



Human Services and Justice

April 2014

News from the Human Services and Justice Coordinating Committee

Message from the Co-Chairs

Well it seems we have survived the long and harsh winter and there are many signs now of spring, though as I write this on Earth Day (April 22) the weather forecast is calling for snow in Northern Ontario. The long winter and anxious anticipation of hot summer days reminds me of the process in developing the HSJCC committees and subsequent network.

Back in 1997, when the *Provincial Strategy to Coordinate Human Services and Criminal Justice Systems in Ontario* was released, creating committees across the Province was hard to image. Health, social services and justice representatives were not familiar with working together. At the beginning it seemed very ambitious and perhaps impossible to image having a network of committees with members from such vastly different organizations and ministries, with such varied mandates and roles working together to address the needs of people with mental health needs who were in conflict with the law. Like the long winter with no spring in sight the initial stages of the development were tedious.

Today the HSJCC has a network of committees that includes 42 Local, 14 Regional and a Provincial committee. We have a membership of over 1250 people, representing many sectors, including health, social service, youth, police, courts, developmental services, and corrections. Many things have changed as a result of cross-sectorial working relationships and collaboration and the work of the committees is well known and respected.

At the Provincial committee we recently discussed surveying members to collecting the number of hours that each PHSJCC members dedicates to the work of the HSJCC. This would be a starting point to understand the extent of manpower that is committed to the mandate and vision that was articulated 17 years ago. Thanks to all of you who have persevered through the challenges of developing your local and regional committees. Thanks for your spirit of determination and belief that together we can make a difference.

The P-HSJCC looks forward to new opportunities to partner and to build our capacity to continue our work.

All the best,

Sandie Leith, Co-Chair, Provincial HSJCC
sandie@cmhassm.com

Volunteers Needed for the 2015 Conference Planning Committee

Working in mental health and justice, you know of someone or agency doing innovative work with clients. You know of programs and practices that should be showcased. You know where the gaps are, you know where improvements are needed.

The 2013 conference was a resounding success. Join us in ensuring our 2015 Provincial Human Services and Justice Coordinating Committee conference reflects the best of what mental health and justice has to offer.

The Conference Planning Committee is looking for interested volunteers to make the next conference more successful than 2013!

Please contact Jenna Hitchcox at jhitchcox@ontario.cmha.ca if you are interested in

New Community Crisis Model Celebrates One-Year Anniversary

In October 2013, the North East Local Health Integration Network (LHIN) celebrated the first anniversary of the launch of a new Community Crisis Model (the Model) in Sudbury. This Model includes a mobile crisis team with expanded hours, a patient navigator based out of the local hospital and a new crisis centre in the city's downtown. In collaboration with the Canadian Mental Health Association (CMHA) Sudbury/Manitoulin Branch and Health Sciences North, the Model also included training that was delivered to members of the Greater Sudbury Police Service (GSPS) on how to interact and provide the best response to individuals experiencing a mental health crisis.

The idea for the Model came after the GSPS, the North East LHIN, Health Sciences North, CMHA Sudbury/Manitoulin Branch, Northern Initiatives for Social Action, youth services organizations and people with lived experience of mental health and addictions issues and their families came together to discuss how to best set up a community crisis program in the Sudbury area. The Greater Sudbury Police Service welcomed the idea of having another resource they could use rather than a more common alternative: taking individuals experiencing a mental health crisis to the emergency room.

The training provided to police officers began in the Fall of 2012 and mandatory sessions were held between October and December of that year. Training was provided for half a day, twice a week and was also recorded for future staff. The training manual and session includes the following key topics:

- Mental health and addictions issues and stigma – helping officers understand the different sides to mental health and addictions issues
- Recognizing and being able to describe verbal, visual and environmental cues – showing officers how to respond to behaviors and putting the focus away from labels and diagnoses
- Role playing different scenarios and responses
- Simulated psychosis – using auditory simulations with iPods to mimic auditory hallucinations while at the same time asking participating officers to simultaneously do math questions, answer job interview questions, read an article or do a treasure hunt

Over 300 officers and many 9-1-1 dispatch staff have gone through this training and the modules have been well received.

“Police officers found the simulated psychosis difficult because it can be overwhelming for individuals who have not experienced auditory hallucinations” said Sarah Gauthier, Justice Program Coordinator at the CMHA Sudbury/Manitoulin Branch. “Ultimately, the training gave police officers a better understanding of people with mental health issues who are often not at their best when they come into contact with police,” she said.

Since the Community Crisis Model was implemented, there has been a 62% increase in individuals from the Sudbury area who have accessed crisis care in the past year and a 21% decrease in the number of apprehensions under the Mental Health Act. Police officers feel they now have more options when encountering an individual experiencing a mental health crisis because they can divert the individual to the mobile crisis team, bring the mobile crisis team into the interaction or call the crisis centre for support.

HSJCC Webinars Available Online

[A Conversation with Deputy Chief Mike Federico - Held March 28, 2014](#)

Learn about the challenges and successes of the Toronto Police Service relating to mental health.

[Special Populations Primer - Acquired Brain Injury & Fetal Alcohol Spectrum Disorder - Held March 27, 2014](#)

To provide an overview of acquired brain injuries and fetal alcohol spectrum disorder and how individuals experiencing these conditions come into contact with the justice system. Across Ontario, many HSJCC's work with these populations and the aim of this webinar is

to make the broader HSJCC Network aware of the unique issues and approaches involving these special populations. Speakers will provide background information as well as describe any services or programs that have been effective in working with individuals with acquired brain injuries and fetal alcohol spectrum disorder respectively.

