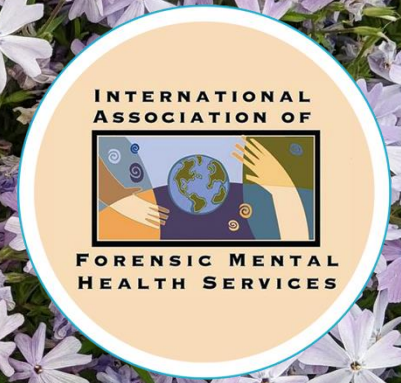


INTERNATIONAL ASSOCIATION OF
FORENSIC MENTAL HEALTH SERVICES

NEWSLETTER



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Letter from the Editor

“Parting is such sweet sorrow; that I shall say good night till it be morrow.”

William Shakespeare

It is with bittersweet feelings that I am announcing that this newsletter will be my final one as editor of the newsletter. Bitter because I have so relished reading and corresponding with all the contributing authors, but sweet because I have the privilege of knowing that I will be passing the torch to my esteemed colleague, Dr. Samantha Zottola, and welcoming our new Editorial Assistant, Dr. Lindsey Gilling McIntosh. Many of you may know Lindsey from her time on the IAFMHS Student Board, or perhaps from her work as a Postdoctoral Research Fellow in Forensic Psychiatry at the University of Edinburgh (Scotland). I will be gracefully recusing myself to the role of Associate Editor of the Risky Business Section.

I also wanted to highlight our conference features with the upcoming conference in Sydney. Please be sure to read about our keynote speakers, the 5K fun run, and post-conference half-day and full-day workshops.

Sarah Coupland, Editor

FORENSIC MENTAL HEALTH NURSING

Developing a Digital Application for Non-Mental Health Nurses to Assess the Mental Health Needs and Risks of Children and Young People

Michael Doyle, Professor, School of Human and Health Sciences, University of Huddersfield, UK; and **Manisha Singh**, Researcher and PhD candidate, School of Human and Health Sciences, University of Huddersfield, UK

Recent research findings suggest there is high demand on specialist mental health services for Children and Young People (CYP) in the UK. One in six children are likely to have a mental health problem and this figure has gone up by 50% in the last three years (The Children's Society, 2023). Between 2021 and 2022 alone, the proportion of older young people aged 17-19 in England with a probable mental health disorder jumped from one in six to one in four (NHS Digital, 2022).

From a UK national perspective, the latest National Benchmarking Report for Child and Adolescent Mental Health Services (CAMHS) was completed in November 2021 (National Benchmarking Network, 2021). They found:

- The proportion of children who were assessed and entered treatment in CYP mental health services (CYPMHS: conversion rate) increased from 70% in 2019/20 to 77% in 2020/21; this is the highest level seen since 2012/13 and confirms that services worked assertively to maintain access to care.
- The number of children and young people on a CYPMHS caseload at 31st March 2021 has increased to 1,837 per 100,000 population from 1,659 per 100,000 population in 2019/20.
- The number of contacts delivered to children and young people has increased to 27,536 per 100,000 population in 2020/21. Participants have reported that the majority of these contacts were delivered non face-to-face, with roughly a third of these non-face-to-face contacts delivered through digital platforms.
- The length of stay in inpatient secure services increased to a mean 448 days compared to 368 days in 2019/20 and 271 days in 2015/16.

It is evident that there is high and increasing demand for mental health services aimed at CYP in the UK and CYP are staying longer in secure facilities, including specialist units and young offender institutes (YOI). Mental health needs are common on admission to YOI, and one study found 43% of young people had mental health needs with very high rates of substance misuse diagnoses (Lennox et al., 2013).

A recent scoping review highlighted the role and importance of early/pre-crisis interventions from non-mental health nurses (Turner et al., 2022).



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It was found that non-mental health trained nurses such as school nurses, health visitors, prison nurses and emergency department nurses were well placed to deliver screening and assessments of CYP in various settings. Likewise, Non-Mental-Health Nurses and Allied Health Professionals (Non-MH-Nurses/AHPs) working in prisons and young offender institutes are well placed to provide screening and assessments of CYP in a variety of situations. These assessments can reduce CAMHS referral rates and lead to effective, stand-alone interventions for some CYP, while also informing signposting and referral to more specialist CAMHS while encouraging self-management. In response, digital solutions have been recommended to enhance the existing knowledge and skills of Non-MH-Nurses/AHPs to make the most of early intervention opportunities and subsequently relieve pressure on CAMHS.

