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**COUNCIL FOR PENOLOGICAL CO-OPERATION**  
**(PC-CP)**

**REPLIES TO THE QUESTIONNAIRE ON MENTAL DISORDERS AND DISABILITIES  
OF PERSONS UNDER PROBATION SUPERVISION**

The Council for Penological Co-operation (PC-CP) jointly with the Confederation for European Probation (CEP) would like to collect information via the present survey in order to have some insight into the extent to which mental health of persons under the supervision of probation services is considered and acknowledged both in policy terms and in a practical way across different European countries. Information from this survey will then be used by the Council of Europe to develop standards and/or practical advice addressed to the probation services of its 47 member States. The CEP will contribute to this work and to its promotion and implementation in the probation field.

**ALBANIA**

1. Which country/jurisdiction do you work in/represent?

**Albania**

2. What is your job title?

**Inspector**

Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

**There is no policy regarding people under probation who experience mental disorders, mainly because they are sent for hospital treatment.**

Section 2: The Organisation of Probation and Mental Health Care Provision

The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021? **13664**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training?

**No** ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or tick here ☐ if unknown) **None**

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability? **None/unknown due to not receiving diagnosis by the Probation Service.**

What data/ information do you base this estimate on? **There is no law or regulation under which probation officers are required to diagnose mental disorders.**

Has specific research been carried out on this? If the answer is yes, please provide details **No** ☒

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

**Ministry of Justice/Criminal Justice agencies** ☒

**Ministry of Health/Healthcare services** ☒

Voluntary sector providers ☐

Other (please specify)

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☐

Court ☐

Prison ☐

Probation ☐

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision **There is none**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff ☐

Other criminal justice staff ☐

Nurse ☐

General practitioner ☐

Psychiatrist ☐

Psychologist ☐

Social worker ☐

Other (please specify) **No one**

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves ☐

Inviting external services to work on their premises ☐

**Referring people to external services working elsewhere** ☒

Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **No** ☒

If yes, please provide details of these here

13. Are the number of deaths by suicide by persons under probation supervision collected nationally?  
**No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities? **No** ☒

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities? **No** ☒

## AUSTRIA

1. Which country/jurisdiction do you work in/represent?

**Austria**

2. What is your job title?

**General Director of the Directorate General for the Prison Service and Preventive Detention  
(Section II, Ministry of Justice)**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

**Please see attachment**

### Section 2: The Organisation of Probation and Mental Health Care Provision

#### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021? **11.237 persons**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training?  
**Yes** ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

**The probation service (the Organisation NEUSTART) have trainings for the probation officers concerning mental health awareness as part of the training program. Usually they offer courses once per year concerning this topic. Especially addressing clients who commit a crime due to a mental health disorder and do not get arrested in prison, but get an order to live in an institution for people with mental health disorders. To supervise this group additional knowledge is needed, therefore once a year a training for the staff working with the group of persons with forensic commitment order is offered.**

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or tick here ☒ if unknown)

**In Austria, there is a total budget for the probation service, with no differentiation for the provision of mental health care for people on probation.**

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**In 2020, around 2,5% of all cases got the forensic commitment order (please see attachment - section I).**

a. What data/ information do you base this estimate on?

**In Austrian law there is a special treatment for persons with a mental disorder, forensic commitment order (please see attachment - section I).**

b. Has specific research been carried out on this? If the answer is yes, please provide details **No** ☒

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐

Ministry of Health/Healthcare services ☐

Voluntary sector providers ☐

**Other (please specify)** ☒

**The professional responsibility has the probation service (the Organisation NEUSTART), the financial responsibility the Ministry of Justice. On behalf of the Ministry of Justice, the Organisation NEUSTART offers all kinds of probation services and is financed by the Ministry of Justice based on a yearly total budget.**

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☐

Court ☐

Prison ☐

Probation ☐

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

**The Organisation NEUSTART use the resources and risk inventory in probation supervision, they developed this program their selves. It is reliable and validated 2019. Some questions of the tool focus on mental disorders.**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

**Probation staff** ☒

Other criminal justice staff ☐

Nurse ☐

General practitioner ☐

Psychiatrist ☐

Psychologist ☐

**Social worker** ☒

Other (please specify)