Ontario's Privacy Commissioner releases report on the disclosure of suicide attempts

In December 2013, the story of Ellen Richardson, who was denied entry into the United States by U.S. Customs and Border Protection because of a previous suicide attempt, made headlines across Canada. Since then, Ontario's Privacy Commissioner conducted an investigation into the matter and released a report titled "[*Crossing the Line: The Indiscriminate Disclosure of Attempted Suicide Information to U.S. Border Officials via CPIC.*](#)"

CPIC is the Canadian Police Information Centre which holds a database to which all police services submit information that they collect on a regular basis. However, the Commissioner's report found that police services collect and upload this data to different degrees, especially when it comes to mental health police records that include information about suicide attempts. Further, she states that the disclosure of this information is not in compliance with the **Municipal Freedom of Information and Protection of Privacy Act** or the provincial **Freedom of Information and Protection of Privacy Act**.

The Canadian Mental Health Association (CMHA), Ontario, a partner of the Provincial Human Services and Justice Coordinating Committee and a founding organization and co-chair of the [Police Records Check Coalition](#) (PRCC), provided input and 2 formal submissions prior to the release of the report. CMHA Ontario issued a news release in response to the launch of the Privacy Commissioner's report stating that although the report is "a good first step in the examination of the disclosure of mental health police records... further study is needed about the disclosure of mental health police records related to suicide or other interactions with police."

Camille Quenneville, CEO of CMHA Ontario also said that "Mental health police records are not criminal records and should not be treated as such." CMHA Ontario is in alignment with the PRCC, and its key member organizations including the Canadian Civil Liberties Association, Ontario Association of Patient Councils, the Schizophrenia Society of Ontario and the John Howard Society of Ontario. All partners believe that the disclosure of mental health information, and more broadly non-conviction information, is discriminatory. This practice not only increases the stigma around mental health issues but it also creates barriers to accessing volunteer positions, employment, housing and other services.

To view the CMHA Ontario news release, [click here](#).

To view the PRCC Advocacy Guide on Cross-Border Mental Health Records, [click here](#).

We're Looking for Submissions

If your Regional or Local HSJCC is involved in something you'd like to share with everyone, please submit an article, of any length, to Trevor Tymchuk, at trevor@afewthings.ca

Media Items and Press Releases

[Daily Court Information Now Available Online](#)

Ministry of the Attorney General

A new online service is making it easier for people to find out where and when they need to go to court. This online version of the daily court lists allows court users to search for basic information about next-day court appearances, including the case number, the names of the parties involved and the time, location and reason for that appearance. The website gives court users a faster, more convenient way to access daily court list information, which until now could only be obtained by calling or visiting the courthouse in person.

[Landmark settlement addresses needs of inmates with mental health issues in Ontario prisons](#)

Ontario Human Rights Commission

The mental health needs of prison inmates is the focus of a landmark settlement reached yesterday. The agreement arises from an application filed by Christina Jahn, a woman with mental illness, addictions and cancer, with the Human Rights Tribunal of Ontario. Ms. Jahn alleged that she was placed in segregation for 210 days at the Ottawa-Carleton Detention Centre because of her mental health disabilities, and that the Ministry of Community Safety and Correctional Services discriminated against her by failing to accommodate her mental health-related needs. The Ontario Human Rights Commission intervened in Ms. Jahn's case to address the systemic issues that led to her not receiving appropriate mental health services and being placed in segregation.

[Autistic son 'prisoner' in Ottawa hospital](#)

CBC News

Ontario parents are outraged over how their developmentally disabled adult son is confined to a hospital room — watched by security guards 24/7 — because the system doesn't have a placement for him elsewhere. "There is nothing out there. That's basically what the problem is," said Joseph Spagnuolo, whose son Nicholas is in Ottawa Hospital's Civic Campus, an acute care facility. "I just feel Nicholas is a prisoner," said his mother Anne Spagnuolo. "He's confined to that room and there's no way out. The minute he steps out of that room - the guards have their hands up like he's a monster and it's degrading. It's despicable." 31-year-old Nicholas Spagnuolo was born with cerebral palsy and has autism and dementia. He has the mental and emotional capacity of a small child.

[B.C. nurses face daily violence from child forensic patients](#)

CBC News

Imagine going to work every day knowing you will likely be punched, kicked or spat on. That is what several workers tell CBC is happening at a Burnaby, B.C., centre that cares for children with mental illness. A CBC News investigation has uncovered a history of violations of occupational health and safety regulations and a disturbing list of injuries to staff at the Maples Adolescent Treatment Centre in Burnaby. Ninety-six per cent of the violence happens at the Crossroads unit for children who have committed violent crimes. Several workers in the eight-bed unit tell CBC the children assault staff members almost daily, and dozens of workers have been injured seriously enough to require medical attention and time off. The centre is run by B.C.'s Ministry of Children and Family Development. The ministry confirms 25 workers were injured by forensic patients last year alone.

[Prisoners given powerful drugs off-label, allegedly to 'control behaviour'](#)

CBC News

A powerful mood-altering medication with potentially life-threatening side effects was for years being prescribed in Canadian prisons for unapproved purposes, raising concerns the drug was being used to "subdue" or "sedate" inmates, a joint CBC News/Canadian Press investigation has revealed. The investigation also found a dramatic spike over the last decade in prescriptions for all mood-altering medications among female prisoners, according to previously unpublished statistics. The revelations have led Canada's prison watchdog to investigate prescribing practices at Correctional Service Canada. One medication under scrutiny, quetiapine (widely known under the brand name Seroquel), is approved only for treating bipolar diseases and schizophrenia; however, it is sometimes prescribed off-label as well, most commonly as a sleep aid. According to a memo obtained by CBC News and The Canadian Press, Correctional Service Canada felt compelled to order a halt to those kinds of unapproved uses of quetiapine in February 2011.