Therefore, the primary aim of this project was to develop a digital app for Non-MH-Nurses/AHPs to use in a variety of educational, health and social care settings including forensic services.

FORENSIC MENTAL HEALTH NURSING

Developing a Digital Application for Non-Mental Health Nurses to Assess the Mental Health Needs and Risks of Children and Young People

Method

A systematic literature review, focus group consultations and interviews with experts, non-mental health workers, other professionals, academics and researchers were conducted. Thirty-three articles were included to identify effective tools used to assess the mental health needs and risks of CYP. A total of four focus group consultations, and six interviews with experts working with CYP were conducted to identify app requirements. A further two consultations were conducted to inform the first alpha prototype of the App, and two more before finalising the Beta version. This was supported by a Qualtrics survey of over 60 respondents who tested the app based on real-life clinical practice.

Findings

Based on the evidence-base collated, the proposed app was conceptualized as;

‘A decision support tool for non-mental health nurses and AHPs to structure clinical judgements about CYP’s mental health needs and risks to enhance defensible decision making and match the needs of CYP with safe and effective interventions.’

A Beta version decision support application known as the **HAMHA: Huddersfield App for Mental Health Assessment** was constructed and evaluated. In summary, respondents felt the app would provide increased confidence for Non-MH-Nurses/AHPs to have discussions with CYP about their mental health needs and risks, while enabling effective interventions matched to needs and risks.

The **HAMHA** is now being validated in real-time clinical practice ahead of a planned release to interested parties in Summer 2023. Further details, a demonstration and updates will be provided at a symposium and meetings at the Annual IAFMHS conference on 20th June 2023.

If you have any questions about this study please contact m.doyle2@hud.ac.uk

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

Acknowledgements

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



IAFMHS 2023 Conference Sydney

Reintegration and Recovery among People in Forensic Mental Health and Criminal Legal Systems

We are excited to announce our 2023 in-person conference will be held at [ICC Sydney](#), Sydney, Australia. The conference will run June 20 - 22, 2023, with post-conference workshops held on June 23, 2023.

[Registration is now open!](#)

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Keynote speakers

2023 IAFMHS CONFERENCE
SYDNEY | JUN 20 - 22



Indigenous solutions: Elder wisdom on crime and injustice in Canada

Lisa Monchalin, PhD, is faculty in the Department of Criminology at Kwantlen Polytechnic University. She is a graduate of Eastern Michigan University where she obtained her Bachelor’s degree in 2004 and her Master’s degree in 2006, both in Criminology. In 2012, she graduated with her Doctorate in Criminology from the University of Ottawa. In 2022, she graduated with her Juris Doctor from The University of British Columbia, Peter A. Allard School of Law.

Lisa is a registered citizen of the Métis Nation of Ontario. She was born in St. Catharines, Ontario and grew up in the Niagara Region. She is Métis-Anishinaabe from the historic Métis community of Sault Ste Marie. She also has ancestry that includes Scottish, French, Algonquin, and Huron.

In fall 2018, she was a Visiting Professor at the University of Toronto Centre for Criminology and Sociolegal Studies. In the winter of 2017, she was a Visiting Professor at Central Washington University, a cross appointment with the Department of Law and Justice and the Department of Sociology.

She is the author of *The Colonial Problem: An Indigenous Perspective on Crime and Injustice in Canada*, with the University of Toronto Press.



Healing and empowerment: How should justice services address the needs of indigenous Australians

Dr Marshall Watson is a descendant of the Noongar people of the southwest of WA. He is a consultant psychiatrist, dual trained in both child and adolescent and forensic psychiatry. He is currently working in private practice is also a consultant psychiatrist with Queensland health Forensic child and youth mental health service.

He has previously been the clinical lead for forensic child and adolescent forensic mental health services in South Australia. Dr Watson is an associate researcher with the Telethon Kids Institute and is also a Chief investigator through the university of Queensland, for IMHIP-Youth: A multi-disciplinary collaboration to embed and evaluate a model of social and emotional wellbeing care for Indigenous adolescents who experience detention.

Dr Watson sits the RANZCP’s section of Child and Adolescent Forensic Psychiatry and Aboriginal Torres Strait Islander Mental Health Subcommittee.

