

Developmental Disabilities/ Acquired Brain Injury and the Justice System

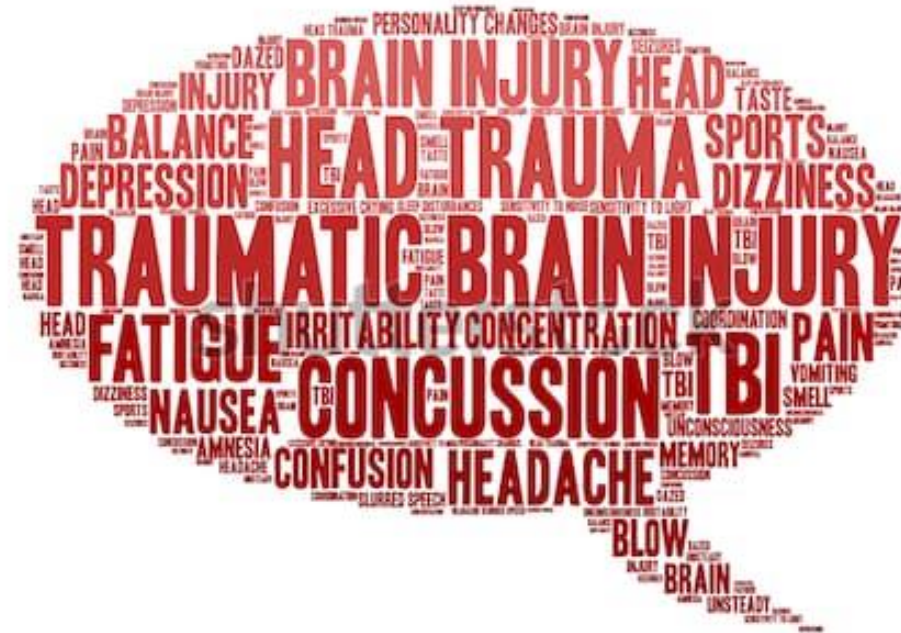
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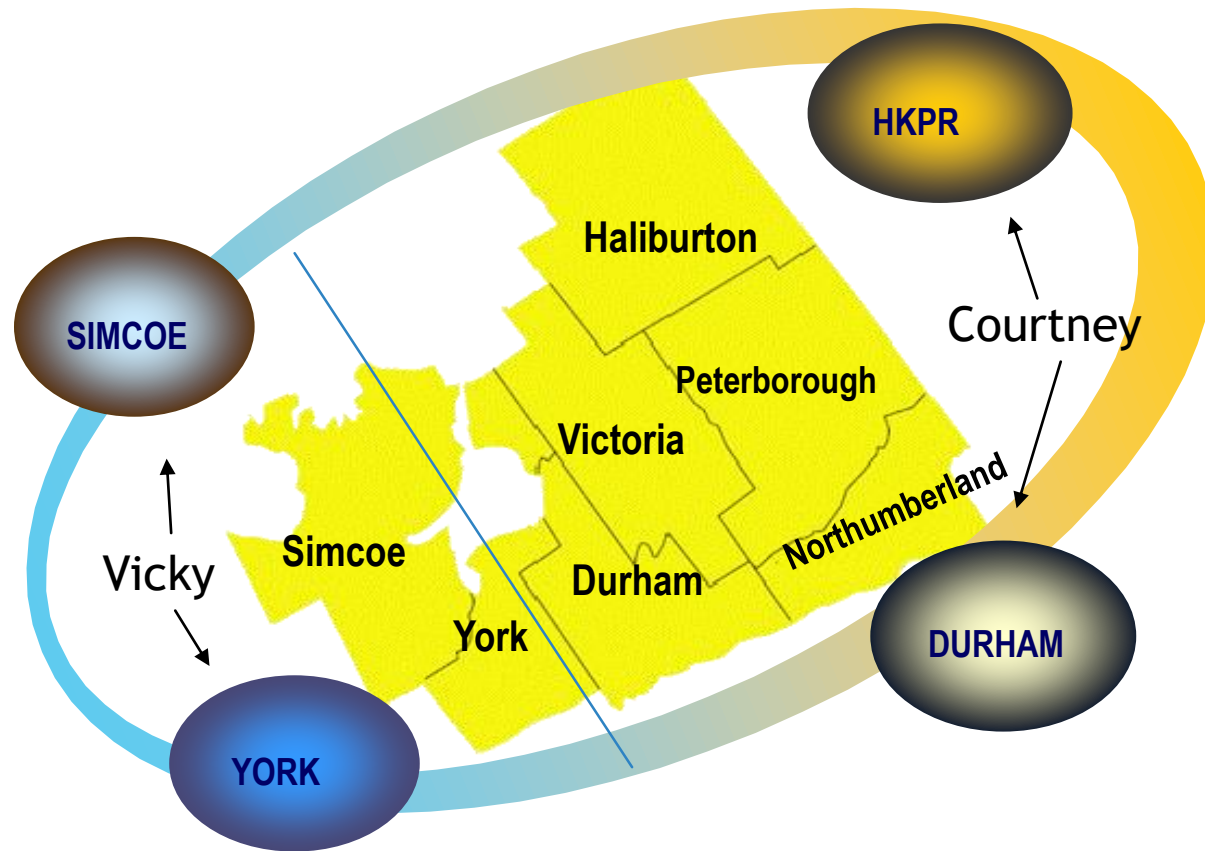
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Roles and Definitions