[Baffin Correctional Centre 'appalling' and should be closed, report says](#)

CBC News

The current state of disrepair and overcrowding at the Baffin Correctional Centre in Iqaluit is "nothing short of appalling" and the facility needs to be shut down, according to a new report obtained by CBC News. The 34-page report was done by the Office of the Correctional Investigator. The territorial government initially refused to release the report to CBC News until Nunavut's information commissioner told it to release it in its entirety. The report found that the facility, built in 1986, is "well past its life expectancy" and that "cells are overcrowded beyond acceptable standards of safe and humane custody." The institution was initially designed for 41 minimum-security inmates. But when the Office of the Correctional Investigator conducted its visit and review, 106 inmates were housed there.

[Bill provides for court-ordered FASD assessments](#)

Whitehorse Star

Yukon MP Ryan Leef tabled a private member's bill in the House of Commons this week which seeks to amend the Criminal Code to recognize the impacts of Fetal Alcohol Spectrum Disorder. If passed, Leef's bill would amend the code to include a definition of

FASD. It would also permit the courts to order an assessment to determine if an accused suffers from FASD. The bill would also enable judges to consider FASD a mitigating factor if it's found the disorder may have been a contributing factor to a crime. Today, Leef noted that his bill is an important first step, but it doesn't address prevention or programming in correctional facilities. His hope is that it will further discussion and lead ultimately to the development of complementary legislation. As a former police officer and correctional worker, Leef said, it was his own experiences in the justice system, witnessing the challenges faced by people with FASD, which led him to develop the proposed amendments to the Criminal Code.

[Barton Street jail named one of most violent institutions](#)

The Canadian Press

Ontario's jails are in the midst of a surge of cellblock violence that suggests the province's overcrowded correctional system is simmering with tension, statistics show. Figures obtained by The Canadian Press under freedom of information reveal there were about 3,000 reported prisoner-on-prisoner assaults in 2012-13 — or eight attacks a day — up almost one-third from the 2,300 attacks five years earlier. Hamilton's Barton jail was identified as one of one of six in province with more than 200 prisoner-on-prisoner attacks. And the number of times guards used physical force against inmates has almost doubled, reaching some 1,500 incidents from 800 in 2008-09.

[Bill to reform NCR provisions puts public at greater risk: lawyer](#)

Legal Feeds

Announcing the plans, Justice Minister Peter MacKay said: "The safety and well-being of Canadians is of paramount importance to our government. "The legislation reinstated today will put public safety first, protect Canadians from the most high-risk individuals, and enhance the rights of the victims." But the "knee-jerk" plan will likely have the opposite effect, says criminal defence lawyer Paul Alexander, who has acted in cases before the Supreme Court of Canada, all levels of court in Ontario, and courts of appeal across the country. "There's a risk that people aren't criminally responsible . . . and would be better off treated in an institution . . . feel they would be better off simply going to jail," he says.

[Mental health brings together cops, experts](#)

The Canadian Press

The beginnings of a national framework to train police on how to best deal with the mentally ill emerged Wednesday from the country's first collaborative dialogue on the issue. Law enforcement officials, people who live with mental illness and advocates gathered in Toronto over the last three days to discuss what could be done to avert tragedies involving those in crisis. The conference — hosted by the Mental Health Commission of Canada and the Canadian Association of Chiefs of Police — came at a time when statistics suggest one in five Canadians experience a mental health illness in any given year. "One of the important takeaways that we'll have as the Canadian Association of Chiefs of Police is a national framework for training all of our officers," said Vancouver police Chief Jim Chu, who also heads the police chiefs association.

[Can you spot a psychopath?](#)

The Daily Telegraph

There are a few things we take for granted in social interactions with people. We presume that we see the world in roughly the same way, that we all know certain basic facts, that words mean the same things to you as they do to me. And we assume that we have pretty similar ideas of right and wrong. But for a small - but not that small - subset of the population, things are very different. These people lack remorse and empathy and feel emotion only shallowly. In extreme cases, they might not care whether you live or die. These people are called psychopaths. Some of them are violent criminals, murderers. But by no means all. Professor Robert Hare is a criminal psychologist, and the creator of the PCL-R, a psychological assessment used to determine whether someone is a psychopath. For decades, he has studied people with psychopathy, and worked with them, in prisons and elsewhere. "It stuns me, as much as it did when I started 40 years ago, that it is possible to have people who are so emotionally disconnected that they can function as if other people are objects to be manipulated and destroyed without any concern," he says.

[Canada's judicial revolt - Taxing broken souls?](#)

The Economist

The Conservative government led by Stephen Harper has made being tough on crime one of its signature themes, passing a series of bills during its almost eight years in power to make criminal justice more punitive. Heedless of critics who point out that the crime rate is in long-term decline and that harsh jail terms have been shown not to work, the government has introduced new mandatory minimum sentences, increased and made mandatory so-called "victim surcharges" (an additional fine used to fund victims' services)

and created new crimes that call for incarceration. With a majority in both the House of Commons and the Senate, the government faces few obstacles in implementing its crime agenda. But lately it has encountered open defiance from an unlikely source: the judiciary. In a series of recent decisions judges have refused to impose mandatory minimum sentences and fines, or have set a payment period so long—in one case, 50 years—that the punishment has been blunted. Some judges have penned scathing critiques of the new laws, or given pointed interviews to journalists. One described the government's agenda as driven by "an ideology of unabashed Puritanism, marketed through fear-mongering and the invidious exploitation of communal differences". Another described mandatory fines levied on drug addicts, the mentally ill and welfare recipients as "a tax on broken souls".

