

INTERNATIONAL ASSOCIATION OF
FORENSIC MENTAL HEALTH SERVICES

NEWSLETTER



VOLUME 7 | ISSUE 4
Autumn 2022

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Letter from the Editor

*"I would rather sit on a pumpkin, and have it all to
myself, than be crowded on a velvet cushion,"*

Henry David Thoreau

As summer draws to a close in the Northern hemisphere (meanwhile our Southern hemisphere counterparts are moving into summer), I am happy to bring you our last issue of 2022 of the IAFMHS newsletter. This edition, I wanted to highlight that we are actively recruiting an Editorial Assistant. This position would be ideally suited to someone who is looking to build connections within the organization.

I also wanted to highlight a submission from our Early Career Corner, Associate Editor, which highlights an important issue affecting those of us in forensic mental health across disciplines: Burnout.

As always we invite contributions but also feedback regarding our newsletter content.

Sarah Coupland, Editor

FORENSIC MENTAL HEALTH NURSING

Cycling for Scotland

Michael Hughes, BA Nursing Studies, RMN, PG Cert Business Studies, Team Leader Forensic Community Mental Health Team, Lanarkshire, Scotland

Four to five million deaths per year could be averted if the global population was more physically active (World Health Organisation (WHO), 2020). The WHO global guidelines enable countries to develop evidence-based national health policies and support the implementation of the WHO global action plan on physical activity 2018-2030. There is already considerable evidence supporting the use of physical activity to enhance mental health, especially for people with depression. Biddle (2016) suggests the evidence concerning mental health effects is extensive, but still growing. Associations are clear, but more needs to be known about clinical effectiveness for some population groups and conditions, as well as about the underlying causal mechanisms responsible for what ancient societies have always been aware of, i.e., that "movement is good for you" and sloth is associated with poor mental and physical health.

Physical Health Initiative

Forensic Community Psychiatric Nurses (FCPN) from a community team in Central Scotland introduced a cycling initiative in an attempt to improve the physical health of their patients, knowing that "people with serious mental illness disproportionately experience and die early from physical health conditions" (Mwebe, 2016, p3608). The primary focus of the service is to provide support to enable recovery, whilst monitoring and managing the risk of violence. The people on the caseload of the Forensic Community Mental Health Team (FCMHT) were presenting with increasingly negative symptoms of their psychotic illnesses, with lack of structured activity, apathy and demotivation adversely impacting upon their engagement. The FCMHT recognised the associated increase in obesity, diabetes and hypertension which impacted upon the patients' daily lives, and it was evident that physical health standards were not being met. WHO(2020) guidelines on physical activity and sedentary behaviour good practice statement indicates **"Adults with these chronic conditions should start by doing small amounts of physical activity and gradually increase the frequency, intensity and duration over time"** and "some

Michael Hughes,
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Studies



activity is better than none."

One particular patient had a previous interest in bicycles, he also had former involvement in cycling maintenance. A collaborative venture was established between staff and this individual resulting in the development of an on-site bicycle repair shed, which he initially attended on a 1-1 basis. The result was a significant improvement in his mood and improved level of engagement.

Following the success of this 1-1 initiative, other patients were gradually introduced to the same initiative and requests were made to local residents for donations of bicycles. Additional staff and patients were then trained in bicycle maintenance, and the repaired bicycles redistributed to a wider group of forensic patients. This was the genesis of a cycling group.

The group continued to expand in number and progressed with advanced training in bicycle leadership. It was important to recognise the potential for patients to undergo the same training as staff, to enable them to jointly lead groups and participate on an equal footing.

(Continued on next page...)

Editorial Team

Sarah Coupland, Editor

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Samantha Zottola, Editorial Assistant,

Policy Research Associates (USA)

Evan Lowder, Associate Editor – Mental Health

Diversion, George Mason University (USA)

Helen Walker, Associate Editor – Forensic

Mental Health Nursing, NHS Forensic Network (GBR)

C. Adam Coffey, Associate Editor – Early Career

Corner, Lithia Forensics and Consulting (USA)

Lillian Bopp, Student Section Editor, University of Nebraska-Lincoln (USA)

FORENSIC MENTAL HEALTH NURSING

Cycling for Scotland (continued...)

