

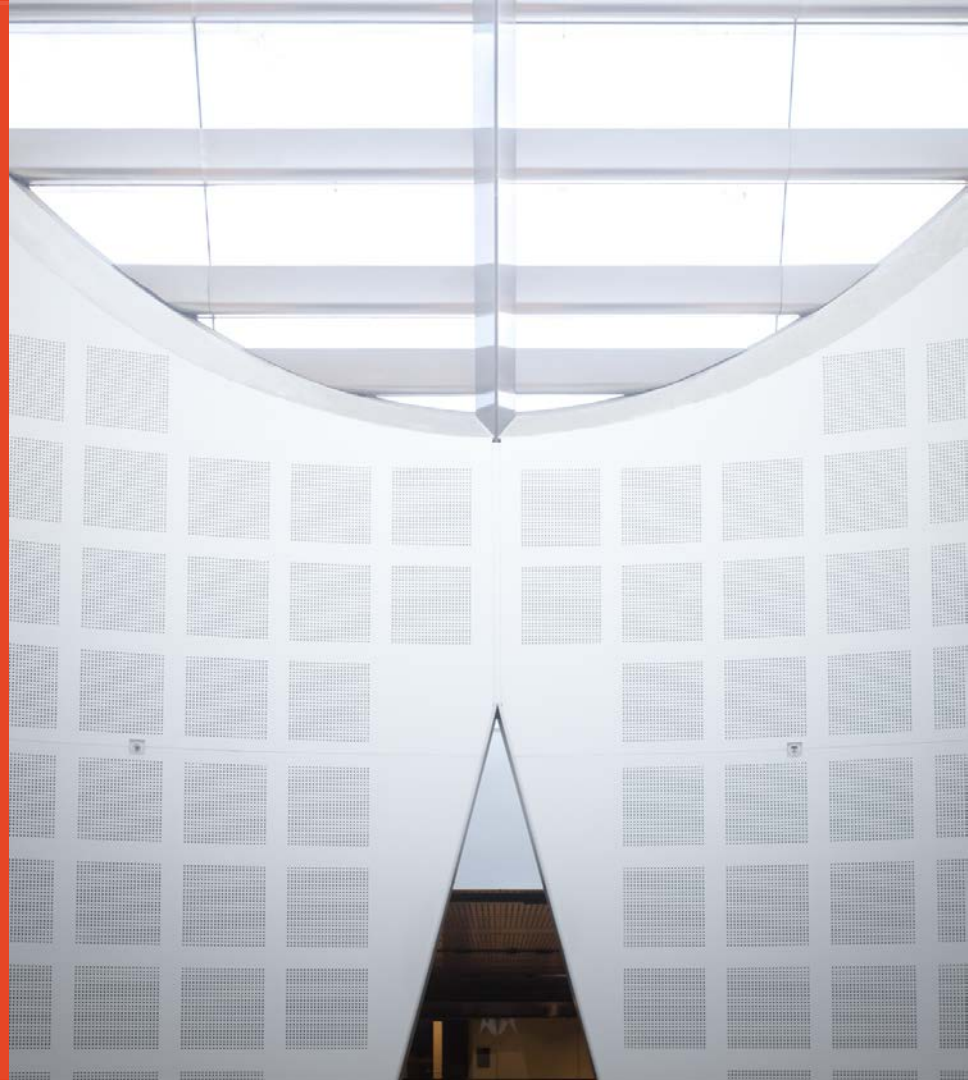
Changing Beliefs, Reducing Risk

Presented by

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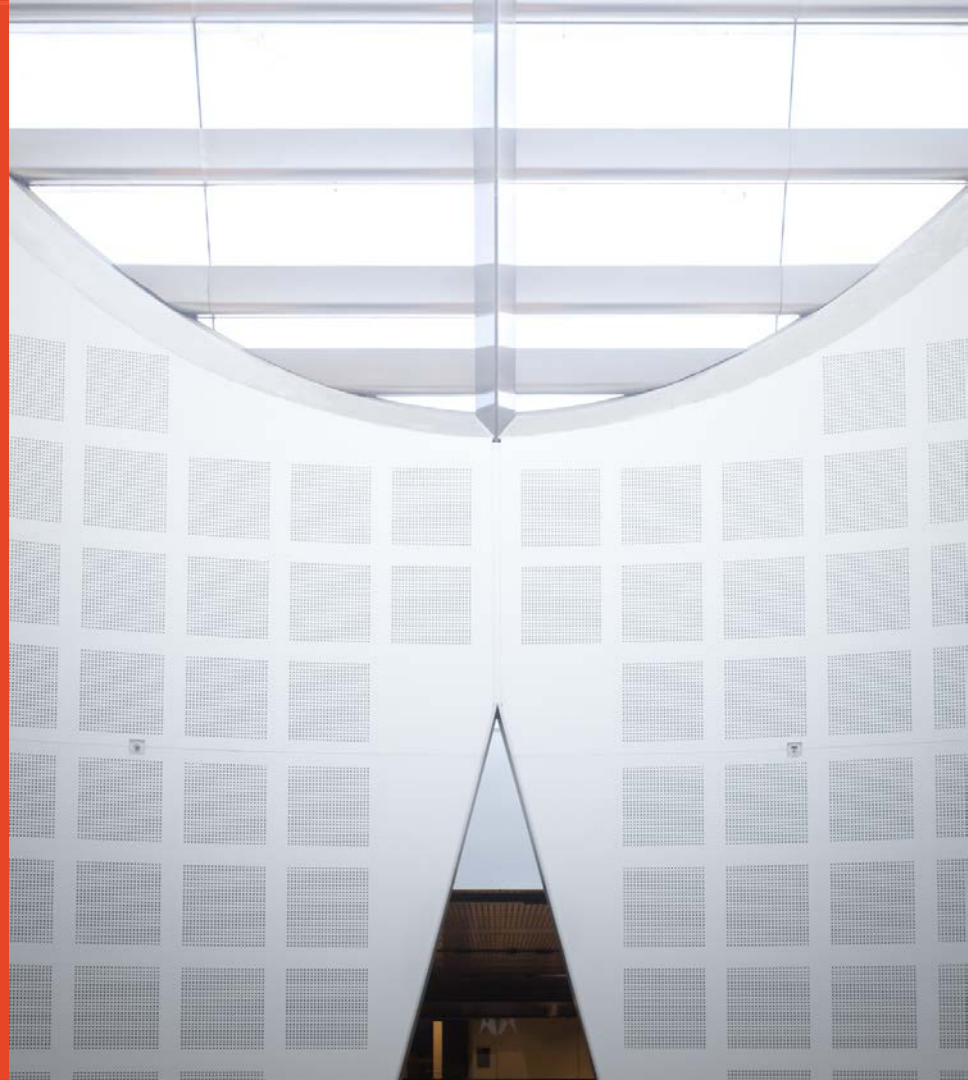


Acknowledgements

- Dr. Emma Barrett, Matilda Centre, University of Sydney
- Dr Katrina Prior, Matilda Centre, University of Sydney
- Health Education and Training Institute (HETI)
- All staff and individuals with a lived experience who have contributed to the development of this protocol