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**Mental health care is usually court ordered if the crime is committed because of a mental disorder. The Organisation NEUSTART is cooperating with institutions for mental health care and get access for clients if needed.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

- Providing interventions/treatment themselves ☐  
Inviting external services to work on their premises ☐  
**Referring people to external services working elsewhere** ☒  
Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **Yes** ☒

If yes, please provide details of these here

**The staff of NEUSTART has special trainings and a special agreement with forensic institutions and prisons to make sure the transition management works well.**

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities? **No** ☒

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities? **No** ☒

## **BELGIUM (French-speaking part)**

1. Which country/jurisdiction do you work in/represent?

**Belgium - General Probation Service Administration (AGMJ) - Wallonia-Brussels Federation**

2. What is your job title?

**Officer - Expertise Directorate**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

**We do not have any reports on the issue. There are no statistical links between persons on probation and mental disorders/disabilities because the matters are dealt with by two separate entities and there is no specific documentation in either of them.**

**Probation is managed by the justice system (as regards court rulings) and the Communities (as regards monitoring and supervision), while the public health system is responsible for care for mental disorders and disabilities.**

**The Ministry of Justice has more detailed information on persons confined to mental hospitals, but they are not within the scope of this questionnaire.**

### Section 2: The Organisation of Probation and Mental Health Care Provision

#### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021? **33 461 files**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? **No** ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each)

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or **tick here** ☒ **if unknown**)

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

a. What data/ information do you base this estimate on?

b. Has specific research been carried out on this? If the answer is yes, please provide details

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐

**Ministry of Health/Healthcare services** ☒

**Voluntary sector providers** ☒

Other (please specify) ☐

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☐

**Court** ☒

Prison ☐

Probation ☐

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

**Screening for mental disorders is usually conducted at the start of proceedings so as to determine whether the person must be confined to a mental hospital (for which there must be a link between the mental disorder and the offences committed). In this case, an expert or board of experts is appointed, but we have no information on the tools used.**

**Sentenced prisoners who experience mental disorders are usually examined by prison psychiatrists. Account is taken of the disorders when determining future conditions for enforcement of the sentences (e.g., psychiatric follow-up, placement in a hospital facility, etc.).**

**In the case of probation measures involving no detention, if the court ruling does not lay down any conditions concerning the mental disorder, there is no statutory provision for systematic screening of any disorders or disabilities.**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff ☐

Other criminal justice staff ☐

Nurse ☐

General practitioner ☐

Psychiatrist ☐

Psychologist ☐

Social worker ☐

Other (please specify)

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**They are referred to the mental health services by the probation staff responsible for supervising them and reporting to the judicial authority. Each probation service centre has drawn up a social map indicating the services available in its district.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

- Providing interventions/treatment themselves ☐  
Inviting external services to work on their premises ☐  
**Referring people to external services working elsewhere** ☒  
Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **No** ☒

13. Are the number of deaths by suicide by persons under probation supervision collected nationally?  
**No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities?

**We do not have any information on the subject, as this a public health matter.**

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities?

**We do not have any information on the subject, as this a public health matter.**

## **BELGIUM (German-speaking part)**

1. Which country/jurisdiction do you work in/represent?

**The German-speaking Community in Belgium**

2. What is your job title?

**Head of Department - Probation Service**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

### Section 2: The Organisation of Probation and Mental Health Care Provision

#### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021? **291 persons**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? **No** ☒

- a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each)

**Some probation officers have attended training on "Psychopathology and interview techniques". The course lasted eight days (four days theory, four days practical training, role playing).**

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or **tick here** ☒ **if unknown**)

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**Roughly 8 %**

- a. What data/ information do you base this estimate on?