[Criminals Need Mental Health Care](#)

Scientific American

Despite what you see on television, a verdict of "not guilty by reason of insanity" is exceedingly rare. Most defendants with mental illnesses end up incarcerated—studies reveal that fully half of all prisoners have at least one mental disorder. That is one million people in the U.S. alone, and the prison system does very little to successfully treat them. As a result, the recidivism rate among released convicts is especially high for those with serious disorders. Forensic hospitals, on the other hand, which hold and treat offenders found not guilty by reason of insanity, have a very high success rate in preventing disordered individuals from returning to crime. In an analysis of data from California, New York and Oregon, Victoria Harris, a forensic psychiatrist at the University of Washington, reported in 2000 that people at these institutions reoffended at a "much lower" rate than untreated mentally ill offenders. Psychiatrist Jeremy Coid and his colleagues at St. Bartholomew's Hospital in London found in 2007 that forensic patients in the U.K. were 60 percent less likely to reoffend than released inmates and 80 percent less likely to turn to violence.

[Dr. John Bradford won't work Magnotta case because of PTSD](#)

CBC News

One of this country's top forensic psychiatrists says he will not work on the upcoming trial of alleged killer Luka Rocco Magnotta because he suffers from post traumatic stress disorder, a condition triggered by a career spent absorbing graphic video evidence. Dr. John Bradford said he never used to believe PTSD was real, but having experienced it, he now recognizes that it is a true medical condition. "I'm not a skeptic anymore," he said. "I can tell you it's real."

[Eerie Photos Explore a Remote Prison That Has Been Abandoned Since The 1970s](#)

The Huffington Post

Ontario's Burwash Correctional Facility, which has been out of commission since the 1970s, is so remote one has to travel via canoe just to get there. This didn't deter photographer Mike Palmer, who braved the elements to capture the abandoned ruins of the former prison site, all in the name of art.

[Mental health-related arrests jump 18%: police](#)

24 Hours Vancouver

Vancouver arrests related to mental health went up 18% last year, according to a report. "When you look at the numbers, 3,500 apprehensions-plus, we're looking at almost 10 every day," said Const. Brian Montague on Tuesday. "Which is obviously a lot of calls, a lot of police resources and a lot of time officers spend dealing with the mental health crisis." Jonny Morris of the Canadian Mental Health Association said \$20 million in recent provincial funding has helped, but that money — some of which funded mental health intervention units and beds — mainly addresses the more serious cases. According to police, the vast majority of calls are people who want to hurt themselves or others.

[Eliminating Waitlists for Developmental Services](#)

Ministry of Finance

Ontario plans to eliminate waitlists for direct funding for 21,000 people with developmental disabilities. As part of the government's vision for the transformation of developmental services, the province would eliminate the current waitlist for the Special Services at Home program for children in two years and the Passport program for adults in four years. These programs provide direct funding for people with developmental disabilities, allowing them and their families to customize their services and supports to best meet their individual needs.

[Province's 'hotspotting' program to cut number of ER superusers](#)

CBC News

Saskatchewan's provincial budget includes \$4 million this year, to triage emergency room

wait lists and cool so-called "hot spots". Officials with the Ministry of Health estimate one per cent of hospital patients use at least 20 per cent of health services. One hospital has identified a Saskatchewan man who visits the emergency room at least every second day. Tracking those patients and identifying the root cause of their problems has led to significant savings in health care spending in other provinces and states. "If you don't have a house, you might end up going to emergency rooms to deal with mental health problems, or to warm up," said Dr. Cory Neudorf, of the Saskatoon Health Region. "Some of these patients cost the system \$100,000 a year."

[Escorted community visits for cop killer OK](#)

The Canadian Press

A decision allowing a man who killed a police officer with a snowplow escorted passes into the community was reasonable and should stand, Ontario's top court ruled Tuesday. In rejecting arguments by the Crown, the Ontario Court of Appeal sided with the Ontario Review Board that granting Richard Kachkar the privilege posed minimal risk to the public. The court leaned heavily on expert evidence before the board from a forensic psychiatrist, Dr. Philip Klassen, that Kachkar would show clear warning signs before developing full-blown psychosis. "In my view, Dr. Klassen's evidence provided ample support to sustain the conclusion that the community-access condition would not compromise public safety," the Appeal Court found.

[Ex-Marine Jerome Murdough 'baked to death' in N.Y. jail after cell overheated to sweltering 37 C, officials say](#)

Associated Press

Jerome Murdough was just looking for a warm place to sleep on a chilly night last month when he curled up in an enclosed stairwell on the roof of a Harlem public housing project where he was arrested for trespassing. A week later, the mentally ill homeless man was found dead in a Rikers Island jail cell that four city officials say had overheated to at least 100 degrees Fahrenheit (37 degrees Celsius), apparently because of malfunctioning equipment. The officials told The Associated Press that the 56-year-old former Marine was on anti-psychotic and anti-seizure medication, which may have made him more vulnerable to heat. He also apparently did not open a small vent in his cell, as other inmates did, to let in cool air.

[Making sense of NCR](#)

Winnipeg Free Press

Earlier this week, the provincial review board agreed to loosen restrictions on Vince Li, a man found not criminally responsible for a grisly slaying in 2008. In the wake of the developments, readers have inundated me with questions about mental illness, the Criminal Code and the system by which accused persons such as Vincent Li are reintegrated into society. In order to get the straight facts, I turned to Ken Mackenzie, manager of the forensic mental-health program at the Winnipeg Regional Health Authority. His unit oversees the treatment and supervision of all persons found not criminally responsible (NCR) in a court.

[Majority of Americans want to treat, not jail, drug users: survey](#)

Reuters

About two-thirds of Americans say drug abusers need access to treatment to address their addiction rather than criminal prosecution that could lead to jail time, according to a poll released on Wednesday that highlights the public's shifting attitude toward illegal drugs in the United States. While people are still worried about the extent of drug abuse, especially in their schools and neighborhoods, those surveyed supported less harsh punishment for non-violent offenders, especially marijuana users, the Pew Research Center found. Among the 1,821 U.S. adults polled, 67 percent said they backed treatment for drug users compared to 26 percent who said the government should focus on prosecution. Another 7 percent said they did not know what to focus on. Two thirds also said they supported the growing movement among some U.S. states to back away from mandatory sentences for minor drug crimes, according to the nonpartisan group's survey. In comparison, less than half of those polled in 2001 backed reduced prison time.