His professional interests include medical leadership, cultural competency in health care, and the mental health of young people both in the forensic system and out of home care.



Keynote speakers

2023 IAFMHS CONFERENCE SYDNEY | JUN 20 - 22



Improving (mental) health outcomes after incarceration: Whose responsibility is it?

Dr Stuart Kinner is Professor of Health Equity at Curtin University, Group Leader for Justice Health at Murdoch Children’s Research Institute, Honorary Professor at The University of Melbourne, and an Adjunct Professor in the Griffith Criminology Institute, Griffith University. For the past two decades Stuart’s research has focussed on health services and health outcomes for people who come into contact with the criminal justice system.

He is experienced in multi-sectoral data linkage, cohort studies, randomised trials and other rigorous evaluation methodologies, systematic review, and meta-analysis. During his career Stuart has produced >300 publications including >200 peer-reviewed papers, and attracted >\$29 million in research and evaluation funding. He Chairs Australia’s National Youth Justice Health Advisory Group and serves on Australia’s National Prisoner Health Information Committee, the WHO Health in Prisons Programme (WHO-HIPP) Steering Group, and the Worldwide Prison Health Research and Engagement Network (WEPHREN) Steering Committee.

2023 Post-Conference Workshops 23 JUNE 2023

Full-Day Workshops

- Recent advancements in the assessment and management of sexual violence: The Risk for Sexual Violence Protocol-Version 2 (RSVP-V2)
Understanding and Assessing Adult Firesetting

Half-Day Workshops

- Development of an evidence-based violence rehabilitation program for offenders with a cognitive impairment and/or intellectual disability
Older justice-involved clients: an understanding of their characteristics, needs and age-appropriate assessment tools
Behavioural Analysis of Sexual Offending and Homicide: Practical Considerations for the Forensic Mental Health Professional
Brief Evidence-Based Restorative Justice Intervention: A Model in the US Justice System

To register for a Post-Conference Workshop, please CLICK HERE.

Conference Cruise Banquet Dinner

Join us for a fun evening of dining and dancing on a Wednesday, June 21 on a cruise along the stunning Sydney Harbour. Tickets cost \$150 CAD per person and can be purchased when registering for the conference on our website, by emailing iafmhs@sfu.ca, or in person at the conference!

5km Fun Run

The IAFMHS Student Section is pleased to organize another annual 5km Fun Run, which will take place the morning of Wednesday, June 21. Registration cost is \$30 CAD per person and includes a t-shirt. Fun Run proceeds go to student awards and initiatives. Registration can be completed when registering for the conference on our website.

MENTAL HEALTH DIVERSION

The Need for Culturally Responsive Approaches to Address Racial Disparities in Mental Health Diversion

Elizabeth Bigham, Research Assistant, George Mason University, USA | **Evan Lowder**, Assistant Professor, George Mason University, USA

Diversion programs are highly prevalent both in the United States and internationally. In the United States, diversion programs have been implemented in some capacity in every state (National Drug Court Resource Center, n.d.), with drug courts and mental health courts representing the most prevalent of these programs. Particularly in the United States, diversion programs serve a diverse population, mirroring the racial and ethnic composition of the carceral population. In 2019, for example, Black U.S. residents were incarcerated at three and a half times the rate of White U.S. residents (Zeng & Minton, 2021). Yet, recent evidence suggests Black Americans and other underrepresented groups may be underserved by diversion programs (Gaba et al., 2022; Lilley et al., 2018; Stare & Fernando, 2019). These trends have created a need for culturally responsive treatments that address the unique needs and experiences of people of color to improve outcomes and reduce recidivism rates.

Best practices in correctional rehabilitation, such as the Risk Needs Responsivity (RNR) model, recommend that interventions be targeted to an individual's unique risks and needs (Andrews et al., 1990; Andrews & Bonta, 2010). The Responsivity Principle, in particular, suggests that participants receive services tailored to their specific circumstances to promote equitable treatment and positive outcomes. Research suggests integrating the RNR model into correctional practice is an effective way to improve recidivism outcomes (Andrews & Dowden, 2005; Dowden & Andrews, 2000), including in diversion settings (Prendergast et al., 2013). Additionally, some evidence suggests correctional treatment programs that adhere to RNR principles can benefit individuals regardless of their racial or ethnic identity (Usher & Stewart, 2014). There are growing calls to better leverage the Responsivity Principle to address the unique needs of Black Americans in the U.S. criminal-legal system (Smith & Campbell, 2018), which includes developing culturally responsive approaches that acknowledge structural drivers of disparities, including systemic racism.

