



Provincial Human Services and Justice Coordinating Committee Quarterly Newsletter February 2013

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Provincial HSJCC News 

Provincial HSJCC Co-Chairs Update

The petite, young woman is talking to herself as she walks so fast that she almost is running. Her clothes are woefully inadequate in the winter cold. She sees a woman ahead of her and hits her in the back as she runs past her. "I hate you, you mother ****." She sees two men and does the same action of spiteful words with a harsh knock on their backs. Across the street a man is at an outside bank machine and she goes over to him while he is taking out his money. The first woman that was hit grimaces as she sees the violence escalating and is using her phone to call for help. The young woman disappears around a corner as the other woman has made a call for help.

Why do you belong to a human services and justice committee? Is it to make sure that when a call for help goes into the system that the recovery journey of this young woman does not start in a jail cell? That is what drives my passion for our mandate. By the way, the scenario described above was real and I was the woman who was hit. My phone request was for a mental health intervention. I knew that this person would be more likely to get the assistance she required because of the work of the HSJCCs.

This is my last note to you as Co-chair of the Provincial Human Services and Justice Coordination Committee. We have come a long way since the funding announcement was done by Jim Cyr at the first provincial conference for the HSJCC community members held in Kingston in the autumn of 2004. That conference was sponsored by the HSJCCs in the Southeast area because there was no provincial table. When the announcement was made that \$499,000 would be made available for all the existing tables and a provincial table, our initiatives reached a major milestone. For over six years, I have served as the Chair or Co-Chair of this industrious group of representatives from across the province, provincial ministries and key partners. The small group of individuals on the steering committee has assisted greatly but the work has grown at an alarming pace demonstrating that if we want to effect change more responsibly, we need to have dedicated staff people.

Our group has grown, produced several reports, initiated a biannual conference, advocated for more local funding, received funding for knowledge exchange and provided opportunities to share concerns and opportunities. With the gift of a part time policy staff person seconded from CMHA Ontario, we have been able to move work ahead efficiently and effectively. But our local and regional HSJCCs and others are asking for more from our provincial group. For the past year we have been diligently working on a new format of our Committee that will ensure that future endeavors can be successful and involve the many people who want to assist. As we move into the next phase of our development, I hope that we will continue to hold close the passion that brought us together in the first place.

Why are you involved in a HSJCC? Remember this as we move forward on changes that will maximize our group's effectiveness in our shared vision; the cause of ensuring that people have options in our health system rather than placements in justice environments.

Vic Huehn
Frontenac Community Mental Health and Addiction
Services

 **Update from the Communications and Knowledge
Transfer Committee (CKT) Chair**

The recent HSJCC webinar - Strategies for Community Service Providers for Engaging in Communication with Correctional Facilities in Ontario – was a great success. Within days of it being announced, all slots were booked, and a waiting list was started. For the many people who were unable to attend live, the webinar is now available online at the new [HSJCC Community of Interest](#) site. Our next webinar will be in March, and will provide some highlights of the current review on Police – Emergency Room protocols that the HSJCC is conducting. When registration opens, please book early. We expect to have another waitlist for this webinar, so if you register and are unable to attend, please cancel so we can open up space for someone else. Thanks to [EENet](#) for their assistance with these webinars.

Save the date for the HSJCC conference, November 25-27, 2013, in Toronto. The conference always offers a wide variety of informative and educational opportunities. If you're interested in sharing your expertise, the [Call for Abstracts](#) has just been issued.

If your organization has any events related to mental health, addictions, developmental disabilities, fetal alcohol spectrum disorder, acquired brain injury, or any aspect of the justice system, please send them to me, and I'll make sure it's posted to the HSJCC website. We're also interested in sharing any news items, press releases, or academic articles on any of these topics.

Finally, if you're reading this because someone forwarded it to you, feel free to contact me to have your email added to the distribution list.

Trevor Tymchuk – trevor@afewthings.ca

Chair, Communications and Knowledge Transfer
Committee
Chair, Northeast Regional Human Services and Justice
Coordinating Committee

 **Northern Ontario Hospital ER Stigma Project – Mental Illness and Addictions: Understanding the Impact of Stigma**

In an effort to curb stigma, the Northern office of the Centre for Addiction and Mental Health (CAMH) is embarking on a project entitled *Mental Illness and Addictions:*

Understanding the Impact of Stigma. The intention of this anti-stigma project is to improve the experience of people living with mental illness and addictions by enhancing health care professionals' knowledge and understanding of the negative impact of stigma on patient-care outcomes.