**Each probation officer checked his/her files and made a personal estimate.**

- b. Has specific research been carried out on this? If the answer is yes, please provide details **No** ☒

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

- a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies

☐

**Ministry of Health/Healthcare services**

☒

**Voluntary sector providers**

☒

**Other (please specify)**

**☒ BTZ (Counselling and therapy centre), private psychiatrists and psychologists.**

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☐

**Court** ☒

**Prison** ☒

Probation ☐

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

**Psychiatric assessments are used.**

**We also deal with cases in which we encounter persons with mental disorders that were not detected at the time of the court ruling.**

**They may be subject to therapeutic follow-up without necessarily having undergone psychiatric assessments.**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff ☐

Other criminal justice staff ☐

Nurse ☐

General practitioner ☐

**Psychiatrist** ☒

**Psychologist** ☒

Social worker ☐



Other (please specify)

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**If they are in psychiatric institutions, they go through the care pathway (mobile team).**

**If they are under the supervision of probation centres and have not been hospitalised, we refer them to counselling services such as BTZ or private psychiatrists and psychologists.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

- |  |                                     |
|--|-------------------------------------|
| Providing interventions/treatment themselves                   | <input type="checkbox"/>            |
| Inviting external services to work on their premises           | <input type="checkbox"/>            |
| <b>Referring people to external services working elsewhere</b> | <input checked="" type="checkbox"/> |
| Mixture of the above   | <input type="checkbox"/>            |

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **No** ☒

13. Are the number of deaths by suicide by persons under probation supervision collected nationally?

Yes ☐ No ☐

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities? **No** ☒

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities? **Yes** ☒

## **BELGIUM (Flemish community)**

1. Which country/jurisdiction do you work in/represent?:

**Belgium, for the Flemish (Dutch speaking) community**

2. What is your job title?

**Head of the Division Houses of Justice within the Department of Welfare, Public Health and Family**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

- ✓ **The Flemish concertation platform for Mental Health (Vlaams Overlegplatform Geestelijke Gezondheid - VLOGG) has made a report addressing the description, the evaluation and the shared vision regarding the guidance and treatment of non-detained probation clientele who have a psychological vulnerability.**

**Shared vision = cooperating partners are Mental health services, general social work services and the houses of justice (probation services).**

**Non-detained probation clientele = in Belgium that means every form of criminal execution outside of prison for adults (over 18): community service, conditional sentences, early release from prison, electronic monitoring, ...**

The report serves as a starting point to take actions to facilitate the accessibility to and to improve the continuity of the aid and care that is provided. Special attention goes to the collaboration between the social worker / mental health provider and the probation officer (cooperation protocols and consultation structures are needed).

- ✓ The Flemish Agency Care and Health (Vlaams Agentschap Zorg en Gezondheid) developed a framework for forensic mental health care. Through this instrument the government wants to improve the quality of mental health care for non-detained probation clientele. The framework provides specific and additional quality standards for this specific group of clients. The framework must be evaluated (refined and adjusted if necessary) in cooperation with the partners concerned.

## Section 2: The Organisation of Probation and Mental Health Care Provision

### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

**Active supervisions (all types of mandates) = 17.689.**

**Active advisory assignments (all types of mandates) = 317.**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training?  
**Yes** ☒

- a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

**The probation officers are given a wide range of training. There are training modules for different aspects of the job (how to deal with resistance, how to deal with aggression, how to deal with denial) and for dealing with several specific kinds of offenses (sexual offenses, violence within the family, ...). One training that was given over the years is "psychopathology and psychopharmaceuticals". In this training the most common mental health diseases (depression, psychosis), personality disorders (borderline, narcissism, ...) are regarded as well as on overview on the medication that normally is used in treatment.**

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, **or tick here** ☒ **if unknown**)

**No competence of the House of Justice, so no further information.**

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**Mere estimation: at least 30%**

- a. What data/ information do you base this estimate on?

**This is truly an estimation giving by field workers. They claim to have 1/3 clients with serious mental health issues.**

- b. Has specific research been carried out on this? If the answer is yes, please provide details

**There is no specific research known. The houses of justice don't registrate data to that detail.**

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

- a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐  
**Ministry of Health/Healthcare services** ☒  
Voluntary sector providers ☐  
Other (please specify)

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☐  
**Court** ☒  
**Prison** ☒  
Probation ☐

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

**At this moment, the houses of justice don't use screening tools. In some cases there is a psychiatric report available to them in the court records or an advisory report (including risk assessment) that is made in prison (in case of early released clients).**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff ☐  
Other criminal justice staff ☐  
Nurse ☐  
General practitioner ☐  
Psychiatrist ☐  
Psychologist ☐  
Social worker ☐  
Other (please specify)

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**If applicable the probation officer refers to the offer that is provided by mental health services. This referral is usually linked with the forensic conditions imposed by the judicial or administrative government (= "forced" or non-voluntary aid).**

**But the probation officer can also motivate the client to seek help even if there are no specific conditions that require this (voluntary referral).**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves ☐  
Inviting external services to work on their premises ☐  
**Referring people to external services working elsewhere** ☒  
Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **No** ☒

If yes, please provide details of these here

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities?