In the behavioral health field more broadly, organizations have recognized the need to incorporate culturally responsive approaches into their practices. For example, a recent response to this need has been the creation of the Self-assessment for Modification of Anti-Racism Tool (SMART) created by the American Academy of Clinical Psychiatrists (AACCP) board. The tool was designed to help community behavioral health organizations assess and address issues related to structural racism in their practices (Talley et al., 2021).



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However, despite the growing awareness and support for culturally responsive behavioral health practices, the criminal-legal system is ill-equipped to provide adequate care and treatment for people of color who enter the system with behavioral health problems (Vinson & Dennis, 2021). Yet, evidence from diversion programs that serve these populations continues to demonstrate the need for culturally responsive approaches. For example, in one study, Stare and Fernando evaluated Black men's perception of treatment in mental health courts (2019). The men reported unique experiences of stigmatization, marginalization, limited treatment access, and lack of trust in treatment providers, themes that the men frequently linked to their Black identity.

Other studies of mental health court participants have found that Black and Hispanic participants are less likely to report prior behavioral health treatment engagement (Gaba et al., 2022). Together, these studies highlight the acute need for culturally responsive treatment strategies for individuals of color interfacing with the criminal-legal system. *(Continued on next page...)*

The Need for Culturally Responsive Approaches to Address Racial Disparities in Mental Health Diversion

How diversion programs, particularly in the United States, adapt to meet the needs of diverse populations remains to be seen. Advocates argue that truly culturally “responsive” solutions will require thoughtful and antiracist action, recognition of the structural drivers of racial disparities, and a broader focus on the role of social determinants of health in behavioral health outcomes and system involvement (Vinson & Dennis, 2021).

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.

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EDITORIAL UPDATES**Welcome to our new Editorial Assistant!**

We are pleased to have Dr. Lindsey Gilling McIntosh joining us as the IAFMHS Newsletter Editorial Assistant, as of the Summer 2023 edition. She is currently a Postdoctoral Research Fellow in Forensic Psychiatry at the University of Edinburgh (Scotland).

She was awarded funding for this post from the State Hospital (the high security hospital for Scotland and Northern Ireland) in order to lead the development of a national research programme in forensic mental health to improve patient and service-level outcomes. She recently completed a national mental health needs assessment for the Scottish prison population on behalf of the Scottish Government and will soon begin research examining clinical decision-making among forensic mental health practitioners.

Lindsey is originally from Wisconsin, USA and moved to Scotland for her graduate studies. She has a masters degree in cognitive neuropsychology and in 2021 received her PhD in psychiatry from the University of Edinburgh. Prior to her current postdoctoral role, Lindsey was a research assistant psychologist at the State Hospital and Manager of the Forensic Mental Health Services Managed

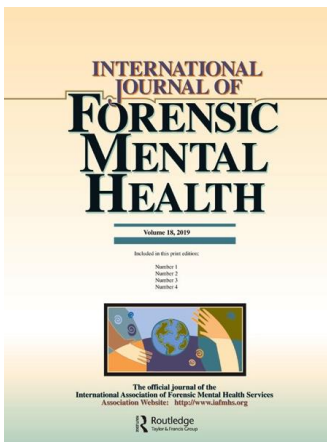
Care Network (maternity cover). During her time as a PhD student, Lindsey served on the IAFMHS Student Board as Treasurer/ Fundraising Coordinator and she is delighted to be involved with the organisation again as the Editorial Assistant for the newsletter.



