



Community Treatment Orders in the context of Recovery

Ms Jennifer Buchanan (University of Melbourne)

Dr Lisa Brophy (University of Melbourne and Mind Australia)

A/Prof Lynette Joubert (University of Melbourne)





- Involuntary treatment (including Community Treatment Orders) is the “elephant in the recovery Room” (O’Hagan, 2012)
- Recovery frameworks and policies are “silent” about involuntary treatment (Light et al, 2012)



- Pilot Study – little known about Mind consumers who are also on CTOs.
- Aim to:
 - Understand more about the people on CTOs in Mind
 - attempt to understand the trajectory of their experience within a recovery framework of service provision
- Investigate if being on a CTO has implications for accessing a recovery focused service such as Mind and leads to differences in approach to service delivery and experience



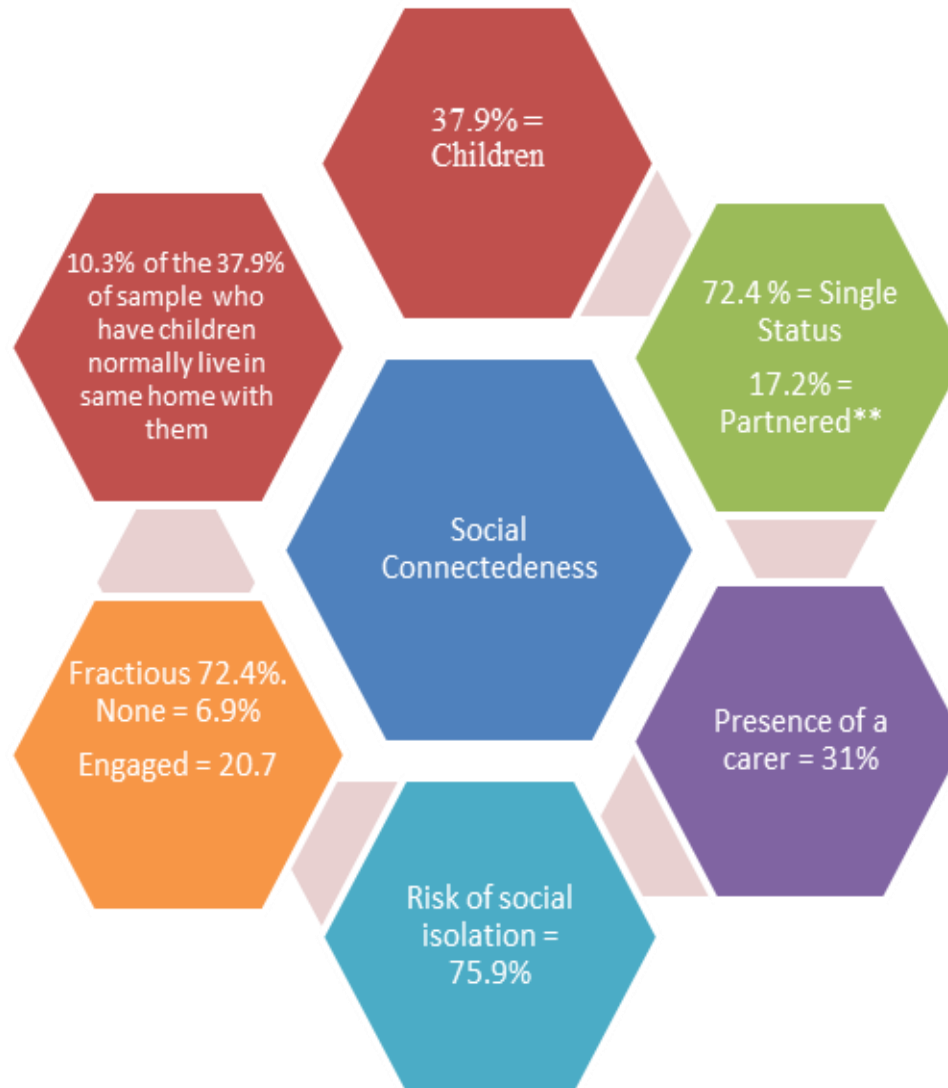
- Retrospective study - Clinical Data Mining
- Consecutive randomised sample (29)
- File audit tool asked 35 questions of Mindlink
- Combination of quantitative, narrative and qualitative data collected
- Bivariate analysis
- Thematic analysis



- Five themes:
 - Demographic themes – age/gender/dx
 - Organisational themes –number of hrs of contact/programs/regions/referral sources
 - Social Connectivity themes –divergence and convergence to generalised profile
 - Independence themes – coercion/labour force status/transport/leisure engagement
 - Recovery themes.....