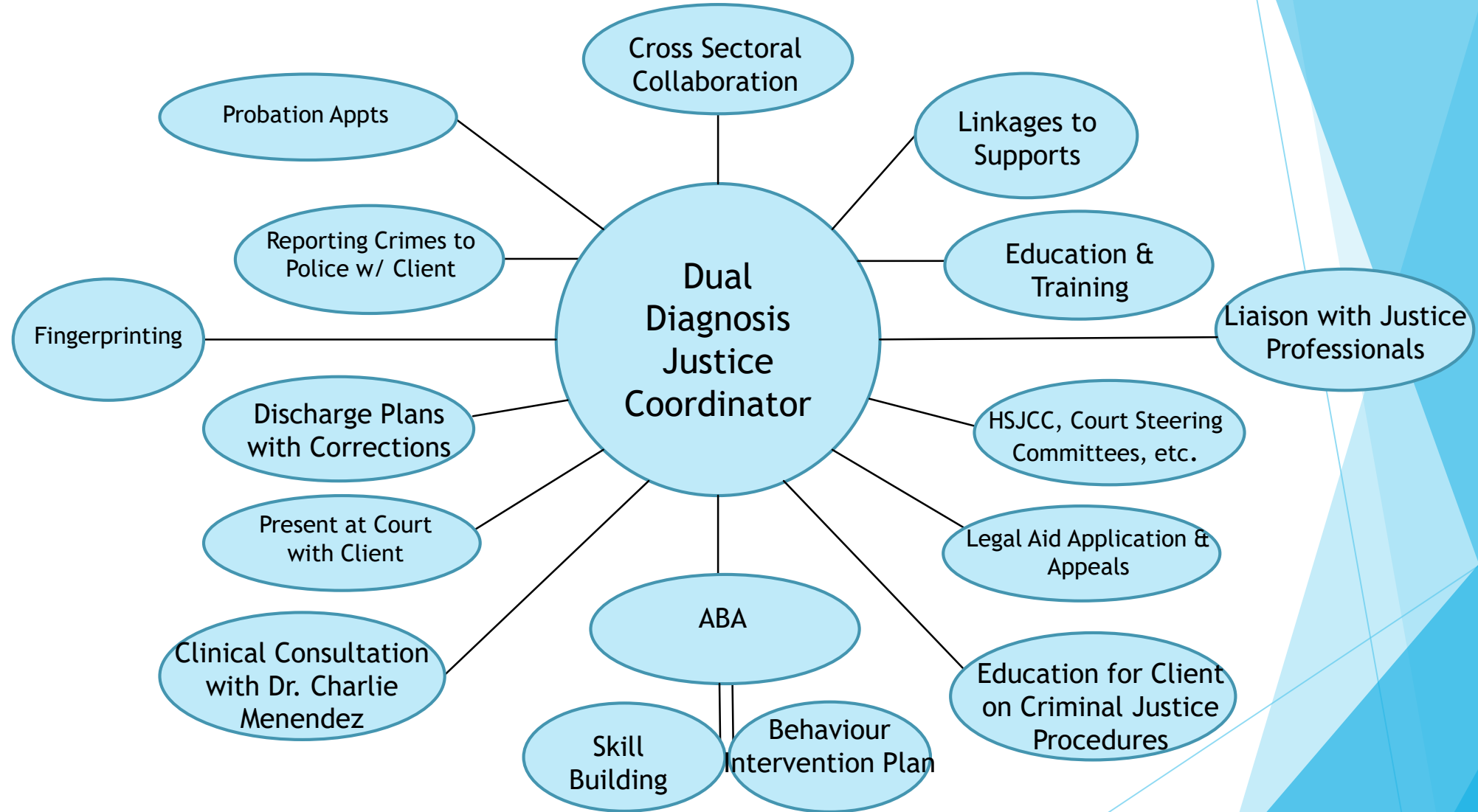


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CNSC-CE Dual Diagnosis Justice Coordinators (DDJC)



Role of the DDJC



Justice/ABA Partnership

- ▶ Between Community Networks of Specialized Care - Central East and Mackenzie Health, Centre for Behaviour Health Sciences
- ▶ Dual role between Justice Coordinator and Board Certificated Behaviour Analyst (BCBA)
- ▶ Creation and implementation of skill acquisition and behaviour intervention plans to assist the individual to successfully experience the justice system in an equitable manner