[Judge raises concerns about mental care in jail](#)

Owen Sound Sun Times

Ontario Court Justice Julia Morneau says she wants a commitment from the superintendent of Central North Correctional Centre in Penetanguishene that a man who has appeared before her will receive proper psychiatric care before she sentences him again. The superintendent had already ordered an investigation after Morneau raised alarm about a prisoner's lack of psychiatric care at the jail last fall. Morneau said she wants to know how CNCC, which potentially houses 1,200 inmates in a facility with a medical wing and medical staff including a doctor, could let the man before her to become

“floridly psychotic” during his six-week incarceration last fall. “It is unacceptable in a modern society, in a civilized country as affluent as we are, that Mr. Epema cannot receive proper medical care,” Morneau said. “If he had a broken leg, I would hope at the CNCC he would get proper medical care. His is a matter of psychiatric care.”

[Mentally ill man handcuffed to bed for 3 weeks in hospital](#)

CBC News

A Thunder Bay woman says she hopes nobody has to go through what her son did while waiting for mental health help. Shannon Harris said her 24-year-old son was shackled to a hospital bed for nearly three weeks after he suffered a mental breakdown in early February. “He left the house, told his girlfriend he was going to get coffee, didn’t take his wallet, his keys or his jacket or mitts and it was below –30,” she said.

[How a schizophrenic man found not criminally responsible in Ontario escaped mental hospital and fled to U.S.](#)

National Post

Two years ago, while in the care of a Kingston, Ont., mental hospital, a schizophrenic man named Jonah Fluxgold, 37, obtained a passport and \$10,000 cash, illegally fled to Montreal, caught a plane to New York, where he lost the passport, and then to Sunnyvale, Calif., where he was arrested after a physical altercation with a family friend. What should have been a brief elopement, however, grew into a legal fiasco, as Mr. Fluxgold was held in the Santa Clara county jail, variously refusing medication or having it forced on him, for almost two years, despite a warrant for his arrest that no one in Canada would enforce or pursue. The saga took an unexpected twist Friday when Mr. Fluxgold was freed after pleading guilty to forcible confinement, having already served more than a full sentence awaiting trial. He was packed onto a bus bound for Seattle, where his mother expected him Sunday night.

[Housing mentally ill homeless cheaper than alternative: study](#)

CBC News

New research has found it’s cheaper for governments to house homeless people with mental illnesses rather than pay for the problems associated with homelessness — including health care, policing and temporary shelters. The research findings come from a \$110-million study started in 2008 in five Canadian cities — including Winnipeg. The Mental Health Commission of Canada used a federal grant to see if a “housing first” approach to homelessness and mental illness was a good way of transitioning people off of the streets. It was the largest research study in the world targeting homelessness and mental health. Essentially, the program, dubbed At Home, found housing for the homeless and mentally ill.

[He beheaded a man. But here’s why Vince Li deserves our compassion](#)

The Globe and Mail

We awake every morning possessed of both emotional and rational faculties, then spend much of our day mediating the conflicting demands of each. Usually this mediation is peaceful. But occasionally the conflict escalates to dramatic proportions. And that is the subtext of the case of Vincent Li, found not criminally responsible by the courts for beheading Tim McLean, and recently granted unescorted day trips out of hospital. Strong emotional opposition to Mr. Li’s unescorted freedom is only natural. He gruesomely killed an innocent man. Our empathy for the extreme suffering of both the victim and his family finds emotional expression in a desire to see Mr. Li punished long and hard.

[Halifax’s free-money folk hero lands in psychiatric ward after handing out money to strangers](#)

National Post

All last week, Halifax was roiled by sightings of a “mystery man” roaming the city and handing out money to strangers. The sums were large: \$100, \$50 bills and an assortment of silver coins. The recipients were picked seemingly at random: workers taking a smoke break, passengers on a bus or even a couple sitting on their porch. Reportedly dressed in patched pants and a wool jacket, the man would tell people he lived in the woods. Sometimes he would point skywards and tell them to thank God, other times he would hint he was the vanguard of a movement to “take back the wealth.” “I think he did a good job for mankind,” said a clerk at Citadel Coins, one of the Halifax coin shops where the man had come to stock up. On Monday, Haligonians finally learned the identity of their enigmatic benefactor: Richard Wright, a P.E.I. man who had barely returned home to Charlottetown before he was apprehended by local mental-health authorities. “They think he is sick and has mental issues ... but I know he does not,” wrote Mr. Wright’s teenaged daughter, Chelsey, in a Sunday night Facebook post.

[Half of youths admitted to NYC jails suffered brain injury before incarceration: study](#)

The Associated Press

About half of all 16- to 18-year-olds coming into New York City's jails say they had a traumatic brain injury before being incarcerated, most caused by assaults, according to a new study that's the latest in a growing body of research documenting head trauma among young offenders. And in the United Kingdom, a national campaign on the issue has resulted in a commission that found almost two-thirds of young inmates suffered from head trauma, which University of Exeter researchers found in 2010 is associated with earlier, repeated and more time spent in custody. Experts say the findings, published this week in *The Journal of Adolescent Health*, could lead to better training for correction officers on how to deal with the possible symptoms of such trauma, which include problems with impulse control and decision-making.

[Free booze, beds for homeless can save taxpayer money](#)

CBC News

For the past two years, Shelter House in Thunder Bay has been offering free booze and a bunk to homeless alcoholics. Now a study at the University of Victoria shows clear evidence that the program saves taxpayers money. "This is definitely a solution," said the shelter's director, Patty Hajdu. "For communities that are looking for a way to better allocate their resources, to use their resources in a more efficient and fiscally responsible way, and to provide a better quality of life for the sickest amongst them."