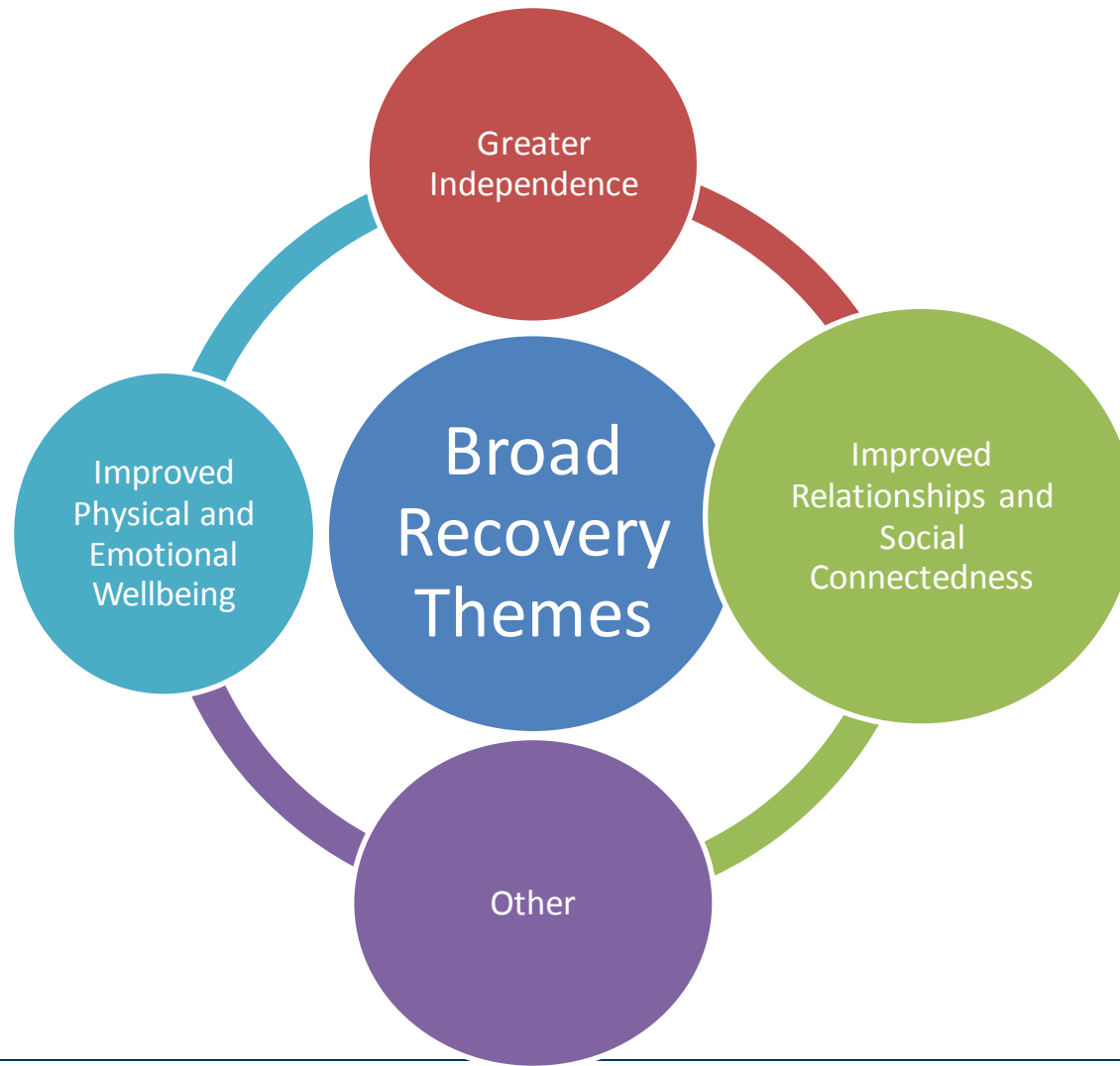


Relational Connectedness



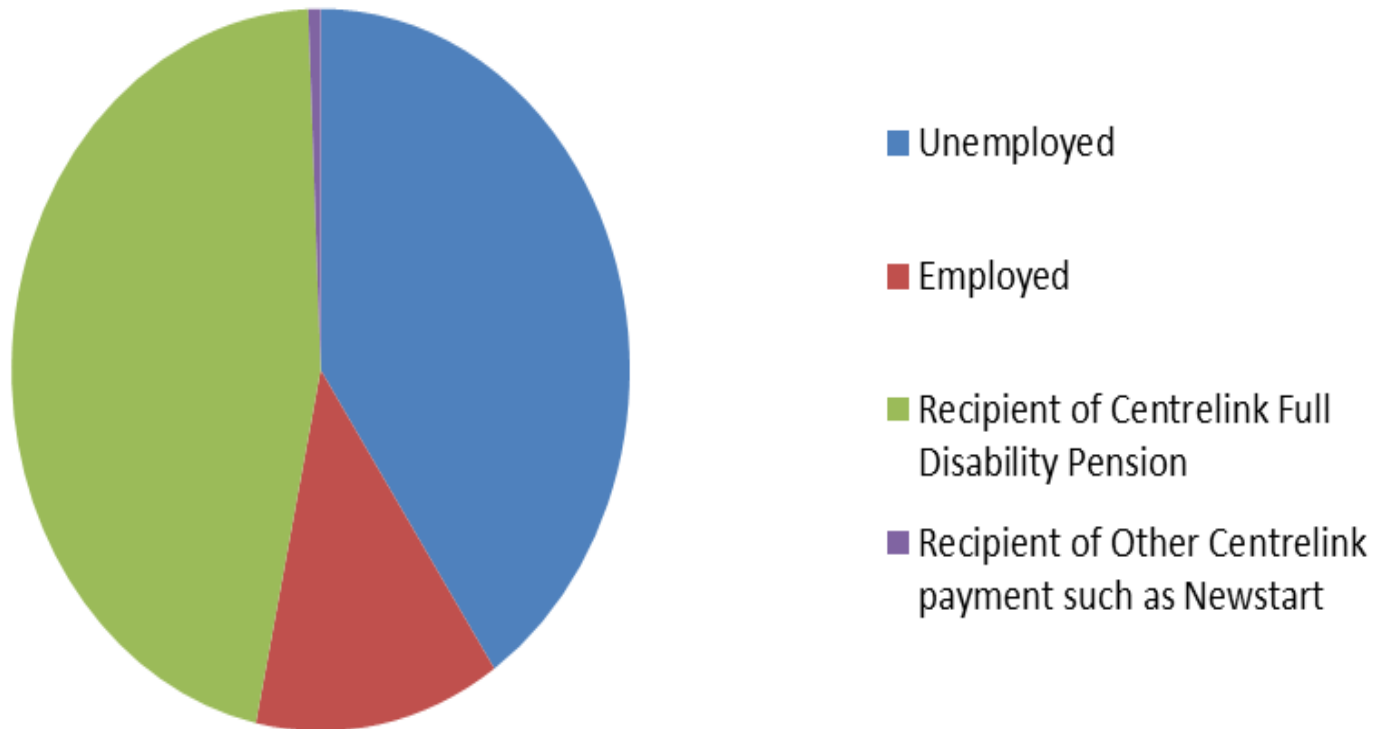


Common Recovery Themes





Labour Force Status





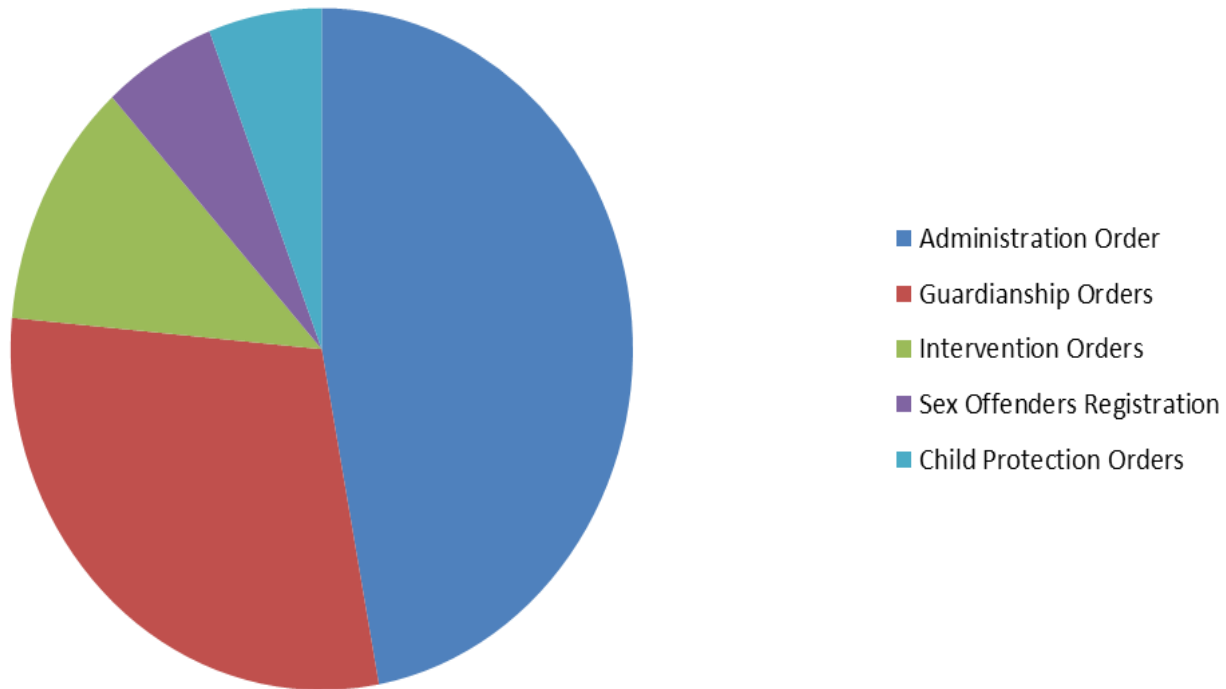
- Tended to be consistent with generalised profile of people on CTOs:
 - Single/male/unemployed
 - Diagnosis of Schizophrenia/schizo-affective disorder
 - Socially isolated/at risk of homelessness
 - History of aggressive behaviors/substance abuse
 - High levels of fracture in familial relationships
 - High tobacco and substance abuse history



- Compounding effects of other coercive forces =
'marginalised/disempowered/frustrated'