The subsequent improvement in patients' exercise levels had the resultant physical health benefits, but secondary gains were also evident. Patients reported feeling much more relaxed and at ease as the groups generated natural and informal interaction. Their confidence and self-esteem grew and they felt safe. Some also reported a reduction in positive symptoms, such as auditory hallucinations, during the activities and it was evident the activities had the propensity to sustain re-engagement for some who may not otherwise have engaged.

On reflection, the initiative widened the horizons of FCPNs in the team, all of whom now readily recognise the need to adopt a holistic approach and address patients' co-existing physical health issues. The development of a dedicated health and wellbeing group to support and expand this FCMHT initiative continues to evolve, with the intention of providing support and information on diet, exercise and healthy options.

This is an excellent example that highlights the potential of a small scale initiative worthy of service evaluation.

EARLY CAREER CORNER

Early Career Burnout: What It Is & What To Do About It

C. Adam Coffey, Ph.D., Lithia Forensics and Consulting (USA)

I have always really enjoyed conducting forensic evaluations. The art and science of communicating nuanced clinical opinions within a legal context that tends to favor black-and-white/either-or conclusions has been a stimulating intellectual challenge, and the feelings of professional satisfaction I have enjoyed after being informed that my work was helpful tend to stick with me long after my involvement in a case has concluded. So, when I started to dread new referrals coming in, my initial reaction was one of shock and, later, guilt. At first, I reasoned that I was just tired and that this feeling would dissipate. So, when I felt the same way for several months thereafter, I was especially concerned. I found myself unable to concentrate when interviewing and writing, and completing an evaluation yielded more relief than satisfaction. I remember thinking, "I'm only in the second year of my career. What's going on here? Why do I feel this way?"

I was burnt out. To me, the onset of burnout seemed sudden but, as I have reflected on the experience, it certainly seems to have come on in a more insidious way

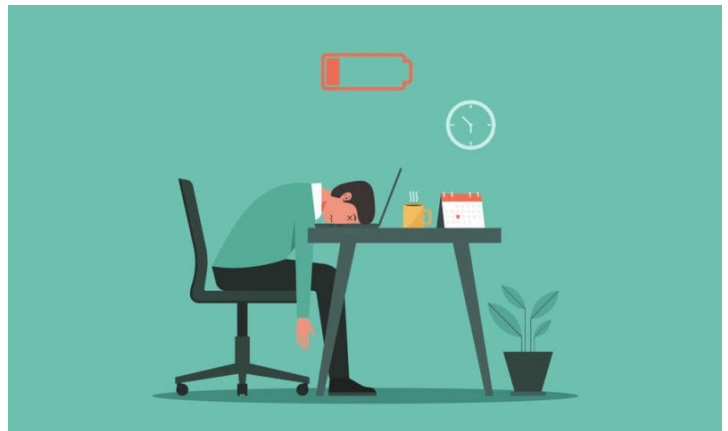
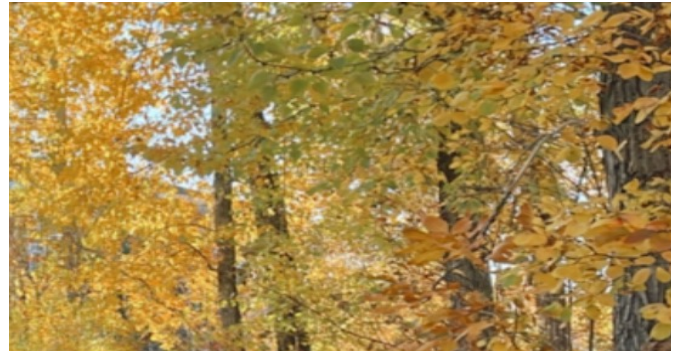
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If you are a forensic mental health nurse who is interested in submitting a piece, please do not hesitate to contact **Helen Walker** at: helen.walker6@nhs.scot



than I initially realized. The many months of taking on numerous cases at once, coupled with a relative lack of attentiveness to my emotional experiences and personal relationships, had finally caught up with me. I have come to understand that, even though I was and remain passionate about forensic work, passion alone is not enough to ward off burnout. (Continued on next page...)

EARLY CAREER CORNER

Early Career Burnout: What It Is & What To Do About It

(Continued...) Can you really burn out on something you are passionate about? Yes, you absolutely can.