[http://www.hsjcc.on.ca/Uploads/Northern%20Ontario%20Hospital%20ER%20Stigma%20Project%20\(CAMH\).pdf](http://www.hsjcc.on.ca/Uploads/Northern%20Ontario%20Hospital%20ER%20Stigma%20Project%20(CAMH).pdf)

News Media

Not Criminally Responsible Reform Act. Government of Canada. February 8, 2013.

On February 8, 2013, Prime Minister Stephen Harper announced the introduction of the Not Criminally Responsible Reform Act.

Bill C-54:

<http://www.hsjcc.on.ca/Uploads/Bill%20C-54.pdf>

PMO releases:

<http://www.hsjcc.on.ca/Uploads/Not%20Criminally%20Responsible%20Reform%20Act.pdf>

<http://www.hsjcc.on.ca/Uploads/Government%20of%20Canada%20introduces%20the%20Not%20Criminally%20Responsible%20Reform%20Act.pdf>

CBC news:

<http://www.hsjcc.on.ca/Uploads/Tories%20introduce%20new%20bill%20for%20mentally%20ill%20offenders.pdf>

Police, psychiatrist improve response to mental health calls. CBC News. January 17, 2013.

A pilot project in Ottawa teams a doctor with police officers to reduce the number of calls for police that result in people with mental-health concerns either being sent to emergency rooms or being arrested. The newly formed team is made up of one psychiatrist, Dr. Peter Boyles, and

two medical residents who work and ride along with four officers with the Ottawa police mental health unit.

<http://hsjcc.on.ca/Uploads/Police,%20psychiatrist%20improve%20response%20to%20mental%20health%20calls.pdf>

 **'Neurolaw' changes the landscape of criminal responsibility – or does it? Vancouver Sun. Part I. December 8, 2012.**

A lot of questions are raised about the interaction between neuroscience and law, questions that the burgeoning field of study known as "neurolaw" is tasked with asking and answering. Questions like, will neuroscience ultimately force us to accept a revolutionary new conception of criminal responsibility, or to do away with the concept altogether?

Alternatively, will neuroscience help us to design appropriate sentences for offenders, or to predict and ultimately reduce their chances of reoffending? Will we one day be able to read people's minds, to tell if they're lying or in pain or simply thinking bad thoughts? And what should we do with such knowledge?

<http://www.hsjcc.on.ca/Uploads/Neurolaw.pdf>

 **The ethical minefield of using neuroscience. Vancouver Sun. Part II. December 10, 2012.**

On the evening of March 10, 2007, Abdelmalek Bayout, an Algerian citizen living in Italy, brutally stabbed to death Walter Perez, a fellow immigrant from Colombia. According to Nature magazine, Bayout's defence argued that he was mentally ill at the time of the offence. The court accepted that argument and, although it found Bayout guilty of the crime, imposed on him a reduced prison sentence of nine years and two months.

Bayout nevertheless appealed the judgment, and the Court of Appeal ordered a new psychiatric report. That report showed, among other things, that Bayout had low levels of the neurotransmitter monoamine oxidase A (MAO-A) — an important development given that previous research discovered that men who had low MAO-A levels and who had been abused as children were more likely to be convicted of violent crimes as adults.

<http://www.hsjcc.on.ca/Uploads/The%20ethical%20minefield>

[d%20of%20using%20neuroscience%20to%20prevent%20crime.pdf](#)

 **Neuroscience offers a glimpse into the mind – and our future. Vancouver Sun. Part III. December 10, 2012.**

Hassan Rasouli recently accomplished a remarkable feat: He lifted his thumb in a way that suggests he was making a thumbs-up gesture. The feat was a remarkable one since doctors at Sunnybrook Health Sciences Centre in Toronto had diagnosed him as being in a persistent vegetative state (PVS), a mysterious condition in which patients appear to be awake but show no clinical signs of conscious awareness.

<http://www.hsjcc.on.ca/Uploads/Neuroscience%20offers%20a%20glimpse%20into%20the%20mind%20%E2%80%94%20and%20our%20future%20%28Part%203%20of%203%29.pdf>

 **Cops and mental health issues collide in CBC's Toronto set-series "Cracked". Canadian Press. January 7, 2013.**

Damaged but brilliant cops seem to be a staple of prime time procedurals these days, but few TV detectives appear as unhinged as CBC's latest anti-hero on "Cracked".

<http://www.hsjcc.on.ca/Uploads/Cops%20and%20mental%20health%20issues%20collide%20in%20CBC%27s%20Toronto-set%20series%20%27Cracked%27.pdf>

 **Ontario Ombudsman to investigate province's services for adults with developmental disabilities in crisis. Media Release. November 29, 2012.**

Ontario Ombudsman André Marin today announced an investigation into the province's services for adults with developmental disabilities who are in crisis situations, after several desperate families complained their loved ones risked being sent to homeless shelters or jail because there was nowhere to care for them.