Additional Orders in Place

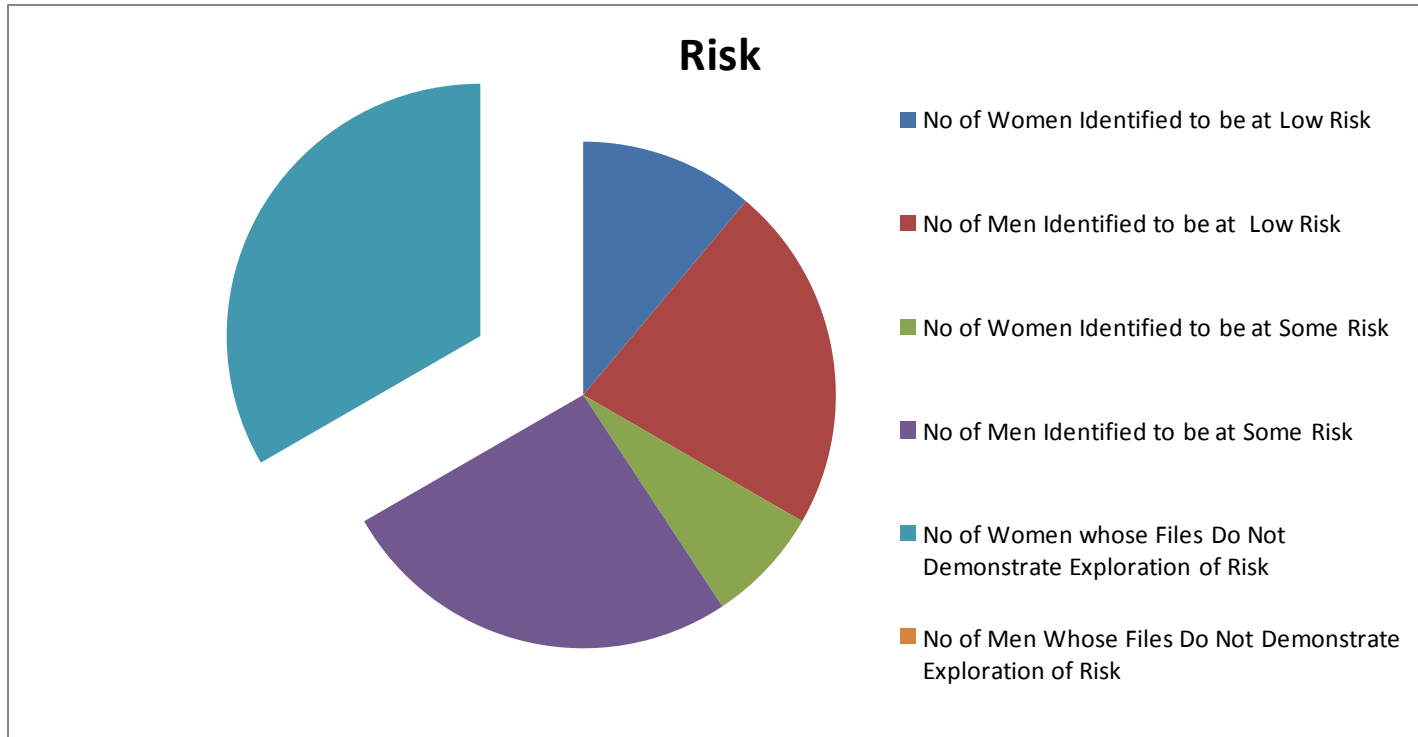




- Divergent profile /clusters
- Levels of risk underreported/explored for women
- ‘Elephant in the room’ – CTOs underreported?
- Concern for lack of engagement with older consumers regarding recovery goals
- Some positive indications regarding levels of employment and social inclusion



Levels of “Risk” as Recorded in Mindlink





- Recovery themes strongly oriented around gender
- Male = independence themes
- Female = improved relationship themes



- Are PDRSS/NGO services more oriented to providing support for women?
- Changing nature of CTO use and potential for increasing numbers of Mind consumers to be recipients
- Some evidence that there are different conceptualizations about what is considered to be 'risk'
- Lack of relationship between variables indicating diversity requires full range of recovery services



- Older CTO users potential to be ignored from recovery perspective/languish on CTOs
- Elephant in room – potential for lack of support for consumers and family members experiencing negative consequences of CTO status



- Mindlink to have greater capacity to record legal status – CTOs - and specifically prompt in relation to recovery goals
- Worker training around engaging with CTO status – shine light on the elephant!
- Future research to explore if/what/how barriers to engagement with PDRSS for people on CTOs exist
- Explore opportunities for evidence based intervention – such as including peer workers – in supporting engagement with people on CTOs and recovery goals



- Family intervention programs to reflect most common recovery goals for women as well as to address high levels of relationship fracture recorded across both genders
- Increased engagement with all CTO users around recovery goal setting



The relatively small numbers of people on CTOs identified as utilising the service suggests the need for improving access for people on CTOs to community based mental health support services – or improving recording this information.

There is also need for improving awareness of community based mental health support providers in exploring the implications of being on a CTO with consumers.



THE UNIVERSITY OF

MELBOURNE