[N.S. government considers tracking devices for East Coast Forensic patients](#)

CTV Atlantic

The Nova Scotia government is considering tracking devices for patients at the East Coast Forensic Hospital in Dartmouth. If it follows through with the plan, Nova Scotia would be the first province in Nova Scotia to implement some sort of tracking system for patients. "If this is, in fact, in the best interest of safety in Nova Scotia, as well as an enabler of the work of the East Coast Forensic Centre," says Nova Scotia Health and Wellness Minister Leo Glavine. Glavine has been looking into the buddy system, a monitoring system used in the United Kingdom that involves ankle bracelets and GPS tracking that is monitored 24/7. "It is certainly a concern to Nova Scotians with the frequency that patients have not returned to the East Coast Forensic Centre," says Glavine.

[For a veteran Calgary cop, it was no ordinary call of duty](#)

Maclean's

On Nov. 12, 2013—five months before the grisliest mass murder Calgary has ever seen—Matthew de Grood walked into the Coast Plaza, a hotel in the city's northeast end. He was volunteering that Tuesday, donating his time to an event very close to his family's heart: an annual conference hosted by the Alberta Community Crime Prevention Association (ACCPA), a group dedicated to "bettering the safety of Albertans through education and awareness." Matthew's father—Insp. Douglas de Grood, a respected, 33-year veteran of the Calgary Police Service—was, as the association's vice-president, a key conference organizer. A long-time champion of crime-prevention initiatives, the inspector did everything from research speakers to hang posters around town. "His commitment was above and beyond the call of duty," says John Winterdyk, a criminologist at Mount Royal University who also serves as ACCPA's president. "Doug is an exceptionally wonderful person; he gives everything he can to the community."

[Food for inmates in court inadequate: lawyers](#)

The Canadian Press

A granola bar here, a cheese sandwich there — the lunches given to prisoners in Ontario courthouses don't provide nearly enough nutrition to allow them to properly defend themselves, some lawyers say. People in custody in the province's jails and detention centres get a good amount of food for breakfast, lunch and dinner, but that changes on days they are brought to court, says criminal defence lawyer Scott Reid. "In my experience the food they receive when they're at court is woefully inadequate," he says. Reid is one of several lawyers who have turned to formal court applications to get their clients more food.

[Experts Discuss Children's Behavioral Health and the Juvenile Justice System](#)

CSG Justice Center

More than 500 researchers, evaluators, administrators, parents, and advocates came together at the 27th Annual Children's Mental Health Research & Policy Conference, held in Tampa, Florida, on March 2–5 to discuss issues related to health, education, welfare, and juvenile justice. CSG Justice Center staff exhibited at the conference to highlight the work on the intersection of juvenile justice, school discipline, and behavioral health.

[Experts Refute Myths Linking Mental Illness, Violence](#)

Psychiatric News

"Despite an inclination to seek simplicity, violence is a large, complex problem, and we

have to keep its many parts in mind at the same time," Mark Rosenberg, M.D., M.P.P., told an Institute of Medicine (IOM) workshop on mental health and violence in late February in Washington, D.C. "Mental illness plays only a small role in violence, but that intersection is clouded by misconceptions and disinformation in the public's mind," said Rosenberg, co-chair of the IOM's Forum on Global Violence Prevention and president and CEO of the Task Force for Global Health in Decatur, Ga. Forum attendees heard presentations by three dozen researchers and advocates seeking points of early intervention to reduce violence against self and others.

Journal Articles, Research, and Presentations

[Systems analysis of community and health services for acquired brain injury in Ontario](#)

Brain Injury

The main results of this study revealed: (1) a lack of services for children/adolescents; (2) service gaps for individuals with co-existing mental health conditions; (3) a lack of services related to employment; (4) changes in casemix, in terms of more individuals with co-morbid medical and mental health conditions (with many of the organizations reporting medical instability and severe behavioural disorders as exclusion criteria); and (5) a need for more organizations to track patient outcomes for evaluation and/or accountability purposes.

[Mental health of Latin Americans in Canada: A literature review](#)

International Journal of Social Psychiatry

Results are reported in three sections: (1) the rates of mental illness; (2) the risk factors that affect mental health; and (3) the access and barriers to care and services. Findings indicate that despite the diversity of immigration from Latin America to Canada, much of the information on mental health focuses on Central American refugees. The most frequently examined risk factor is displacement as a consequence of political persecution and torture in the home country. Access to mental health services in this population seems to be limited by cultural differences and language barriers.

[A call to arms](#)

Canadian Psychology/Psychologie canadienne

The Honourable Edward F. Ormston of the Ontario Court of Justice was asked to be the Honorary President of the Canadian Psychological Association for 2012–2013. He has long been concerned about people with mental health difficulties who come into contact with the legal system and as a result of his concern and compassion was instrumental in establishing the first Mental Health Court in Canada in Toronto. Justice Ormston provides a strong voice for psychological prevention and intervention services in Canada. At the 2013 CPA Convention in Quebec City, Justice Ormston gave a key note speech concerning the need to psychology to be more active in Canada's health system. His speech is recreated in this article.

[What Influences Perceptions of Procedural Justice among People with Mental Illness Regarding their Interactions with the Police?](#)

Community Mental Health Journal

According to procedural justice theory, a central factor shaping perceptions about authority figures and dispute resolution processes is whether an individual believes they were treated justly and fairly during personal encounters with agents of authority. This paper describes findings from a community-based participatory research study examining perceptions of procedural justice among sixty people with mental illness regarding their interactions with police. The degree to which these perceptions were associated with selected individual (e.g., socio-demographic characteristics), contextual (e.g., neighborhood, past experiences), and interactional (e.g., actions of the officer) factors was explored. The results of regression analyses indicate that the behavior of police officers during the interactions appears to be the key to whether or not these interactions are perceived by people with mental illness as being procedurally just. Implications of these findings for improving interactions between the police and people with mental illness are discussed.