<http://www.hsjcc.on.ca/Uploads/Ontario%20Ombudsman%20to%20investigate%20province%E2%80%99s%20services%20for%20adults%20with%20developmental%20disabilities%20in%20crisis.pdf>

 **□ President's Proposal on Gun Violence Includes Mental Health Provisions**

President Barack Obama's proposal to curb gun violence in the U.S., released Wednesday, also includes mental health provisions. Among them:

- Finalizing requirements for health insurance companies to cover mental health services
- Clearing the way for states to make mental health information available in background checks
- Training additional mental health professionals and teachers to help identify mental illness early and refer people to treatment

In addition, the President seeks to clarify that the healthcare law doesn't mean that physicians can't ask patients about whether they have guns in the home.

[White House proposals](#) (Free)

[Statement by HHS Secretary](#) (Free)

[Washington Post chart outlining proposals](#) (Free)

 **Mental health program finds success. Sudbury Star. December 29, 2012.**

After just two months, a new community crisis model for dealing with people with mental health issues is seeing twice as many people as it did last year.

<http://www.hsjcc.on.ca/Uploads/Mental%20health%20program%20finds%20success.pdf>

 **Lawyer asks if sleep deprivation was part of Ashley Smith's punishment. Canadian Press. January 21, 2013.**

Ms. Smith strangled herself in the isolation cell at the Grand Valley Institution, in Kitchener, Ont., in October 2007. Mr. Simoes, the prison official who led jurors on a tour of the facility last week, described photographs of the segregation cells, including the one in which Smith died. Lawyer Julian Falconer noted there were no differences between the cells that housed mentally-ill inmates and others. He also pointed out the steel cot in the segregation cell, and asked whether authorities use sleep deprivation as punishment.

<http://hsjcc.on.ca/Uploads/Lawyer%20asks%20if%20sleep%20deprivation%20was%20part%20of%20Ashley%20Smith%E2%80%99s%20punishment.pdf>

 **Guards confused, conflicted by orders to ignore Ashley Smith. CBC News. January 21, 2013.**

Guards and some middle managers at an Ontario prison were stressed and conflicted by orders to ignore Ashley Smith's self-harming behavior as long as she was still breathing, according to information from labour hearings and internal prison investigations.

<http://hsjcc.on.ca/Uploads/Guards%20confused,%20conflicted%20by%20orders%20to%20ignore%20Ashley%20Smith.pdf>

 **Mental illness calls cost London force \$12million in 2012, says chief Brad Duncan. The London Free Press. January 23, 2013.**

After releasing a complex study that shows what police say they already knew — officers are dealing with more mental illness calls and more frequently than they were in 2000 — Chief Brad Duncan said he wants to see less money put into policing the mentally ill and more into caring for them.

<http://hsjcc.on.ca/Uploads/Mental%20illness%20calls%20cost%20London%20force%2012%20million%20in%202012,%20says%20Chief%20Brad%20Duncan.pdf>

Journal Articles, Research and Presentations

 **Research Snapshot – Developing better mental health crisis services. Evidence Exchange Network (EENet) in partnership with the Knowledge Mobilization Unit at York University.**

This study evaluates a community-based crisis service that used extra funding from Ontario's Ministry of Health and Long- Term Care to develop a new model. The new model focused on increasing service capacity, access to mobile crisis response, and appropriateness of services delivered. The new model also included the addition of a transitional case management service. The results showed positive changes in the direction of desired service use patterns.

<http://hsjcc.on.ca/Uploads/snapshot-Krupa-et-al-2.pdf>

 **Presentation: Process to reduce Hamilton Police Emergency Department wait times. St. Joseph's Health Care Hamilton.**

Presentation looking at outcomes from a project involving reductions in average waiting time in the ER for Hamilton Police.

Presentation - <http://hsjcc.on.ca/Uploads/PES-HPS%20project.pdf>

Observation Form -

<http://hsjcc.on.ca/Uploads/Police%20Observation%20Form%203%20Revised.pdf>

 **Analyzing media representations of mental illness: Lessons learnt from a national project. Abstract. January 16, 2013.**

Much research suggests that the general public relies on the popular media as its main source of information about mental illness. Assessing media representations of people with mental illness is vitally important, given that research suggests that the media exerts a strong, often negative, influence on public attitudes.