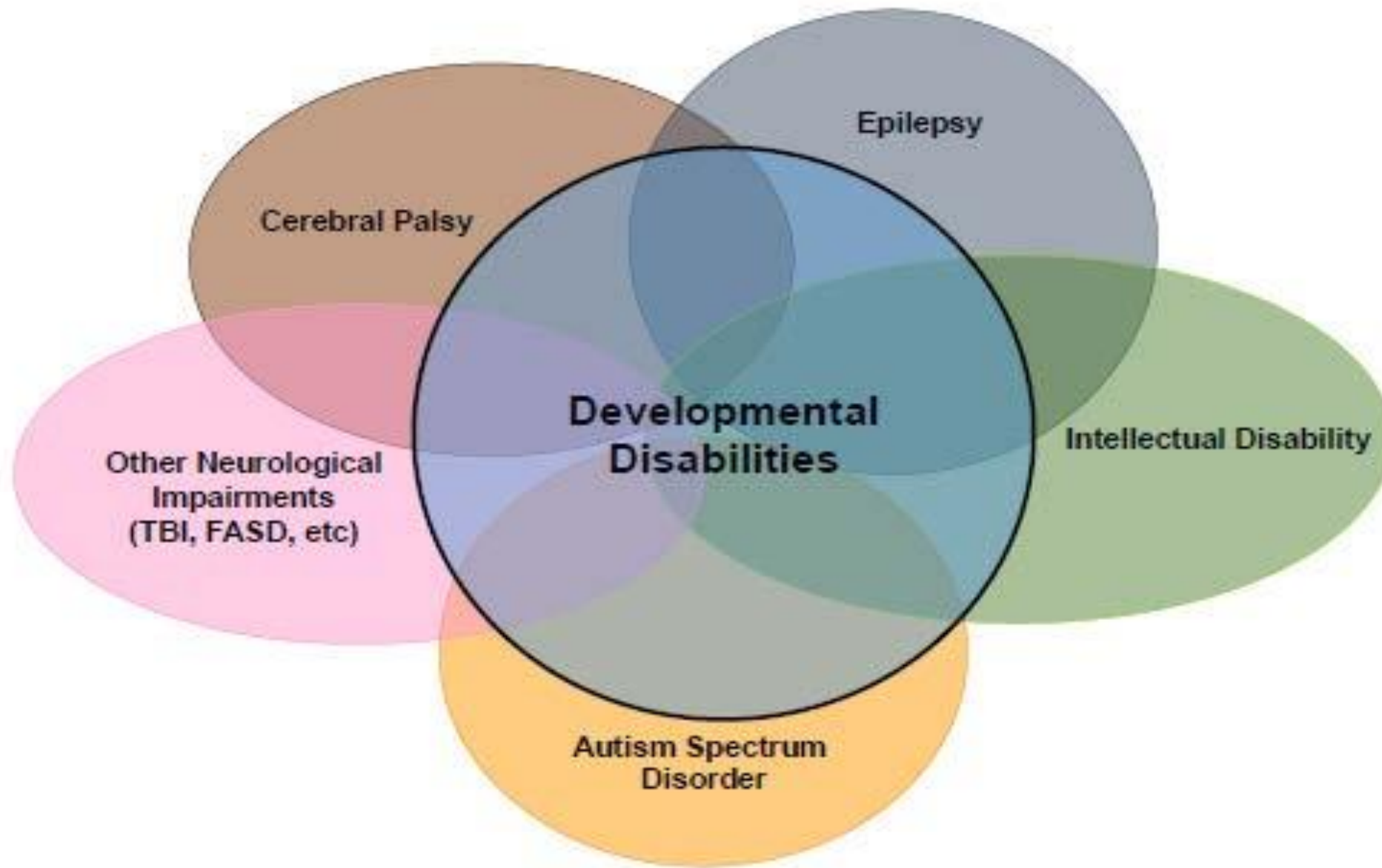


What is a Developmental Disability?

"Developmental Disabilities" is an umbrella term that includes intellectual disability but also includes other disabilities that are apparent during childhood

- ▶ Some developmental disabilities result in largely physical issues, such as cerebral palsy or epilepsy. Some individuals may have a condition that includes a physical and intellectual disability, for example Down syndrome or fetal alcohol syndrome

<http://aaidd.org/intellectual-disability/definition/faqs-on-intellectual-disability>



What is a Developmental Disability..Cont

1. Is attributable to a mental or physical impairment or combination of mental and physical impairment;
2. Is manifested before the individual attains age 22;
3. Is likely to continue indefinitely;
4. Reflects the individual's need for individualized life long or extended duration supports

Griffiths, D. M., Summers, J., & Stavrakaki, C. (2002). *Dual diagnosis: An introduction to the mental health needs of persons with developmental disabilities*. Sudbury, Ont: Habilitative Mental Health Resource Network.

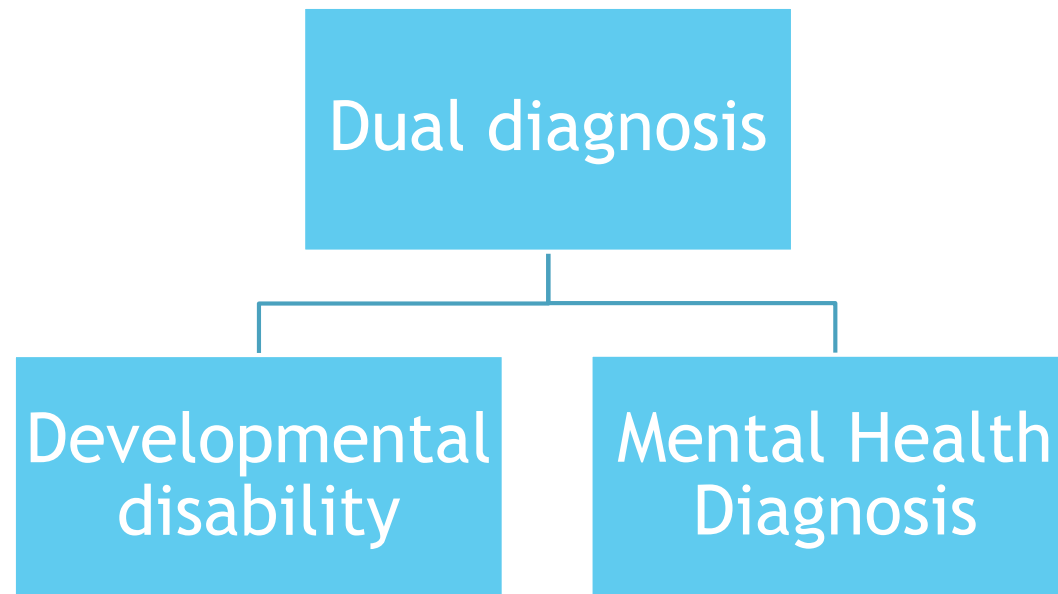
What is a Developmental Disability..Cont

5. Results in substantial functioning limitations in 3 or more of the following areas of major life activity:

- *Self-care*
- *receptive/expressive language*
- *learning*
- *mobility*
- *self-direction*
- *capacity for independent living*
- *economic self-sufficiency*

What is Dual Diagnosis?

- ▶ When one has both a developmental disability and a mental illness
- ▶ Example: an individual who is diagnosed with Down Syndrome but also has a diagnosis of depression



Griffiths, D. M., Summers, J., & Stavarakaki, C. (2002). *Dual diagnosis: An introduction to the mental health needs of persons with developmental disabilities*. Sudbury, Ont: Habilitative Mental Health Resource Network.