**Not within the Houses of Justice.**

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities? **No** ☒

**BULGARIA**

1. Which country/jurisdiction do you work in/represent?

**Republic of Bulgaria.**

**General Directorate „Execution of Sentences“ (GDES) under the Minister of Justice.**

2. What is your job title?

**Head of Unit „Probation“ and Head of Unit „Psychological laboratory“.**

Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

Section 2: The Organisation of Probation and Mental Health Care Provision

The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

**3678 persons were supervised by the probation service in our country/jurisdiction at 31 January 2021.**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? **No** ☒

If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or **tick here** ☒ **if unknown**)

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**We do not conduct similar research and do not keep statistics on the number of persons with a sentence probation who suffer from a mental disorder or disability.**

a. What data/ information do you base this estimate on?

b. Has specific research been carried out on this? If the answer is yes, please provide details.

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐

**Ministry of Health/Healthcare services** ☒

Voluntary sector providers ☐

Other (please specify)

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police)	<input checked="" type="checkbox"/>
Court	<input checked="" type="checkbox"/>
Prison	<input checked="" type="checkbox"/>
Probation	<input checked="" type="checkbox"/>

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

The inspectors-psychologists in the Regional Services „Execution of Sentences“ use a test battery approved by the General Director of General Directorate „Execution of Sentences“ for psychological examination of probation convicts, convicts with probation supervision and detainees, which includes:

a) An integrated system for differentiated psychological research, which is based on the theory of Andrews and Bonta (Andrews, Bonta & Wormit, 2004; Andrews & Bonta 2010). It uses a semi-structured interview, developed on the basis of the Risk-Needs-Responsivity model based on assessments of criminogenic needs and strengths of offenders.

b) A structured interview to assess antisocial attitudes and behaviours, which is used when a personality disorder is suspected. This instrument is based on the classic work of Robert D. Hare.

c) Screening interview - it aims to scan for the following main problems: propensity to aggression and violence; tendency to self-aggression and presence of suicidal ideations; alcohol and drug addiction; likelihood of a current mental disorder.

d) Suicide assessment interview - a structured interview through which the risk of suicide can be assessed. It is based on the Prison Suicide Risk Assessment Checklist (PSRAC), which on its part was developed by a team of mental health professionals, working for the Federal Bureau of Prisons (Wedeking, Carlson, Johnson, Ray & Levins 1997).

e) Aggression Assessment Questionnaire based on the Bass & Perry model (Buss & Perry, 1992).

f) Scale for assessing alcohol dependence based on the concept of alcohol dependence syndrome of Edwards and Gross (Edwards & Gross, 1976).

g) Psychological questionnaire for drug use assessment - Bulgarian version of the world's most widely used drug test - DASS 20 (Skinner & Goldberg, 1986).

h) Questionnaire for assessment of anxiety, stress and depression - it is developed on the basis of the test „Depression, Anxiety and Stress Scales“ (DASS; Lovibond & Lovibond, 1983).

i) Questionnaire for assessment of criminogenic thinking constructed on the basis of the scale „Anti-social attitudes and behaviour“ of Selector Pro.

j) Social Desirability Scale - a control scale designed to check the reliability of information obtained from self-assessment questionnaires.

k) Multidimensional Clinical Questionnaire for Adolescents created on the basis of the Bulgarian version of the Minnesota Multidimensional Clinical Questionnaire for Adolescents MMPI-A.

l) Multidimensional clinical questionnaire created on the basis of the Bulgarian version of the clinical questionnaire of T. Milan.

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff	<input type="checkbox"/>
Other criminal justice staff	<input type="checkbox"/>
Nurse	<input type="checkbox"/>
General practitioner	<input type="checkbox"/>
Psychiatrist	<input type="checkbox"/>
Psychologist	<input checked="" type="checkbox"/>

Social worker ☐  
Other (please specify) ☐

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

The people with a probation sentence have access to psychological services in the form of psychodiagnostics and psychological counselling, as there is a standard procedure approved by the General Director of GDES for the implementation of these activities.

