Scoping review of literature on the health and care of mentally disordered offenders

Authors' objectives
The main aim of the review was to give a broad picture of the key issues in the area of the health and care of mentally disordered offenders.

Authors' conclusions
Developments in the field:
Recent policy and practice developments have included the rise in care in the community within the health arena, and an increased emphasis on diversion within the criminal justice system (at least in the early 1990s).

Other important developments have included a growing emphasis on defining need, both at the level of general service provision, but also at the level of individual needs assessments.

Multiagency working has become essential within most of the relevant fields to this review, but still poses considerable challenges in practice.

The statutory context:
The statutory and legal context for MDOs has a literature in its own right, although it is disparate and rather obtuse for the non-expert reader. The piecemeal system of development of a legal framework makes it difficult to digest the information available.

There is a need for some user-friendly overviews crossing borders and boundaries between areas.

Existing provision:
Provision varies on a number of dimensions including: whether it is located within the hospital or prison system, a health issue or a criminal justice issue; and in terms of the levels of security provided, from none up to the special hospitals.

In terms of the available research, some broad overviews exist, but the situation changes all the time, particularly in the current NHS climate of continued reorganisation.

There is a wealth of empirical data on different types of provision (who is provided for; what it provided for them, etc) but the data are very variable in quality. There is also a body of relevant work on how access to provision generally varies according to factors such as homelessness, factors which are more prevalent in MDO populations.

Descriptions of populations of mentally disordered offenders:
The most significant gaps in the literature came at the very broad and general population based level, rather than in terms of smaller and specialised populations. That is, the biggest gap in the literature is in terms of patterns of overlap
between offending and mental health in the general population.

Causal and preventative studies:

There is a vast body of work on predictors of mental health problems, regularly reviewed. Similarly, the literature on predictors of antisocial behaviour is well reviewed.

It is the interface between the two that provides the problem. Much of the literature that does exist concentrates on violence, which we saw to be neither the only nor the most prevalent offence committed by MDOs.

The research on three groups of risk factors predicting mental health problems and offending were briefly outlined: individual, psychosocial and environmental.

Pathways into and out of care:

There was a lack of longitudinal data in the field. Very few studies have addressed pathways through the full range of provision, most take a small section only.

Given the complexity, it was difficult to assess whether or not the system works. There is certainly a level of bias inherent in interactions between MDOs and various parts of the system based on a range of factors (which vary) but the overall effect of this is unclear.

Effectiveness research:

Two key questions were identified. The first, of whether intervention or provision is effectively targeted and delivered, has not been answered. There is more research on the second, concerning which specific interventions work with MDOs.

Treatment of psychopathy and management of personality disorder have received particular attention. There is some limited optimism that interventions (at least with psychopathy) can be therapeutic.

New policy initiatives in this area have included 'assertive outreach'.

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