Some Facts

- ▶ People with developmental disabilities represent 2-3% of the general population BUT they represent 2-10% of the prison population
- ▶ Most offenders with disabilities (75%) are not identified at arrest, and some (10%) are not identified until in prison
- ▶ Individuals with severe or profound disability are rarely involved with the justice system as perpetrators, instead they are vulnerable to becoming victims of a crime

Dual Diagnosis Justice Tool Kit

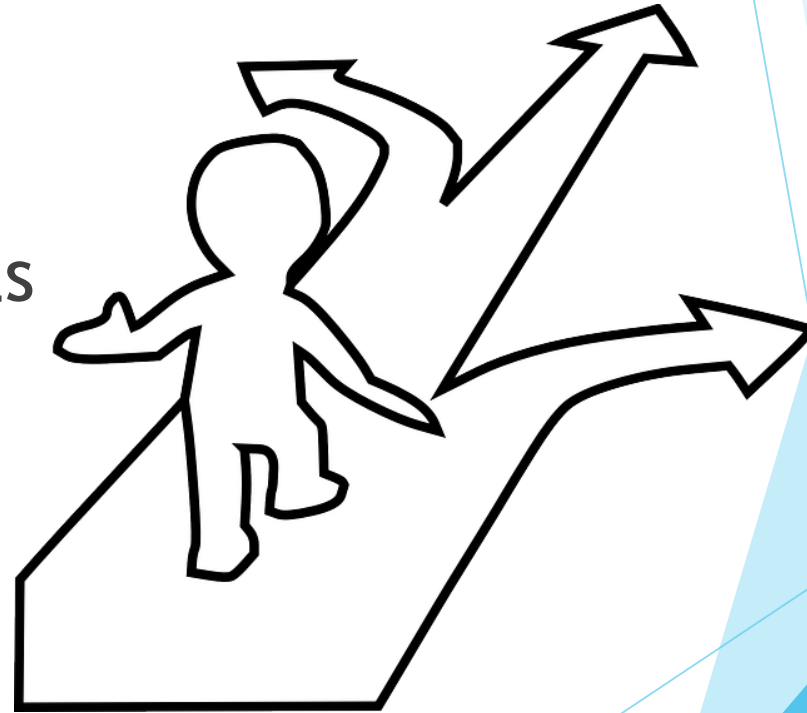
<http://www.community-networks.ca/services/developmental-disabilities-justice-toolkit/>

Griffiths, D. M., Summers, J., & Stavrakaki, C. (2002). *Dual diagnosis: An introduction to the mental health needs of persons with developmental disabilities*. Sudbury, Ont: Habilitative Mental Health Resource Network.

Role of the ABI Navigator

- ▶ Education
- ▶ Link resources
- ▶ Identify system gaps
- ▶ Identify hard to serve individuals

Note: There is currently no specific ABI and justice role within York/Simcoe



Overview of Brain Injury

- <https://youtu.be/XrzX6i5anFo>

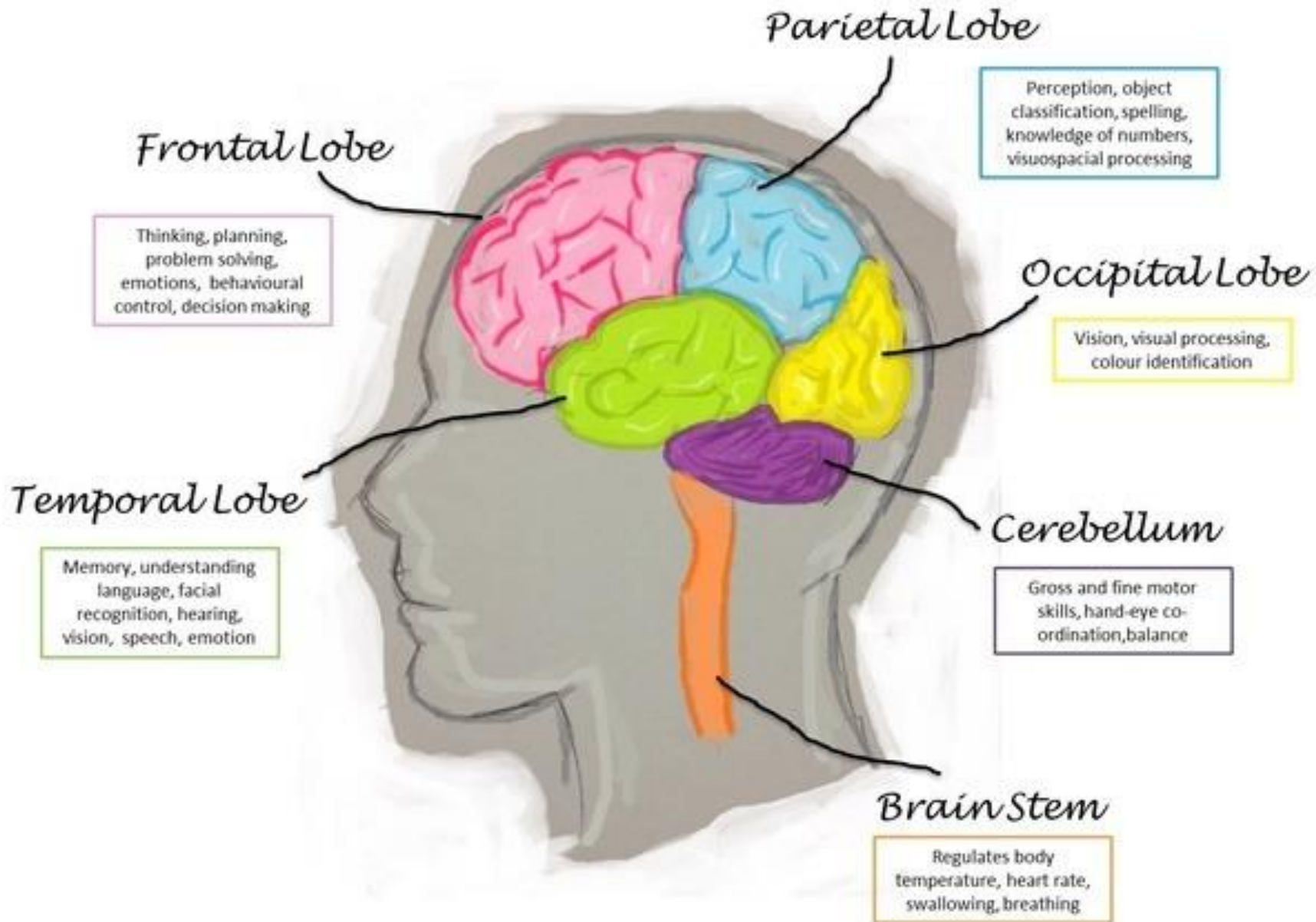


What is a Brain Injury

- **Acquired Brain Injury (ABI)** is damage to the brain that occurs after birth from a traumatic or non-traumatic event. ABI is not related to a congenital disorder or a degenerative disease, such as Alzheimer's Disease, Multiple Sclerosis or Parkinson's Disease.
- **Traumatic Brain Injury (TBI)** is damage to the brain caused by a traumatic event such as, a blow to the head, a fall, a motor vehicle collision or a sports related injury.
- **Non-Traumatic Brain Injury** is damage to the brain caused by illness such as meningitis or encephalitis, oxygen deprivation (anoxia) or stroke.