**Lindsey Gilling
McIntosh**

Postdoctoral Research
Fellow

University of Edinburgh,
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INTERNATIONAL JOURNAL OF FORENSIC MENTAL HEALTH**Feature Article**

Cross-Cultural Violence Risk Assessment: Adapting the HCR-20V3 for Incarcerated Offenders in Mexico

Alicia Nijdam-Jones^{a,b}, Eric García-López^{c,d}, Libertad Merchan Rojas^e Aura Ruiz Guarneros^c and Barry Rosenfeld^a

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This prospective study investigated the predictive validity of a culturally adapted version of the Historical-Clinical-Risk Management-20 (HCR-20V3) with a sample of 114 incarcerated males in a medium-security prison in Mexico City. The goal was to integrate a culturally responsive approach to violence risk assessment by incorporating culturally relevant risk factors identified by forensic mental health professionals in Latin America who conduct violence risk assessments. These risk factors related to problematic family and peer relationships, machismo, normalization of violence, and economic disadvantage. Data collection for HCR-20V3 ratings involved clinical interviews and a review of institutional documents; data on aggressive incidents were collected through document review, self-report follow-up interviews, and guard reports. Participants who engaged in institutional violence during the 3-month follow-up period were given significantly higher scores on several culturally relevant risk factors than those who did not engage in institutional violence. Although the culturally adapted HCR-20V3 items did not provide incremental validity to the original HCR-20V3 items, the culturally adapted HCR-20V3 total score produced an area under the ROC curve of .73-.74. The findings provide evidence that the culturally adapted HCR-20V3 has strong predictive validity and the utility of adapting culturally relevant risk factors for the assessment of violence risk.

On “Side Hustles:” Picking up Extra Work as an Early Career Professional

C. Adam Coffey, PhD, Lithia Forensics and Consulting, USA

On the heels of my previous column on burnout and the importance of work-life balance, this article is about taking on more work. For many early career professionals, an essential task is to find a job path that optimally balances meaningfulness, lucrativeness, and flexibility. This is no small feat, and singular jobs that allow for such characteristics appear relatively rare, particularly early in one’s career. It seems reasonable that one could find a position that has one or two of these qualities; however, increases in one or two could mean a decrease in the third (e.g., increasing meaningfulness and flexibility could come at the cost of lucrativeness). To rectify these concerns, and for hosts of other reasons, many early career professionals elect to take on additional part-time work. For example, individuals may elect to take on a second position in another area of psychology, such as the early career professional whose primary job involves conducting evaluations for courts but also maintains a caseload of therapy clients through a private practice, or a university professor who sees clients in either an assessment or therapy context. Alternatively, others may elect to take on additional roles within the same area. As an example, I currently work full-time for a group private practice where I conduct forensic evaluations in Oregon and also provide part-time evaluation services to a jail-based competency program in California.

The decision about whether to take on another position is an important one that many early career professionals face. For this quarter’s column, I spoke to several early career professionals who maintain multiple forms of employment, and they offered the following advice for those who may be considering whether this decision is the right one for them:

- It is important to assess whether taking on additional employment would impact your performance in your primary role. Regardless of position, forensic mental health is a demanding field that requires a great deal of time and energy. Taking on additional work could compromise your ability to provide your most optimal services in your roles.
- Taking on a second job could lead to burnout and increased stress levels. This can (and occasionally does) result in negative impacts on your mental and physical health. It is important to consider whether the professional and financial benefits of a second job outweigh the potential costs to your overall

well-being. While additional income may seem like a positive outcome, weigh the potential financial benefits against the potential costs to your career, health, and overall well-being.

- In terms of what I have found to be most helpful, boundaries are crucial (and also quite difficult to maintain in your early career when everything seems so new and interesting). It’s important to check in with yourself from time to time and to develop internal ease with saying “no” to extra work when necessary. With many competing demands, many people cope by just turning on autopilot and putting your nose to the grindstone. It’s an adaptive strategy that we bring into our professional lives, either graduate school or even before then, because it’s effective in getting things done. It can also be lucrative. However, this leaves little time to reflect on how you’re doing.
- Don’t feel like you have to take on another position right now if you’re not ready and able. Your career is long, and you never know what opportunities may present themselves down the road.

In terms of parting thoughts, I have certainly found increased personal and professional satisfaction from being able to provide services to two organizations that primarily serve individuals who may otherwise not have access to quality care.

Ultimately, I believe the decision to take on an additional part-time position is one that has worked well for me thus far in terms of enhancing my professional development and assisting me in meeting financial goals. However, as I noted in my previous column on burnout, there are always potential pitfalls related to work-life balance. One extra job can become two. Two can become four. There is no shortage of extra work to be done, so it’s easy to spread yourself thin very quickly. This is particularly relevant in the age of telecommunications software, when the convenience of doing much of your work via remote means can both increase opportunities while also creating the illusion that you are not spread too thin professionally. It is my hope that, by sharing my experience and advice from similarly situated colleagues, you are able to strike a nice balance between meaningfulness, lucrativeness, and wellness in whatever your role(s) may be.