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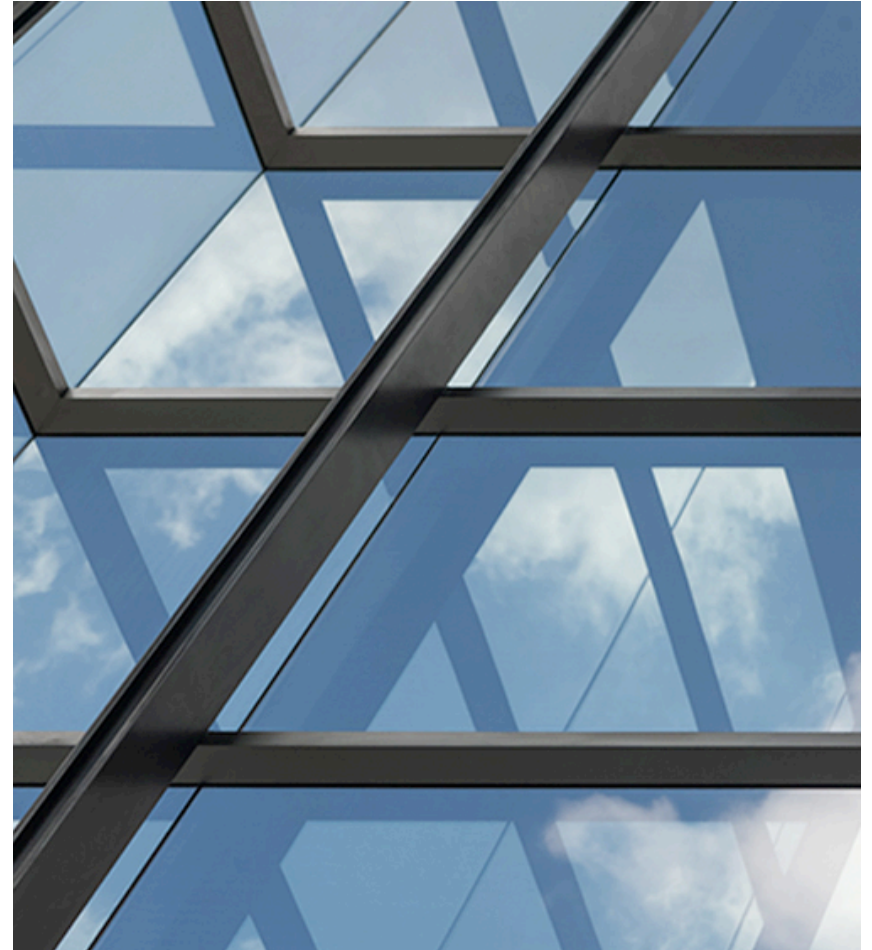
Protocol for a pilot evaluation of a CBT based dual diagnosis substance use treatment programme for mentally disordered offenders in a high secure forensic hospital



Who are mentally ill offenders/forensic patients?

These are mental health patients who have been found Not Guilty by Reason of Mental Illness (NGMI) of an unlawful act.

An unlawful act being a criminal act such as murder, sexual assault, armed robbery.



