

Emerging Adults and Psychosis: What Supporters can do to Prevent and Navigate Criminal Justice Involvement

Why does it matter?

- Legal involvement is common among emerging adults with psychosis.
 - Psychosis in its acute phase prevents individuals from being able to discern what is real from what is not. As a result, their behavior frequently results in early law enforcement contact.
 - The police are often the first professionals called in to respond to a mental health crisis, and how they respond can have a lasting impact on the young person's life.
- A well-informed team can prevent legal involvement and advocate more effectively when needed.
 - Substance abuse and suicidality are common concerns among young people with psychosis, and create additional risk in interactions with the police.
 - Additional social factors such as race, gender and education may impact the likelihood of incarceration, particularly if the individual is Black, male and does not have a high school degree (Prince, Akincigil and Bromet, 2007).
 - Legal charges and incarceration can be a catalyst for help-seeking or can induce lasting trauma and discrimination.
 - Legal system professionals (law enforcement, defense attorneys and prosecutors, judges, etc.) come in contact with mental illness on a daily basis but are not always well-informed or equipped to respond in a way that is likely to prevent recidivism.

Plan ahead and be prepared.

1. **Act as a team.** To the degree possible, the youth, family, mental health clinician, and other key supporters should develop a shared plan.
2. **Understand psychosis!** Use the internet and attend workshops and classes. If you are involved with an early psychosis program, attend educational workshops. These workshops are an invaluable source of information on psychosis. Some free easy-to-access resources for psychosis education include the EASA website (easacommunity.org), the NAMI section on psychosis (<https://www.nami.org/Learn-More/Mental-Health-Conditions/Early-Psychosis-and-Psychosis/Treatment>), the RAISE project from the National Institute for Mental Health (<https://www.nimh.nih.gov/health/topics/schizophrenia/raise/index.shtml>), and the International Early Psychosis Association (<https://iepa.org.au/>).

3. **Become familiar with the young person's relapse signature, including signs, symptoms, triggers.** Review the timeline leading to crisis points/ prior law enforcement involvement, and identify what you can do to prevent or respond to symptom progression. Learning these early warning signs can help you know what to do, what to avoid, and when to reach out for help.
4. **Stay calm and be as supportive as you can while maintaining your boundaries.** Give each other space. Ignore what doesn't matter. Have simple rules. Family Guidelines such as those developed for multi-family psychoeducation can be very helpful in reducing conflict and stress.
5. **Be involved in the young person's mental health care** - attend counseling sessions, support groups, medical appointments, etc. Keep in contact with their treatment team (e.g. counselor, case manager, psychiatrist, etc.). They could provide information and record that will help the young person's case (e.g. a letter of verification for engagement with services, a psychoeducational explanation of psychosis, etc.).
6. **Pay attention to the risks the youth is facing and develop ways to reduce those by developing a crisis prevention and response plan with the young person.** If the person is experiencing acute psychosis, remove all weapons from the property and alert anyone who might provide access to weapons to the situation. Work as a team to identify potential risks and how to reduce those. For example, is the person experiencing command hallucinations, beliefs or perceptions which may alter their behavior? Is there a high level of conflict in the person's environment? Is there a risk of other impulsive or unsafe behavior based on current symptoms and behavior? Is the young person experiencing suicidal thoughts? [This](#) is a useful example of a crisis plan. Make sure that the crisis plan is shared with the local crisis team and others who need to be involved in implementing the plan (family, treatment team, etc.).
7. **Be aware of resources in the community.** What is your community's 24-hour crisis line number? Is mobile outreach available? Does law enforcement have a specialized Crisis Intervention Team? Are there separate mental health or drug courts available, and which types of crimes qualify? Disability Rights organizations (<http://www.ndrn.org/>) and the National Alliance on Mental Illness (NAMI, www.nami.org) can provide important information and advocacy.
8. **If a young person's behavior puts him/her at risk of law enforcement involvement, provide him/her with information about legal rights and how to interact with police officers.** (See youth tip sheet).

Interacting with law enforcement in a mental health crisis:

- Become familiar with your local community resources. In the event that you are in a situation that requires emergency attention, many communities offer Crisis Intervention Teams and mobile mental health crisis units. These professionals are often trained specifically in mental health issues and may be better able to understand your situation than police officers. In case the young adult does become involved with the legal system, become familiar with additional resources such as mental health court, court diversion, and sentencing alternatives.

- Inform officers of whether there are known weapons on the person or surrounding area (bag, car, home). Officers are interested in securing the environment, and this includes being aware of potential weapons.
- Do not leave the scene. If possible, inform officers of what is happening for the young adult, and remain nearby as a support for the young adult and a consultant for law enforcement.
- In the event that a young person requires transportation to a hospital, be aware of which local hospitals have psychiatric care units for their people their age and request that the youth be transported there.
- In the event that a young person is arrested and incarcerated, make contact as soon as possible with the mental health counselor at the jail or prison. Be persistent.