Some Facts

- ▶ Close to half a million Ontarians are currently living with acquired brain injury. Over 43,000 new cases are added every year (2018 statistic).
- ▶ Having a ABI increases the risk of sustaining another occurrence of ABI
- ▶ Involvement in the justice system (42 to 66 per cent of male inmates and approximately 33 per cent of female inmates have had at least one brain injury)
- ▶ In Ontario, men and women who sustained a TBI were about 2.5 times more likely to be incarcerated than men and women who had not sustained a TBI. (McIsaac et al.,)
- ▶ Seeing an increase in ABI individuals who have additional diagnosis of:
 - mental health (up to 80 per cent comorbidity)
 - addictions (up to 50 per cent premorbid ABI, an additional 25 per cent post ABI)
 - living in shelters or at risk of losing housing



The Impact



Typical Cognitive Challenges of a DD or ABI



- ▶ Short Term Memory
- ▶ Attention
- ▶ Information Processing
- ▶ Judgment
- ▶ Impulsive
- ▶ Frustration/Emotional Control
- ▶ Social Cues
- ▶ Planning/Organization
- ▶ Communication

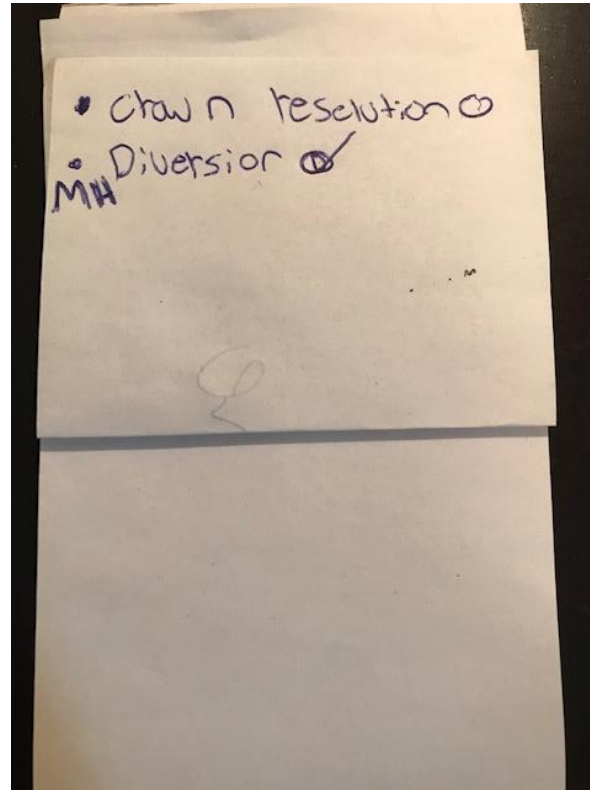
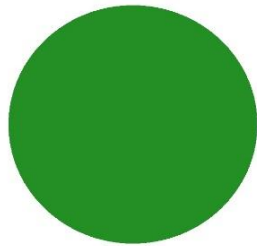
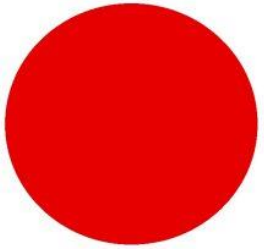
What You May See

- ▶ Missed and/or late appointments
- ▶ Rude Behaviour - interruptions, inappropriate comments

Example: Implementation of ABA program to assist individual with appropriate conversation skills in court house.

- ▶ Appear uninterested
- ▶ Repetitive questions and behaviours
- ▶ No Communication
- ▶ Frustration/Aggression
- ▶ Difficulty following court routine/procedures