Burnout is generally understood to be a type of work-related stress that results in physical and emotional exhaustion. It can also lead to a reduced sense of personal and professional accomplishment and a loss of personal identity, along with feelings of hopelessness and cynicism. It is important to note that, while burnout is related to stress, its effects often closely mirror those of depressive and anxiety-related disorders, namely, diminished enjoyment of one's work and other life domains, avoidance of work-related tasks, considerable nervousness and problems concentrating, and a host of negative emotion states (Smith, Segal, & Robinson, 2022). Recent research on burnout among mental health professionals found that anywhere from 21-61% of mental health practitioners experience signs of this condition each year, which appears to be fairly evenly distributed across those who primarily conduct assessments and those who mainly provide treatment (Morse et al., 2019). Occupational factors known to increase one's likelihood of experiencing burnout include heavy caseloads, conflictual and competitive workplace climates, and difficult client characteristics, while personal factors associated with burnout include perfectionistic tendencies, poor work-life balance, and reluctance to delegate tasks (Smith, Segal, & Robinson, 2022).

So, what can be done?

Due to the high rates of burnout among medical professionals during the COVID-19 pandemic, numerous strategies for combatting burnout have become more widely discussed. Some of these strategies include:

- Establish a daily routine that prioritizes building and enforcing work-life balance.
- Build breaks, personal check-ins, and disconnections from technology into your schedule.
- Bolster physical and emotional well-being by engaging in exercise and mindfulness.

- Reach out to those closest to you, such as your partner, family, and friends.
- Connect with a cause or community group that is personally meaningful to you.
- Seek assistance from a therapist.

At a broader level, the field of forensic mental health needs to bring clinician wellness and burnout to the forefront of professional discussion and inquiry. My discussions with colleagues from various disciplines suggest my recent experiences are far from uncommon. Perhaps this is related to the saliency of my recent experiences, but it seems that early career professionals are particularly vulnerable to burnout. By the time we get out of graduate school, we are excited to start making a difference (and to start making money). We are compassionate, high achieving, and enthusiastic people. The job opportunities that once seemed like distant possibilities are now objective realities, and when those opportunities knock, we often eagerly open the door. We look around and see all of these problems that we want to fix, all of these people who need our help. And, we can do all of those things. However, it is important to remember that we cannot do all of these things at once and I believe, most importantly, we cannot do any of them to the best of our ability if we do not first take care of ourselves.

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If you are an early career professional who is interested in submitting a piece, please do not hesitate to contact **C. Adam Coffey** at: coffey@lithiaforensics.com

Call for Submission to the Mental Health Diversion Section of the Newsletter

On behalf of the Mental Health Courts and Diversion Programs Special Interest Group (SIG), we are actively inviting submissions for the "Spotlight on Mental Health Diversion" section. The goal of this section is to highlight new, emerging, or novel mental health diversion initiatives or evaluations that address the needs of adults with behavioral health disorders in the criminal-legal system.

If you are a practitioner or researcher engaged in new or novel mental health diversion initiatives and would like to see your work highlighted, contact **Evan Lowder** at elowder@gmu.edu.

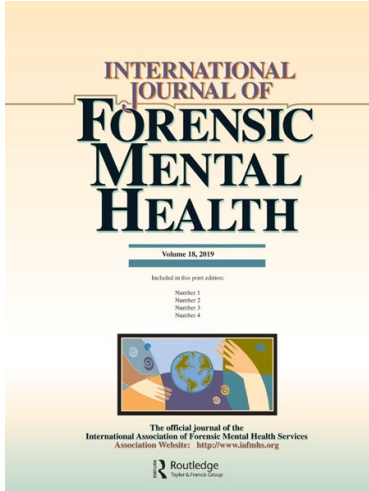
Feature Article

Understanding Current Staff Experiences, Practices and Needs in Supporting Young People with Neurodevelopmental Disorders in the Queensland Youth Justice System

Alanna Heanue^a, Matthew J. Gullo^b, Nicole Hayes^c, Hayley Passmore^d, & Natasha Reid^c

^aSchool of Psychology, University of Queensland, Brisbane, AUS; ^bNational Centre for Youth Substance Use Research, University of Queensland, Brisbane, AUS; ^cChild Health Research Centre, University of Queensland, Brisbane, AUS; ^dTelethon Kids Institute, Perth, AUS;

