma	<p>Experience stigma due to mental illness</p> <p>(Moldovan, 2007)(Repper &amp; Perkins, 2003)</p>	<p>Experience stigma due to mental health and offence history.</p> <p>In addition experience stigma within the Mental Health community</p>
Disclosure	<p>Need to consider disclosure of mental illness</p> <p>(Venville, Street, &amp; Fossey, 2014) (Corrigan, Morris, Michaels, Rafacz, &amp; Rüsck, 2012)</p>	<p>The strategy of being open to the staff team, which contributes to discharge, needs to be adapted on discharge.</p> <p>Legal obligation to disclose offence history in seeking employment.</p> <p>In social situations need to consider disclosure of mental illness and offence history</p>

# GOSO Recovery Challenges: Offence related

Offence related	Mental Health Recovery	GOSO challenges
Discharge to a new location	n/a	Ordered by court to be discharged to a new location. Need to build a life in a new setting. <small>(Drennan &amp; Alred, 2012).</small>
Retribution from victims	n/a	Anxiety related to the possibility of meeting victims or victim's families and the prospect of retribution.
Fear of recall	n/a	Worry about being recalled to hospital

# Conclusions

- Recovery for service users of forensic services is not identical to recovery for people with mental illness.
- Having an offending history has an impact on all facets of mental health recovery.
- By identifying these additional challenges we can begin to see the scale of the task
- We can also help people in secure settings be more prepared for living in community

# Limitations

- Only 6 participants, all white males so a small scale study
- Suspect this is just the tip of the iceberg
- Need to carry out similar studies with different groups:
  - Women
  - Ethnic groups
  - Sexual orientation
  - Disabilities
  - Urban and rural settings