[Transitioning into the Community: Outcomes of a Pilot Housing Program for Forensic Patients](#)

International Journal of Forensic Mental Health

The Transitional Rehabilitation Housing Pilot (TRHP) was designed to transition hospitalized forensic patients to the community. Twenty clients and their clinicians in two Ontario cities completed measures on functioning, substance use, recovery, social support, and quality of life at admission to the program and then every 6 months until 18 months post-admission. Clients also responded to open-ended questions on the impact of

the program and living in the community on their recovery. Three (15%) clients re-offended. Eleven clients (55%) experienced rehospitalization; however, brief rehospitalization was seen as part of the recovery process. Level of community functioning was stable across time and 35% of clients had a decrease in the restrictiveness of their disposition order. Clients described numerous characteristics of community living that contributed to improvements in functioning, such as integration into the community, social contact, and newfound independence. Some aspects of TRHP that encouraged recovery included developing new skills and knowledge, staff support, and the programming that engaged clients in treatment and recovery-oriented activities. Findings suggest that forensic patients can transition successfully into the community with appropriate support and housing.

[Associations between ward climate and patient characteristics in a secure forensic mental health service](#)

The Journal of Forensic Psychiatry & Psychology

Ward climate is associated with patient satisfaction and, potentially, with improved outcomes but increased understanding of its relationship with individual patient characteristics is required. We investigated relationships between patient (N = 63) gender, perceived risk, risk behaviour, therapeutic engagement (session attendance), psychopathology and ward climate in a forensic psychiatric hospital. Lower security levels were significantly associated with better patient cohesion (PC), experienced safety (ES) and therapeutic hold (TH). Female gender predicted PC and ES. Higher perceived risk was associated with lower PC after controlling for security level and gender. Diagnosis of personality disorder or psychosis was associated with higher ES. Lower levels of engagement predicted greater TH. The relationship between patient characteristics and ward climate in forensic settings is complex. Prospective studies are needed to further establish determinants of ward climate, particularly those aspects of patient risk that are associated with poorer PC.

[Correctional Psychiatry: Challenges and Rewards](#)

Psychiatric Times

The increased incarceration of people with mental illness has created an increased need for mental health treatment in correctional settings. Practicing psychiatry in a correctional environment differs from traditional outpatient and inpatient venues and presents unique challenges. However, it can also be a rewarding choice of workplace.

[Assessment and Treatment of Challenging Behaviour for Individuals with Intellectual Disability: A Research Review](#)

Journal of Applied Research in Intellectual Disabilities

We review the current status of research relating to the assessment and treatment of challenging behaviour for people with intellectual disability. We briefly review the history of interventions for challenging behaviour that led to the development of function-based approaches widely in use today. We then discuss the various operant functions of challenging behaviour, functional behaviour assessment technologies and reinforcement-based interventions.

[Metacognitive group training for forensic and dangerous non-forensic patients with schizophrenia: A randomised controlled feasibility trial](#)

Criminal Behaviour and Mental Health

In schizophrenia, the presence of certain cognitive biases has been established. Informed by this, metacognitive training (MCT) has been developed for schizophrenia. There is increasing evidence of its effectiveness with some patients, but its applicability to dangerous patients has not yet been demonstrated.

[Mental health and the criminal justice system: The role of interagency training to promote practitioner understanding of the diversion agenda](#)

Journal of Social Welfare and Family Law

Historically there has been a significant under-recognition of mental health problems among people in the criminal justice system, and little research exploring the issues encountered by those with mental health problems who come into contact with the criminal justice system. Recent policy has highlighted the importance of early identification of mental health needs in criminal cases, and the role of diversion of offenders into appropriate mental health services. However research suggests that currently the provision of mental health services for offenders is patchy, and it has been suggested that improved interagency communication and training is required to improve the diversion of offenders with mental health problems into more appropriate mental health provision.

[Effects of small-scale, home-like facilities in dementia care on residents' behavior, and use of physical restraints and psychotropic drugs: a quasi-experimental study](#)

Small-scale, home-like care environments are increasingly implemented in institutional nursing care as a model to promote resident-directed care, although evidence on its effects is sparse. This study focuses on the effects of small-scale living facilities on the behavior of residents with dementia and use of physical restraints and psychotropic drugs.

[Emergency department utilisation among formerly homeless adults with mental disorders after one year of Housing First interventions: a randomised controlled trial](#)

International Journal of Housing Policy

Homeless individuals represent a disadvantaged and marginalised group who experience increased rates of physical illness as well as mental and substance use disorders. Compared to stably housed individuals, homeless adults with mental disorders use hospital emergency departments and other acute health care services at a higher frequency. Housing First integrates housing and support services in a client-centred model and has been shown to reduce acute health care among homeless populations. The present analysis is based on participants enrolled in the Vancouver At Home Study (n = 297) randomised to one of three intervention arms (Housing First in a 'congregate setting', in 'scattered site' [SS] apartments in the private rental market, or to 'treatment as usual' [TAU] where individuals continue to use existing services available to homeless adults with mental illness), and incorporates linked data from a regional database representing six urban emergency departments. Compared to TAU, significantly lower numbers of emergency visits were observed during the post-randomisation period in the SS group (adjusted rate ratio 0.55 [0.35,0.86]). Our results suggest that Housing First, particularly the SS model, produces significantly lower hospital emergency department visits among homeless adults with a mental disorder. These findings demonstrate the potential effectiveness of Housing First to reduce acute health care use among homeless individuals and have implications for future health and housing policy initiatives.