Young people with neurodevelopmental disorders are overrepresented in the youth justice system and face many disadvantages due to their impairments. The current study investigated what factors predict and contribute to the behavior of youth justice professionals working in the Queensland (QLD) youth justice system, utilizing a behavior change wheel framework. Eighty-one youth justice professionals participated in an online survey assessing capability, opportunity and motivation and additional open-ended questions capturing their recommendations for improvement. Results demonstrated that training frequency, capability, opportunity and motivation significantly predicted behaviors to identify and support young people with neurodevelopmental disorders (i.e., target behaviors). Capability ($p = <.001$) and motivation ($p = .02$) were significant independent predictors of the target behaviors. Examination of open-ended responses provided by the youth justice professionals identified several key areas, consistent with existing literature, which were in need of modifications to further support young people with neurodevelopmental disorders. These included: use of language, availability of resources, increased liaison with stakeholders, and knowledge and understanding of neurodevelopmental disorders. Overall, the current results provide helpful directions in terms of future targets for implementation strategies and interventions to better support young people with neurodevelopmental conditions who are involved with the QLD youth justice system.



CALL FOR EDITORIAL ASSISTANT

The IAFMHS is currently seeking an editorial assistant for its newsletter. The editorial assistant works closely with the editor to develop the content and formatting of the quarterly newsletter. The role offers valuable editorial experience and opportunities for network development in the field of forensic mental health.

The role is open to all IAFMHS members and may be of particular interest for trainees. The position is a 2-year voluntary service position that will start on July 1, 2023.

To apply, please submit your CV to the the editor, Sarah Coupland (sarah_coupland@sfu.ca).

Typical tasks

- Assists the editor in developing the content of the newsletter
- Maintains contact with the authors, along with the editor
- Edits and/or proofreads submissions for publication
- Designs and formats the newsletter

STUDENT SECTION

Welcome from the 2022-2023 Student Board!

Lillian Bopp, M.S. – University of Nebraska-Lincoln, USA
IAFMHS Student Board President

As the year 2022 slowly comes to an end, it is that time of year again when we welcome a new group of enthusiastic and international students to the Student Board. Before introducing our new board, we would like to recognize and thank the outgoing Student Board for their excellent contributions to the student section this past year. During the 2021-2022 term, the Student Board hosted three well-received webinars on a diverse range of topics, continued and fine-tuned the Campus Representative and Peer Mentorship Programs, contributed to the “Spotlight” series for the newsletter, provided \$3,000 CAD in student awards, and launched a new fundraising initiative that involved the development of IAFMHS organizational coins and pins. The new Student Board is thrilled to continue the hard work and we look forward to generating new initiatives, while continuing to help grow existing ones. The fact that several board members were re-elected may also reflect our student members’ satisfaction with their commitment and service. Without further delay, I am very pleased and excited to introduce to you the new 2022-2023 Student Board:

IAFMHS STUDENT BOARD 2022 – 2023



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Volunteer Coordinator

Nisali Perera
Maastricht
University, NL



The new Student Board remains very international and diverse, with members located in three different countries. As an international group, we remain eager to integrate our diverse experience and knowledge to foster student-led research, offer leadership opportunities and provide resources for our membership across the globe. Please review our current student opportunities and get involved!

We are currently recruiting:



Campus representatives who will disseminate emails and opportunities to students in their institutions. Campus representatives are important allies in raising awareness of our organization and recruitment of new members.



Peer mentors (i.e., senior grad students and early career professionals) and **mentees** (i.e., undergrad and grad students) for our Peer Mentorship Program.

Visit us on our [student website](#) and social media profiles ([Twitter](#); [Facebook](#); [LinkedIn](#); [Instagram](#)) for student resources and helpful tools to enrich your education and professional development. On our website, you can access resources and information on upcoming conferences, webinars, journals (e.g., list of journals, becoming student reviewers), the peer review process, graduate school resources, etc. Please do not hesitate to reach out to us with suggestions on how we can improve your experience as an IAFMHS student member. Your feedback is very important to us! (students@iafmhs.org).

On behalf of the Student Board: Thank you! We look forward to creating new opportunities for our student members and making the most of the new term. Please stay tuned for further announcements and we hope to see you in Australia for our 22nd annual conference!

Lillian Bopp, M.S., IAFMHS Student President