Materials for Skill Acquisition Program



Identification

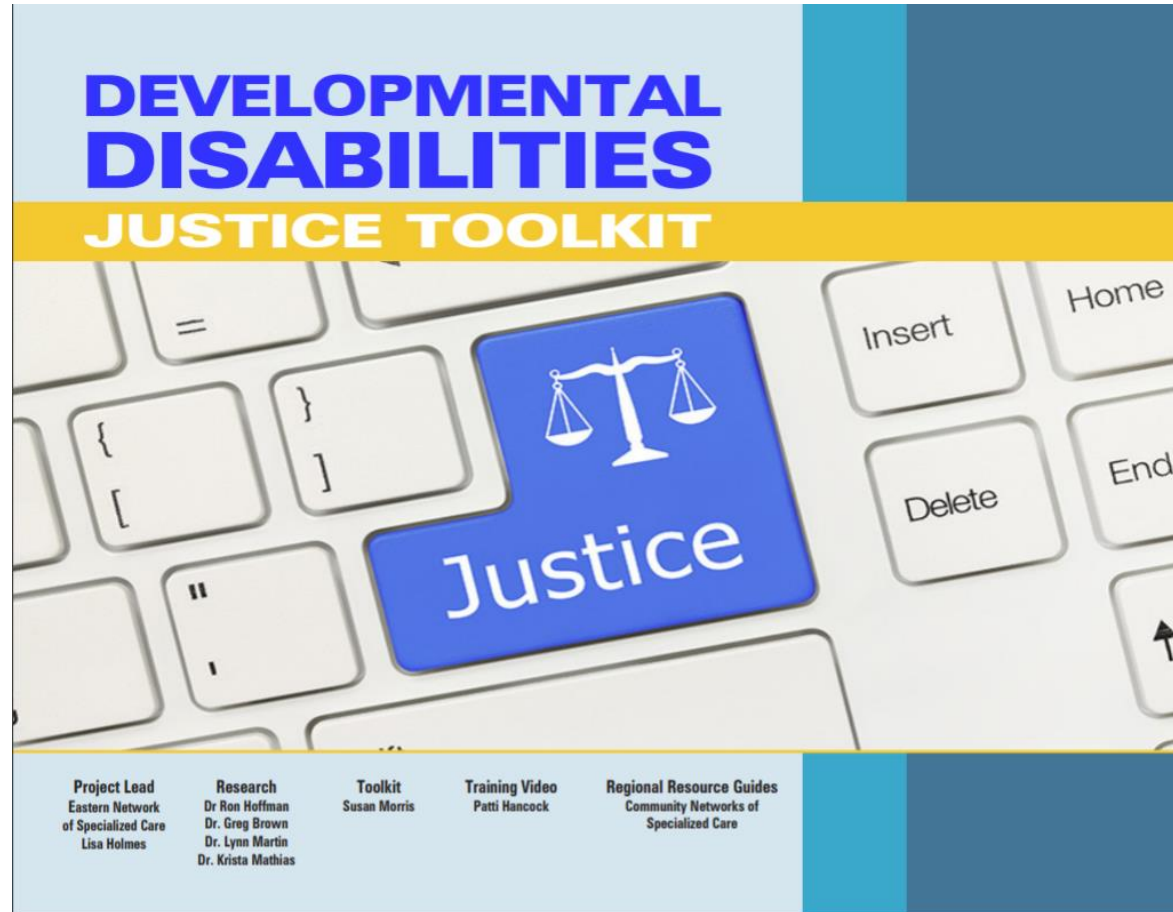


Opportunities to Screen for Disability

- ▶ At various points of contact within the justice system there is an opportunity to identify someone with an ABI or DD
 - ▶ Time of arrest
 - ▶ Holding cells - police station, court
 - ▶ Meeting with Council
 - ▶ At Detention Centre
 - ▶ Contact with Probation/Parole

Dual Diagnosis Justice Tool Kit

<http://www.community-networks.ca/services/developmental-disabilities-justice-toolkit/>



Justice Tool Kit-Key Message

- ▶ Early identification of victims, witnesses, suspects or offenders who may have a developmental disability is the most significant issue for justice and law enforcement professionals
- ▶ Adaptation of communication and interviewing approaches by criminal justice professionals can lead to more options for diversion and more opportunities for the individual with a developmental disability to effectively participate in the process with appropriate supports and services from the point of first encounter, and through to arrest, court, admission to a criminal justice facility and community supervision

Screening Tool Developmental Disability- General

Table 1 The RAPID Screening Tool	
The Rapid Assessment of Possible Intellectual Disability	
<i>Score '1' for each Yes and '0' for each No answer. 'Don't Know' answers should be scored '0'</i>	
1. Did you ever have any difficulties with classroom work or subjects at school?	
2. Did you ever have a Statement of Special Educational needs, or your own classroom assistant?	
3. Did you ever go to a special needs school or attend a special needs class?	
4. Did you ever need or receive extra help with: i. Reading ii. Writing iii. Maths	
5. Do you need help <u>now</u> with any of the following? i. Filling in Forms ii. Household tasks iii. Managing Money iv. Using Public Transport	
6. Have you ever been diagnosed with or has anyone ever said that you have: i. Learning Disabilities ii. Learning Difficulties iii. Dyslexia iv. ADHD v. Autism	
Yields a total score of 15, with a score of 3 being the threshold for further onward referral	
<small>Please note: The screening tool items are currently undergoing formal validation, and are strictly prohibited for use or reproduction without permission from the author</small>	

Salma Ali Scott Galloway , (2016),"Developing a screening tool for offenders with intellectual disabilities - the RAPID", Journal of Intellectual Disabilities and Offending Behaviour, Vol. 7 Iss 3 pp. 161 - 170

Informal Screening Tools for Fetal Alcohol Spectrum Disorder (FASD)

- ▶ ALARM - An acronym for Assessing Behaviours (Conry & Fast 2000, pp.16-23)
- ▶ STOP, LOOK, and LISTEN for signs of FASD

Website for information on FASD & Justice

<https://fasdjustice.ca/recognizing-fasd/screening-tools-and-strategies.html>

HELPS Screening Tool

- ▶ Brain Injury Screening Tool designed by Picard, Scarisbrick, Pauluck; International Centre for the Disabled, TBI-NET, United States 1992
- ▶ Intended for professionals whose primary field of practice is other than ABI
- ▶ Not sufficient to diagnose ABI as reason for current symptoms and difficulties - other possible causes need to be ruled out
- ▶ Recommended by the Ontario Provincial ABI Navigator and Provincial ABI Network
- ▶ <https://www.nashia.org/pdf/hotopics/pa-helps-screening-tool.pdf>

HELPS BRAIN INJURY SCREENING TOOL

Consumer Information: _____

Agency/ Screener's Information: _____

H Have you ever **Hit** your **Head** or been **Hit** on the **Head**? ☐ Yes ☐ No

Note: Prompt client to think about all incidents that may have occurred at any age, even those that did not seem serious: vehicle accidents, falls, assault, abuse, sports, etc. Screen for domestic violence and child abuse, and also for service related injuries. A TBI can also occur from violent shaking of the head, such as being shaken as a baby or child.

E Were you ever seen in the **Emergency** room, hospital, or by a doctor because of an injury to your **head**? ☐ Yes ☐ No

Note: Many people are seen for treatment. However, there are those who cannot afford treatment, or who do not think they require medical attention.