<http://www.hsjcc.on.ca/Uploads/Analyzing%20media%20representations%20of%20mental%20illness%20-%20Lessons%20learnt%20from%20a%20national%20project.pdf>

 **Risk Assessment in Mental Health Care: Values and Costs. Behavioral Sciences and the Law. Abstract. January 7, 2013.**

Risk assessment has assumed increasing salience in mental health care in a number of countries. The frequency of serious violent incidents perpetrated by people with a mental illness is an insufficient explanation.

Understandings of mental illness and of the role of those charged with their care (or control) play a key role.

<http://www.hsjcc.on.ca/Uploads/Risk%20Assessment%20in%20Mental%20Health%20Care%20-%20Values%20and%20Costs.pdf>

 **Effectiveness 2 years postexit of a recently established mental health court. American Behavioral Scientist. Abstract. November 16, 2012.**

There are now more than 300 mental health courts in the United States; yet studies on their effectiveness in reducing criminal recidivism are relatively few, and most follow defendants after entry into the court, during their participation, and sometimes, for a short period following exit. Using a preenrollment-postexit design that follows participants of one mental health court for 2 years after exit, this article examines criminal recidivism of participants after they no longer receive the court's services, supervision, and support.

<http://www.hsjcc.on.ca/Uploads/Effectiveness%20%20Years%20Postexit%20of%20a%20Recently%20Established%20Mental%20Health%20Court.pdf>

 **Homesteading a pioneer mental health court – A judicial perspective from the last frontier. American Behavioral Scientist. Abstract. November 9, 2012.**

Although judges with interests in improving the criminal justice response to individuals with serious mental illness have long been principal leaders in the development and innovation of mental health courts (MHCs), little is known about the experiences of pioneering MHC judges. Through an edited written narrative, this article provides a history of one “first-generation” MHC through the lens of its founding judge.

<http://www.hsjcc.on.ca/Uploads/Homesteading%20a%20Pioneer%20Mental%20Health%20Court.pdf>

 **Risk factors for violence among forensic psychiatric inpatients. Middle East Current Psychiatry. Abstract. January 2013.**

Forensic evaluation differs from clinical evaluation in several aspects, most importantly that it has legal goals to serve other parties not the health care needs of the individual. However, violence prediction is a difficult task always expected from a psychiatrist whether during forensic or as usual clinical evaluation. Assessing danger and prediction of future violence aim at prevention of such behaviour. Risk factors for violence in people with mental

disorder might be different from other groups.

<http://www.hsjcc.on.ca/Uploads/Risk%20factors%20for%20Violence%20among%20forensic%20psychiatric%20inpatients.pdf>

 **"Cause everyone likes to be treated good" - Perceptions of procedural justice among mental health court participants. American Behavioral Scientist. Abstract. November 19, 2012.**

There is mounting evidence that mental health courts (MHCs) reduce criminal recidivism and increase use of mental health services. Although not yet empirically tested, procedural justice has been proposed as one potential mechanism that promotes change and improves outcomes for MHC participants. In this article, we investigate MHC participants' perceptions of procedural justice in interactions with MHC staff as well as the role of procedural justice in participants' MHC program experiences.

<http://www.hsjcc.on.ca/Uploads/Cause%20Everybody%20Likes%20to%20Be%20Treated%20Good.pdf>

 **Arrests among youth after out-of-home mental health treatment: Comparisons across community and residential treatment settings. Social Science Research Network. Abstract. January 2, 2013.**

Youth with mental health needs that require out-of-home treatment receive services in three settings in Florida: community-based group homes and foster family settings, and inpatient group facilities. Research suggests that youth in group settings have poorer criminal justice outcomes. Such differences are attributed to the negative peer effects in group environments.

<http://www.hsjcc.on.ca/Uploads/Arrests%20Among%20Youth%20after%20Out-of-Home%20Mental%20Health%20Treatment.pdf>

 **The impact of known criminogenic factors on offenders with intellectual disability: Previous findings and new results on ADHD. Journal of Applied Research in Intellectual Disabilities. Abstract. January 2013.**

Developmental and index offence variables have been implicated strongly in later criminal behaviour and service pathways and this paper investigated attention deficit hyperactivity disorder (ADHD) which, with conduct disorder, has emerged from previous studies on offenders. ADHD and conduct disorder are over-represented among criminal populations when compared to the general population. The present authors reviewed the extent to which ADHD affected the presentation of offenders with intellectual disability.