The NSW High Secure Forensic Hospital

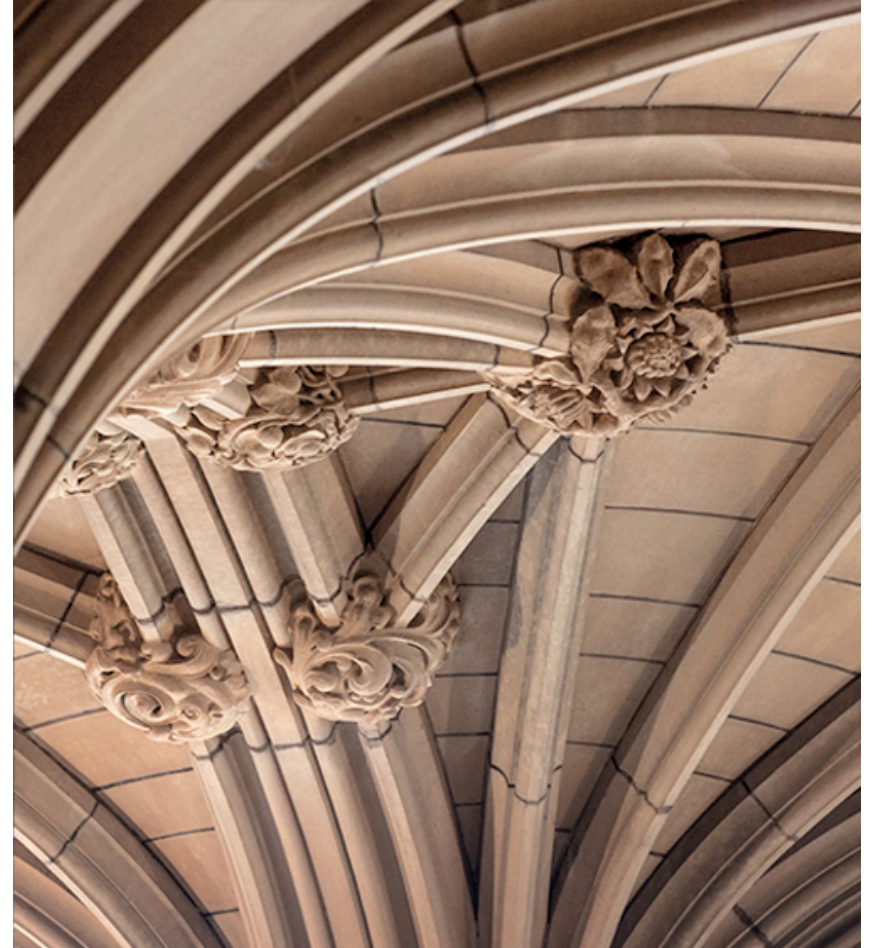
- 125 bed high secure environment
- 17 female beds & 6 adolescent beds
- 102 male beds – male units are Acute (Bronte), Sub-Acute (Clovelly), Rehabilitation & Long Stay (Dee Why), Rehabilitation (Elouera).
- Extensive facilities – art, music, education rooms, swimming pool, gym, football pitch, chicken coop, horticulture area, stage.



Forensic Patients and Dual Diagnosis

74% of inpatients in Australian high secure settings have a lifetime substance abuse or dependence disorder (Ogloff, 2004)

UK surveys have reported similar statistics



Forensic Patients

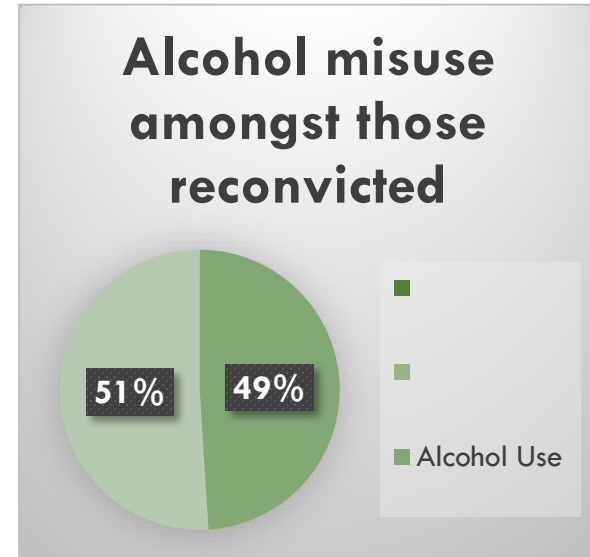
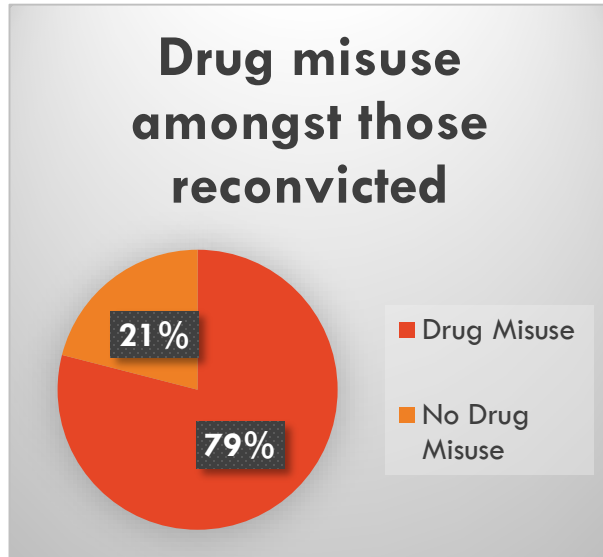
Dual Diagnosis forensic patients are more likely:

- To have more extensive criminal histories
- To be treated with anti-depressants or
- To be diagnosed with anti-social personality disorder

(Steele, Darjee & Thomson, 2003)

A UK survey of Forensic patients (n=959)

- follow up period of 24 months post discharge (Scott et al, 2004) - 15% (n=142) were reconvicted.