L Did you ever **Lose** consciousness or experience a period of being dazed and confused because of an injury to your head? ☐ Yes ☐ No

Note: People with TBI may not lose consciousness but experience an "alteration of consciousness." This may include feeling dazed, confused, or disoriented at the time of the injury, or being unable to remember the events surrounding the injury.

P Do you experience any of these **Problems** in your daily life since you hit your head? ☐ Yes ☐ No

Note: Ask your client if s/he experiences any of the following problems, and ask when the problem presented. You are looking for a combination of two or more problems that were not present prior to the injury.

- | | |
|---|--|
| <input type="checkbox"/> headaches | <input type="checkbox"/> difficulty reading, writing, calculating |
| <input type="checkbox"/> dizziness | <input type="checkbox"/> poor problem solving |
| <input type="checkbox"/> anxiety | <input type="checkbox"/> difficulty performing your job/school work |
| <input type="checkbox"/> depression | <input type="checkbox"/> change in relationships with others |
| <input type="checkbox"/> difficulty concentrating | <input type="checkbox"/> poor judgment (being fired from job, arrests, fights) |
| <input type="checkbox"/> difficulty remembering | |

S Any significant **Sicknesses**? ☐ Yes ☐ No

Note: Traumatic brain injury implies a physical blow to the head, but acquired brain injury may also be caused by medical conditions, such as: brain tumor, meningitis, West Nile virus, stroke, seizures. Also screen for instances of oxygen deprivation such as following a heart attack, carbon monoxide poisoning, near drowning, or near suffocation.

HELPS Screening

Scoring is considered positive when 3 items are identified:

- ▶ An event that could have caused a brain injury (yes to H, E or S), **and**
- ▶ A period of loss of consciousness or altered consciousness after the injury or another indication that the injury was severe (yes to L or E), **and**
- ▶ The presence of two or more chronic problems listed under P that were not present before the injury.

Note:

- ▶ A positive screening is **not sufficient to diagnose TBI** as the reason for current symptoms and difficulties - other possible causes may need to be ruled out
- ▶ **Some individuals could present exceptions** to the screening results, such as people who do have TBI-related problems but answered “no” to some questions
- ▶ Consider positive responses within the context of the person’s self-report and documentation of altered behavioral and/or cognitive functioning

How to Help

Strategies and Tips



What You Can Do: Compensatory Strategies



- ▶ Review important information
- ▶ Present information in small amounts, simple language - avoid jargon and acronyms
- ▶ Eliminate distractions if possible
- ▶ Have the individual repeat what you've been discussing
- ▶ Put it in writing
- ▶ Include family, staff or other support systems

Strategies Continued



- ▶ Provide structure/routine
- ▶ Implement cuing strategies i.e. day planners, calendars
- ▶ Provide redirection
- ▶ Offer breaks
- ▶ Understand/appreciate the need for a slower pace
- ▶ Screen for co-morbidities