[The police, social services and psychiatry cooperation in Denmark—A new model of working practice between governmental sectors. A description of the concept, process, practice and experience](#)

International Journal of Law and Psychiatry

In 2004 a new model of working practice between three public sectors, the local Police Department, Social Services and Psychiatry/Mental Health Services (PSP) was introduced in the municipality of Frederiksberg, Denmark. The aim of this cooperation was to enhance support to vulnerable citizens, who do not belong solely to one of the three sectors and thereby often get lost in the system. The PSP cooperation was introduced to ensure that relevant information concerning vulnerable citizens was shared between the three sectors and to improve collaboration between the sectors involved in order to provide the needed support to the individual citizen. Due to the success of the PSP cooperation in Frederiksberg, the PSP model was implemented by law in Denmark in 2009.

[TEMPO: A contemporary model for police education and training about mental illness](#)

International Journal of Law and Psychiatry

Given the increasing number of interactions between police and people with mental illnesses (PMI), there has been widespread interest in the development of education for police about how best to interact with PMI. This paper reflects the review of current practice in a variety of jurisdictions across Canada as well as in the United States (U.S.), the United Kingdom (U.K.) and Australia; it proposes a comprehensive model of learning based on the literature that addresses not only the content in the narrow sense but also the importance of broader contextual knowledge and understanding in developing effective education and training. Embedded in the principles articulated in the Mental Health Strategy for Canada, the TEMPO (Training and Education about Mental illness for Police Organizations) model is a multilevel learning strategy for Canadian police personnel. Learning objectives and key principles are articulated in order to ensure the model is applicable to a wide range of police agencies and individual jurisdictional needs. In addition to providing a firm basis of factual knowledge for police personnel, the resultant model embraces a human rights/anti-stigma philosophy, provides for a range of education appropriate to diverse police audiences, emphasizes a systems approach to police/mental health liaison activities and addresses issues related to the delivery and implementation of police education and training.

Upcoming Events

[Mental Health Week](#)

CMHA introduced Mental Health Week (MHW) in 1951 to raise awareness of mental illness

in Canada. MHW today offers people practical ways to maintain and improve their mental health and support their recovery from mental illness. It also provides an opportunity for all Canadians to reflect on our attitudes and behaviours toward people living with mental health issues because we all need to work to reduce the discrimination and stigma associated with mental health problems.

May 5 - 11, 2014

[National Elizabeth Fry Week](#)

Each year, the The Canadian Association of Elizabeth Fry Societies (CAEFS) celebrates National Elizabeth Fry Week during the week leading up Mother's Day. Our goal is to enhance public awareness and education around victimized and criminalized women in Canada.

The majority of women who are criminalized and imprisoned are mothers. Most of them were the sole supporters of their families at the time they were incarcerated. When mothers are sentenced to prison, their children are sentenced to separation. We try to draw attention to this reality by ending Elizabeth Fry Week on Mother's Day each year.

May 5 - 11, 2014

[Canadian Association for Health Services and Policy Research Annual Conference](#)

CAHSPR's annual conference is Canada's largest gathering of health care researchers, decision makers, and stakeholders. Held at a different location every year, it is attended by 600+ delegates annually.

May 13 - 15, 2014 - Toronto

[National Schizophrenia & Psychosis Awareness Day](#)

On May 24, Schizophrenia Societies from across Canada come together to mark National Schizophrenia and Psychosis Awareness Day (NSPAD). On this day, and for the entire month, we encourage people to raise awareness about schizophrenia and psychosis, reduce stigma and participate in NSPAD events. This year's theme is "This Is Why," and will highlight the stories of people affected by schizophrenia and psychosis as the reason why we support NSPAD.

May 24, 2014

[2014 Annual Addictions & Mental Health Conference](#)

Addictions and Mental Health Ontario is pleased to announce its 2014 Conference to be held at the Marriott Toronto Airport, Toronto, Ontario on May 25th, 26th, & 27th, 2014 followed by its bi-annual Community of Practice meetings on Wednesday, May 28th, 2014. Attended by over 300 delegates, our conference continues to grow and deliver important and dynamic information, as well as offering an excellent networking opportunity to all participants.

May 25 - 27, 2014 - Toronto

[14th Annual Meeting of the International Association of Forensic Mental Health Services](#)

Trauma, Violence and Recovery: Risk and Resilience Across the Lifespan

June 19 - 22, 2014 - Toronto

[PSR Canada Conference](#)

Partners in Recovery - Uncovering Potential

September 22 - 24, 2014 - Toronto

Useful Links

[Dual Diagnosis Justice Issues Information, Northeast Regional HSJCC](#)

An increasing number of people with Dual Diagnosis are making admirable strides in residing, and playing an active role within our communities. With increasing participation and presence, and at times unique characteristics and support needs, there is the potential for people with Dual Diagnosis to come into conflict with the law. As a result, it is vital that police services and the criminal justice system be informed of the unique challenges of people experiencing developmental disabilities and mental health issues.

[Daily Court Lists](#)

This website publishes the daily court lists for the Superior Court of Justice (Ontario) and the Ontario Court of Justice.

[Mindset - Reporting on Mental Health](#)

General-assignment reporters are the first-responders of journalism. Impressions created by their stories, especially dramatic ones, can be highly influential on the public mind, and

the effect on stigma hard to erase. Learning the basic facts about mental illness, rather than relying on 'common knowledge' that can create or maintain stigma, is vital. News reporters cannot become well versed in everything they might cover, but mental illness is not the niche topic many have traditionally thought. It's a significant factor in everyday Canadian life. Almost any story a reporter is sent to cover can turn out to have a mental health aspect to it.

The above articles and event listings are just a sample of the hundreds of items posted to the [HSJCC website](#) each month.

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