Advocating for the person after arrest:

1. **Help the young person to understand their situation. Sometimes psychosis interferes with accurate interpretation of why the person was arrested and a debriefing can help the person develop a better understanding.** Break information and tasks down into easy-to-understand tasks. Be patient and keep things simple. Psychosis impairs judgment and memory, and it's possible that the young person may not understand or even remember the events culminating in their legal involvement.
2. **Help your young person to stay on track with appointments** (e.g. court dates, meetings with their lawyer). Psychosis can impact their ability to stay structured and organized. Set up a calendar, do reminder calls, give rides, and whatever else you have the resources to provide.
3. **Consult with the young person's lawyer before providing any mental health records to the court.** This is essential to determining what may help your young person's case and what may be detrimental.
4. **Get in touch with advocacy organizations.** Disability Rights Oregon, the ACLU (American Civil Liberties Union, and NAMI (National Alliance on Mental Illness) Oregon provide local resources and advocacy services. On a national level, the National Center for Mental Health and Juvenile Justice (<http://www.ncmhjj.com/>) provides training and technical assistance aimed at improving policies and programs for young adults in the legal system.

Tips for Mental Health Professionals Working with Young Adults with Legal Involvement

When planning and supporting individuals who have been arrested and charged:

1. Develop a thorough conceptualization of your client's legal history, current legal status, and any requirements related to probation, parole, and conditional release. Administer a comprehensive risk assessment that collects the previously listed information and assess current areas of risk (e.g. impulsivity, impaired judgment, substance use, suicidality, homicidality, unstable living situation) during one of your initial sessions. Understanding the risk factors that may influence the young adult's interaction with the law can be key to prevention. Address these areas of risk in a thorough relapse prevention plan (e.g. "When I am feeling irritable and impulsive, I will call my EASA counselor.") Seek to understand your client's *perception* of their legal history and issues. Psychosis can often impair a person's ability to fully comprehend these areas, and the client may not understand the charges. Consequently, it is important that you also consult with outside references to develop a complete history. This can include the intake coordinator at your agency, the client's family, previous treatment providers, and legal professionals. *You are ethically and legally mandated to be transparent with your client about this process and obtain relevant releases of information before making contact.* You can also work with the client and their family to do a public records check to obtain past and current legal charges.
2. Once you have developed your conceptualization, explain it to your client in terms they understand. If you have permission, include the family in this de-briefing. *Be clear that you are explaining the situation to the best of your understanding and that you are not qualified to give legal advice.* Instead, your role is to determine how you can support and advocate.
3. Collaborate with your client in developing a treatment plan that addresses their goals. Plan out relevant interventions. These could include creating a relapse prevention plan to reduce risk of future legal charges, coordinating with the treatment team and community partners to allocate services (finding volunteering opportunities for community service), provide case management, and provide psychoeducation to the client and their family about how psychosis can impact interactions with the law. Make sure that you established action steps and a timeline that is consistent with legal obligations (contacting the client's attorney before a given court date).
4. *It is extremely important to exercise caution when sharing information about your client with legal professionals.* Ensure that you provide informed consent to and obtain permission from your client for every communication. Practice minimal and considerate disclosure.
 - a. For example, in a letter of verification of the client's enrollment in treatment, it may help to describe their involvement with specific services ("Client is actively pursuing a steady job through our supported employment program"). It would not be helpful (and unethical) to give a detailed description of their substance use history.

5. Maintain detailed notes on your involvement with your client's legal issues. Be clear that you are not providing legal advice. Consult with your supervisor, treatment team, colleagues, and relevant professionals as much as possible. Stay informed. This is especially relevant if you are subpoenaed to release your mental health records to a court.

Sources:

Amaresha, A., & Venkatasubramanian, G. (2012). Expressed Emotion in Schizophrenia: An Overview. *Indian Journal of Psychological Medicine*, 34(1), 12-20.

Linszen, D., Dingemans, P., Nugter, M., Willem Van der Does, A., Scholte, W., & Lenoir, M. (1997). Patient Attributes and Expressed Emotion as Risk Factors for Psychotic Relapse. *Schizophrenia Bulletin*, 23(1), 119-130.

Resources for clinicians:

- EASA Resources for Professionals: <http://www.easacommunity.org/resources-for-professionals.php>
- ACA Code of Ethics, 2014: <https://www.counseling.org/resources/aca-code-of-ethics.pdf>
- NASW Code of Ethics, 2008: <http://www.socialworkers.org/pubs/code/default.asp>

Resources for communities:

- <http://cit.memphis.edu/>
- <http://www.bazelon.org/News-Publications/Publications/List/1/CategoryID/7/Level/a.aspx?SortField=ProductNumber%2cProductNumber>
- National Center for Mental Health and Juvenile Justice: <http://www.ncmhjj.com/resources/publications/>
- U.S. Department of Justice Justice and Mental Health Collaboration Program: https://www.bja.gov/ProgramDetails.aspx?Program_ID=66