STUDENT SECTION**SPOTLIGHT: Interview with Dr. Henry Otgaar**

Student Section Editors: Lillian Bopp, President, University of Nebraska- Lincoln, USA | Lindsay Healey, Secretary, Carleton University, CAD | Mimosa Luigi, President-Elect, McGill University, CAD

Dr. Otgaar's research concentrates on the functioning of memory and its relation to statements made by eyewitnesses and perpetrators. Specifically, his work focuses on developmental changes in memory from childhood to adulthood and factors (e.g., trauma) that relate to the development of memory illusions. He also has a strong interest in legal decision-making and how biases can affect expert witness work. Dr. Otgaar has often cooperated in legal cases involving (child) witnesses. He collaborates with research groups in the United Kingdom, Belgium, Canada, Sweden, France, Australia, Chili, Romania, Italy, North America, and Indonesia. Dr. Otgaar has received many awards, grants, and prizes for his research and teaching, with his research often attracting national and international media attention. His current studies focus on precursors of children's and adults' false memories, eyewitness memory, adaptive memory, delayed disclosure of sexual abuse, and interviewing children and adults. He also works for the Maastricht Forensic Institute as an expert witness. Finally, Dr. Otgaar is a member of the *Landelijke Expertisegroep Bijzondere Zedenzaken* and the *College voor Toetsing en Advies* of the *Landelijke Deskundigheidsmakelaar*. These committees fall under the National Police and serve to discuss legal cases and expert witness work.

Q: How do you see your program of research evolving in the next 10 years? Are there new areas of interest you are excited to explore?

A: I am highly interested in conducting more cross-cultural studies in the area of interviewing, false memory, and repressed memory. Together with some Indonesian colleagues, we are already finding some interesting results. For example, we are slowly starting to see that findings in the area of memory obtained in Western contexts do not generalize to non-Western contexts. Apart from this, I am highly devoted to research on how expert witnesses should write unbiased reports in the legal arena. This is a challenge for psychology, since it is not a hard science, and therefore stronger theory in the field of legal and psychology is necessary.

Q: What do you see as the benefits and difficulties of serving as an expert witness in legal cases?

A: A benefit is that expert witness work is an interesting way to use your scientific knowledge for something practically relevant. However, the challenge is to find out what research is truly practically relevant. To know this,

discussions are needed on which scientific work is truly practically relevant and this requires a sophisticated understanding of (amongst others) which effect sizes in empirical work are of interest in legal cases. This is a daunting and challenging task, but it is important that expert witnesses discuss the issue of practical relevance. One reason for this is that expert witnesses sometimes use empirical work in their expert witness reports showing statistically significant effects (e.g., that drugs inflate false memory rates). However, statistical significance should not be conflated with practical significance.



Dr. Henry Otgaar, PhD

Professor in Legal Psychology, Maastricht University, The Netherlands; Professor, Katholieke Universiteit Leuven, Belgium

Q: What are some of your hobbies and interests outside of work that are important to you?

A: I have my own Indonesian Martial Arts School. The martial arts is called Pencak Silat, which is an ancient fighting system from Indonesia. Because of my Indonesian roots, I have been studying Pencak Silat for about 30 years. It is not really a hobby for me, it is part of my Indonesian identity and a way to protect some Indonesian culture in the Netherlands. The latter is important because of the long history between Indonesia and the Netherlands.

Q: What piece of advice did you receive during graduate school or throughout your career that has resonated with you most?

A: Collaboration. In my work, I try to collaborate as much as possible with other scholars. Of course, this does not always work, but just the idea that you do not have expert knowledge on all psychological topics requires you to seek help. The nice side effect is that collaborations will extend and increase your network and might lead to interesting new research projects. *(Continued on next page...)*

STUDENT SECTION**SPOTLIGHT: Interview with Dr. Henry Otgaar**

Q: You collaborate with researchers from all over the world, can you share some of the international projects you are associated with that you are most excited about right now?

A: There are a couple of interesting projects that have both practical and theoretical relevance. First, together with colleagues from France, Italy, Germany, Finland, Romania, and Belgium, we are examining the issue of repressed memory from a European perspective. That is, there is tentative evidence that some therapists continue to discuss the issue of repressed memory during treatment which can lead to false memories of abuse. In this project, we are testing many people from (amongst others) the general population who have been in therapy and examining whether the issue of repressed memory was mentioned in therapy.