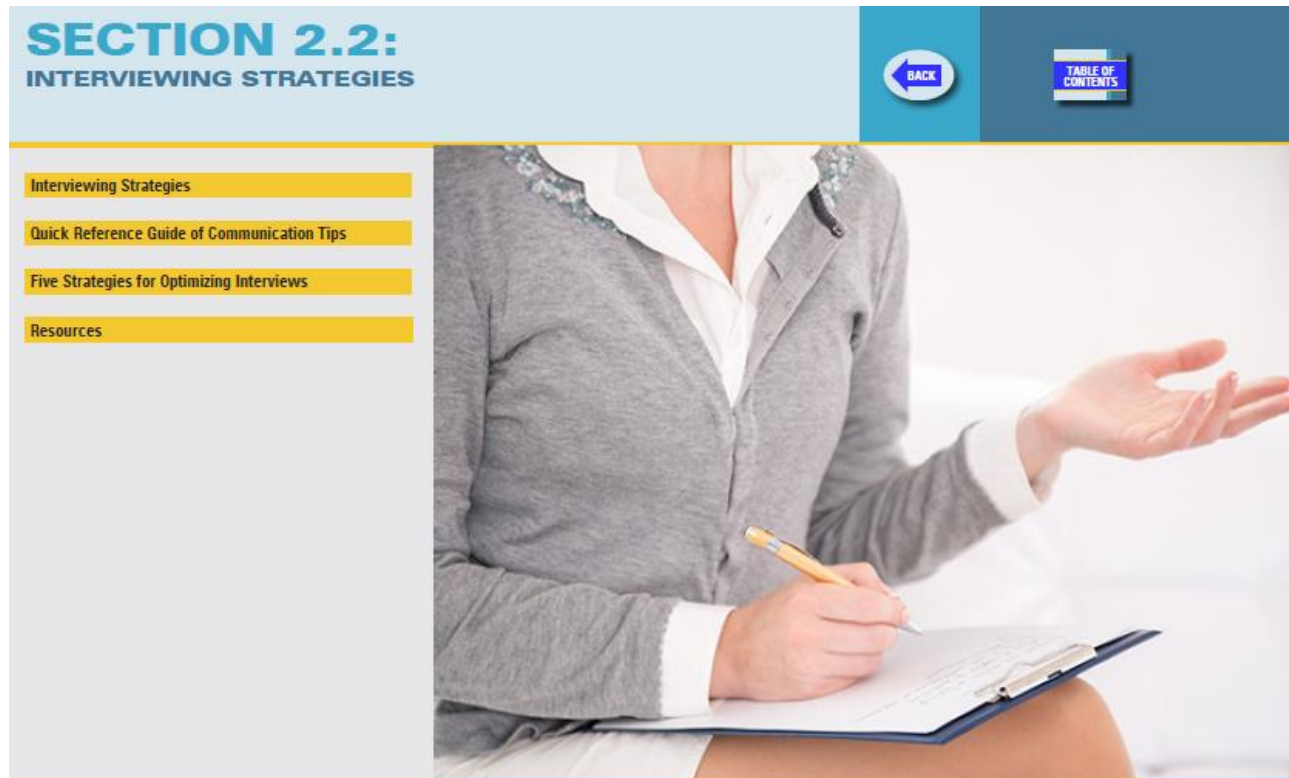
Communication Tips

► https://youtu.be/Roc3_g00HZ4



Interviewing Strategies

- ▶ Please refer to handout from Dual Diagnosis Justice Tool Kit



Using Communication to De-Escalate Situations

► <https://youtu.be/XLbYP2VnChI>

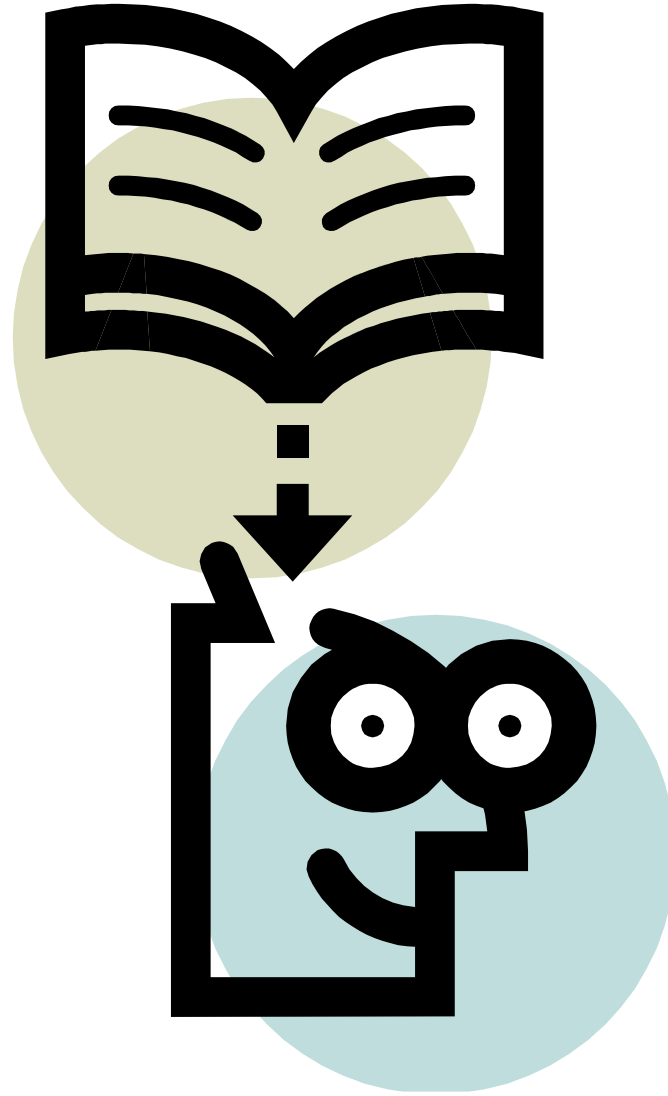


Up to 6:32 minutes

**Be patient.
Some things
take time.**



Resources



System Gaps

- ▶ Education - improvements but still much to be done - consistency
- ▶ Diagnosis - many don't have a formal diagnosis - may be difficult to obtain
- ▶ Lack of Neuropsychological Assessment resources - timely access - costs
- ▶ Lack of ABI specific services in the court system
- ▶ Long wait-list for subsidized services
- ▶ Lack of services in remote geographical areas

Important Point

- ▶ Don't forget that the person with an ABI or DD may not be the individual charged.
 - ▶ Victims and or family members may be impacted, need to consider points discussed when having communications with these individuals

Developmental Disability Resources

- ▶ Dual Diagnosis Justice Tool Kit
<http://www.community-networks.ca/services/developmental-disabilities-justice-toolkit/>
- ▶ FASD & Justice website
<https://fasdjustice.ca/recognizing-fasd/screening-tools-and-strategies.html>
- ▶ Griffiths, D. M., Summers, J., & Stavrakaki, C. (2002). *Dual diagnosis: An introduction to the mental health needs of persons with developmental disabilities*. Sudbury, Ont: Habilitative Mental Health Resource Network.

DDJC Referral Process

- ▶ Referral is made to the Developmental Services Ontario east region (DSO CER) by an agency, family, person by calling

1-855-277-2121

Developmental Services Ontario



Acquired Brain Injury Resources

- ▶ Toronto Acquired Brain Injury Network (TABIN)
 - ▶ Is the Referral source for ABI services in the Central LHIN
 - ▶ <http://www.abinetwork.ca/>
- ▶ Ontario Brain Injury Association (OBIA)
 - ▶ <http://obia.ca/> or 1-800-263-5404
- ▶ Brain Injury Canada
 - ▶ www.braininjurycanada.ca
- ▶ Ontario Neurotrauma Foundation (ONF)
 - ▶ <https://onf.org/>

ABI and Justice Resources

- ▶ Provincial HSJCC - 2019
 - ▶ <https://hsjcc.on.ca/traumatic-brain-injury-and-the-justice-system-webinar-2019-01-10/>
- ▶ South West Regional HSJCC - 2016
 - ▶ http://eenet.ca/sites/default/files/pdfs/Traumatic%20Brain%20Injury%20HSJCC%20Webinar%20Presentation%20-%20Jan%2020th_0.pdf
- ▶ US TED Talk - Connection between Brain Injury and Crime
 - ▶ https://www.ted.com/talks/kim_gorgens_the_surprising_connection_between_brain_injuries_and_crime?language=en

ABI and Justice Resources ... Cont.

- ▶ Advice To Police Responding to Persons with a Brain Injury
 - ▶ <http://nbia.ca/advice-to-police-responding-to-persons-with-a-brain-injury/>
- ▶ Traumatic Brain Injury: A Guide for Criminal Justice Professionals
 - ▶ <https://www.brainline.org/article/traumatic-brain-injury-guide-criminal-justice-professionals>

Let's Keep the Conversation Going

- ▶ Refer and make use of resources
- ▶ Share resources with colleagues
- ▶ Be a voice for those in need of services
- ▶ Reach out to service agencies and system navigators



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Questions