<http://www.hsjcc.on.ca/Uploads/The%20Impact%20of%20Known%20Criminogenic%20Factors%20on%20Offenders%20with%20Intellectual%20Disability.pdf>

 **How personality became treatable: The mutual constitution of clinical knowledge and mental health law. Social Studies of Science. Abstract. February 2013.**

In recent years, personality disorders – psychiatric constructs understood as enduring dysfunctions of personality – have come into ever-greater focus for British policymakers, mental health professionals and service-users. Disputes have focussed largely on highly controversial attempts by the UK Department of Health to introduce mental health law and policy (now enshrined within the 2007 Mental Health Act of England and Wales). At the same time, clinical framings of personality disorder have dramatically shifted: once regarded as untreatable conditions, severe personality disorders are today thought of by many clinicians to be responsive to psychiatric and psychological intervention.

<http://www.hsjcc.on.ca/Uploads/How%20personality%20became%20treatable.pdf>

 **An investigation of the effectiveness of the Relaxation Skills Violence Prevention (RSVP) Program with juveniles detainees. Criminal Justice and Behavior. Abstract. February 2013.**

This study investigated the effectiveness of the Relaxation Skills Violence Prevention (RSVP) program with a sample of juvenile detainees. The RSVP program is a five-session group therapy program that teaches ways to identify and cope with anger using the relaxation skills of deep breathing, guided imagery, and progressive muscle

relaxation.

<http://www.hsjcc.on.ca/Uploads/An%20Investigation%20of%20the%20Effectiveness%20of%20the%20Relaxation%20Skills%20Violence%20Prevention%20%28RSVP%29%20Program%20With%20Juvenile%20Detainees.pdf>

 **The impact of incarceration on women's mental health: Responses from women in a maximum security prison. Qualitative Health Research. Abstract. January 2013.**

Many women enter prison with significant mental health conditions. Without appropriate intervention during incarceration, there is the potential for these conditions to worsen during confinement. As a result, women, most of whom will eventually be released from prison, might return to their families and communities with even more complex mental health needs.

<http://www.hsjcc.on.ca/Uploads/The%20Impact%20of%20incarceration%20on%20Women%E2%80%99s%20Mental%20Health.pdf>

 **Trends in police contact with persons with mental illness: A longitudinal study 2000-2011.**

Since the 1960s, one worrying offshoot of de-institutionalization of mental health services has been a marked increase in contact between persons with mental illness (PMI) and the criminal justice system. The criminalization of PMI is well documented. Police contact with PMI is much higher than the prevalence of mental illness in the population; police use informal disposition less frequently with PMI. PMI have a higher arrest rate than the general population and PMI are arrested and jailed for relatively minor offences at a higher rate than their non-mentally ill counter-parts.

<http://hsjcc.on.ca/Uploads/Trends%20in%20police%20contact%20report%20for%20LPSB%202013.pdf>

Events

 **2013 Durham Regional HSJCC Conference – Cyberspace impact: The real dangers of virtual worlds and communication. March 7, 2013. 800 Chaplain Avenue, Ottawa.**

Register by February 21, 2013 – Spaces are limited.

Link to brochure and registration form:

<http://hsjcc.on.ca/Uploads/Cyberspace%20Registration.pdf>

📣 Call For Abstracts: 2013 Provincial Human Services & Justice Coordinating Committee Conference. November 25 -27, 2013. Toronto Marriott Eaton Centre.

<http://www.hsjcc.on.ca/Uploads/Call%20for%20Abstracts%20JAN26.pdf>

📣 Updated: 7th Annual Risk and Recovery Conference. April 25 & 26, 2013. Sheraton Hotel, Hamilton.

This event will feature lectures from experts in the areas of Risk Assessment, Risk Management & Recovery.

<http://www.hsjcc.on.ca/Uploads/Save%20these%20dates%202013.pdf>

Registration also available at

www.riskandrecoveryconference.com

📣 Northwestern Ontario Psychosocial Rehabilitation Education Committee 2013 Conference: Recovery in Mental Health: Sharing our Successes! Victoria Inn Thunder Bay ON June 5th and 6th, 2013

Save the date:

Registration open March 2013

<http://www.hsjcc.on.ca/Uploads/PSR%202013%20save%20the%20date%20Oct%202012.pdf>

Call for Abstracts:

Submission deadline: January 15, 2013

Results notification: February 8, 2013

<http://www.hsjcc.on.ca/Uploads/Call%20for%20Abstracts%20%20PSR%20Conference%202013.pdf>



Links

→ <http://www.hsicc.on.ca>

→ **The Canadian Harm Reduction Network's** dynamic new website has been launched, and we invite you to check it out at <http://www.canadianharmreduction.com>, to get involved, to give us feedback on the website . . . and to join the Network.

→ Presentations from **International Conference on Special Needs Offenders**
<http://www.specialneedsoffenders.org/Program.html>