Second, I am involved in writing a white paper for the European Association of Psychology and Law in which we will provide important guidelines for how to interview children in a forensic and empirically sound way. This is much needed because of the huge variety with which children are interviewed by the police, child protection agencies, etc.

Third, I am working with colleagues from the US to set up an experiment for an ongoing Dutch legal case. The case is about a young woman who was video calling and stated that she did not hear a gunshot in the room next to her. Together with the NFI (Dutch Forensic Institute), we are designing a study to see whether this is even possible.

Finally, in Belgium, we started a project last year called Benefit of the Doubt, in which we are examining Belgian legal cases where someone claims to have been wrongfully convicted. Together with students in criminology, law, and forensic biomedical fields, we are meticulously analyzing the cases and determining whether a wrongful conviction took place or not.

Q: Could you share a few important moments in your career that shaped you as a leading researcher in your field? Were there any challenges that you had to overcome to get to where you are today, and how did you overcome them?

A: I am not sure that I am a leading researcher. Rather, I

see myself as someone who finds it important to engage in team science, so I would say my team might be or become a leading research team. My mentors such as Harald Merckelbach have certainly shaped me as a researcher but also my contacts with my PhD students and postdocs have shown me the importance of team science.

Q: In 2017 you were involved in co-editing a book titled: Finding the Truth in the Courtroom: Dealing with Deception, Lies, and Memories. What aspects of your work or career inspired you to be a part of this book?

A: Together with Mark Howe, we wanted to compile a book in which the issue of false statements based on false memories or deception was integrated. Oftentimes, the issue of deceptive statements and false memories are studied by different scholars and published in a variety of different books. This book was an attempt to combine these different pockets of research.

Q: You've contributed to both a blog and podcast in your research field, has your experience with these mediums changed your scientific communication? Do you see such mediums becoming more and more important in the era of open-access publishing? (Continued on next page...)

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SPOTLIGHT: Interview with Dr. Henry Otgaar

A: I certainly see the merit of sharing scientific knowledge through other channels such as blogs and podcasts. This might help demonstrate the relevance of your work to a larger audience. However, it is challenging to provide nuanced statements in blogs and podcasts because of time and space limits. However, such nuances are very important. For example, if you want to write a blog on how drugs can increase false memory rates, you might be tempted to write blanket statements that drugs enhance false memories. However, such blanket statements might be unwarranted as the empirical work has shown that such enhancements only occur under specific conditions and, in perhaps, certain populations. Finding the appropriate nuance in blogs and podcasts is challenging for academics.

Q: You have served in many editorial roles for academic journals. Do you have any advice for students who are interested in pursuing editorial roles in the future?

A: A nice suggestion and low profile one is to first see whether such work is really of interest to you. A first strategy is to ask your current supervisor if you can co-review together when they are consulted to review a paper. Many colleagues do not have time to do reviews, so any extra help might be good. Such co-reviewing might provide you with some in-depth knowledge of the reviewing and editorial processes.

Q: From your perspective, what are some of the challenges facing our field (forensic psychology)?

A: I think there are two challenges. First, we need to

consider how reliable and valid our own research is. This requires more attention to methodology and theory building in the field of legal and forensic psychology. For example, we see that in certain countries, forensic and legal psychologists use tests in the courtroom that do not possess sound psychometric properties yet impact legal decision-making. More research on the theory behind these tests is highly needed. Second, I think it is important to realize that we do not know whether most of the findings in the field of legal and forensic psychology translate and generalize to non-Western contexts. We need to collaborate more with non-Western universities and examine the extent to which published work generalizes to their contexts.

Q: Could you discuss some of the most pressing challenges for the Netherlands government regarding the field of forensic psychology?

A: I believe it is important that forensic psychology be seen as a specialty in the area of psychology. It is certainly not the case that clinical psychologists can do the work of a forensic psychologist and hence, more attention should be given to ensure that forensic psychology is seen as a special discipline. This is also important for education. In forensic psychology master programs, the idea is, sometimes, that clinical psychologists can coordinate forensic psychological courses. I think that we should be cautious in doing so, as forensic psychology requires extra knowledge that clinical psychologists sometimes do not have.

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