Substance Use Treatments in Forensic Settings

- Psychoeducational treatment programme currently in place in NSW Forensic Hospital
- Surveys of UK & Ireland practice have shown that although improvements have occurred in the last 15 years, standards continue to not be of adequate standard
- Psychoeducation has been found to be largely ineffective and have no association with cognitive or behavioural change, [6] [18].

Cognitive Behavioural Therapy & Motivational Interviewing – Dual Diagnosis

- Strong empirical support exists for using CBT as a treatment for Substance Use Disorder (McHugh, et. al, 2010)
- Motivational Interviewing continues to be a cornerstone technique in the treatment of individuals with substance dependence (Drake, et. al, 2004)
- Trials in forensic medium secure units using CBT & MI have shown positive effects in terms of changing beliefs around substance use (Miles, 2015)
- Outpatient trials of this approach have also shown improvement in the readiness to change of participants. (Martino & Carroll, 2006)
- This approach has yet to be trialled in a high secure Australian setting

Substance Use Treatment Programme (SUTP)© Miles

- 12 session CBT based treatment programme
- Facilitation of the programme is underpinned by motivational interviewing technique
- Session modules include: building motivation for change, alcohol & drug education, substance use & offending behaviour, self-esteem, functional analysis of substance use, assertiveness, craving

Substance Use Treatment Programme (SUTP)

Manual

© Dr Helen Miles (Consultant Clinical & Forensic Psychologist) - 2016



Art Work Courtesy of Previous SUTP Participants

Miles, H., "A new horizon?": Evaluation of an Integrated Substance Use Treatment Programme (SUTP) for mentally disordered offenders. *Advances in Dual Diagnosis*, 2015. 8(2): p. 90-101.

Potential Impact for Forensic Hospital Patients

- Currently the formal risk assessments are the primary determinant of a patients progress through the hospital
- HCR- 20 - “recent problems with insight”, “recent problems with treatment or supervision response”.
- Dundrum - “Drugs and Alcohol”, “Stability”, “Insight”

Potential Impact for Forensic Hospital Patients

- SUTP has demonstrated it can cause patients to change their beliefs around substances
- If this can occur then patients can move through the Stages of Change i.e. from pre-contemplation to contemplation and thus lower their risk level
- Collectively, patients could move through the FH faster with the evidence based SUTP in place

Outcome Measures in this mixed methods study

Baselines Assessment	12 Week Follow Up Assessment
Treatment Entry Questionnaire	Treatment Entry Questionnaire
Drug Taking Confidence Questionnaire	Drug Taking Confidence Questionnaire
Drug Related Locus of Control	Drug Related Locus of Control
Levensons Multi-Dimensional Locus of Control	Levensons Multi-Dimensional Locus of Control
	Client Satisfaction Questionnaire
	Working Alliance Inventory
	Qualitative Questions on treatment satisfaction

Hypothesis

- That the SUTP will prove acceptable, feasible and show preliminary efficacy amongst mentally ill offenders in a high secure forensic hospital
- Past studies have proven this in Medium Secure Unit's and shown changes in participants beliefs around substance use as well as readiness to change
- The pilot will commence in September 2019

Key Learnings

- Research “research” - grants, supervisors, topics
- Ethics – allow a lot of time to go through this process
- Ensure what you are planning is feasible within the timeframes you have
- Communicate with everyone and often

Thank You for listening! Any Questions?

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