**Procedure:**

The conduction of psychological examination and counselling of a convict sentenced to probation with probation surveillance is carried out in the cases of an application submitted by the probation inspector, leading the case. The application is coordinated with the Head of the Regional Service, who refers the case to a psychologist. A ground to refer the case to a psychologist and to conduct a consultation and psychological examination has in case of systematically observed problematic behaviour, expressed in:

- Loss of interest or pleasure in activities that were previously enjoyable - hobbies, entertainments and etc.;
- Decrease of the mood, sadness, anxiety, emptiness, hopelessness and pessimism, guilt, helplessness and uselessness; dissatisfaction, intolerance and irritability without explanation. Insomnia, early awakening or tendency to oversleep, loss of appetite and weight or vice versa. Refusal of food.
- Thoughts of death and suicide or declaration of suicidal intent. Ritual farewell and announcement of bequest.
- Problems with concentration, memory or impaired cognitive abilities, but only in cases when this change occurred while serving the sentence.
- Systemic conflicts with pronounced impulsive and aggressive behaviour.
- Systemic auto aggressive manifestations, leading to serious injuries and danger to the health and life of the person.

When there are indications of problematic behaviour that meets the listed criteria, the psychologist provides counselling - interview, screening and psychological examination, depending on the severity of the case. The psychologist plans the management of the case, which includes taking down of mental status, formulation of the case and he prepares a plan for interventions, which he proposes to the Head of the Regional Service for approval. The intervention plan describes and defines the specific responsibilities of the psychologist and the different categories of staff involved in the case, including external specialists (psychiatrists). The psychologist plans a certain number of sessions, after which he prepares a protocol. The Head of the Regional Service manages and controls the team and execution of the plan. The psychologist assesses the person's progress and respectively, makes adjustments in the intervention plan. At the end of the consultation process with a person, the psychologist prepares a report on the case.

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves ☒  
Inviting external services to work on their premises ☒  
Referring people to external services working elsewhere ☒  
Mixture of the above ☒

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? Yes ☒

If yes, please provide details of these here

The inspectors-psychologists from the Regional Services „Execution of Sentences“ perform psychodiagnostic and consultative activity in accordance with a methodological instruction for their activity approved by the General Director of GDES. It contains methodological guidance for psychological assessment and consulting of the sentenced to probation and surveillance.

13. Are the number of deaths by suicide by persons under probation supervision collected nationally?  
Yes ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities? No ☒

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities?  
No ☒

## CROATIA

1. Which country/jurisdiction do you work in/represent?

Croatian Probation Service

2. What is your job title?

Head of Sector for Probation

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

### Section 2: The Organisation of Probation and Mental Health Care Provision

#### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

At 31 Jan 2020 there was 2004 persons supervised by Probation Service

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training?  
Yes ☐ No ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or tick here ☒ if unknown)

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability? 8 %

a. What data/ information do you base this estimate on?

7,7% persons have ordered mandatory psychiatric treatment (2,5%) or mandatory addict treatment (5,2%). These data are in Court Order/Judgement.

b. Has specific research been carried out on this? No



If the answer is yes, please provide details

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? Yes ☐ No ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐

**Ministry of Health/Healthcare services** ☒

Voluntary sector providers ☐

Other (please specify)

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☐

**Court** ☒

Prison ☐

Probation ☐

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision.

**We use Risk assessment tool, but not for all offenders. Through this instrument we check the following issues:**

- **Difficulty dealing with problems (evidence of emotional instability and emotional stress, the perpetrator becomes very anxious, feels bad or anxious, or is anxiety interfering with his daily functioning?);**
- **Mental and behavioral disorders diagnosed by a physician (evidence of disorders diagnosed by a physician);**
- **Social isolation (Does the perpetrator have a network of acquaintances outside the family and other than friends, with whom he contacts on a regular basis or does he have no close friends or acquaintances? Is the perpetrator a loner?);**
- **The perpetrator's attitude towards himself (How does the perpetrator see himself and on what is his vision based?);**
- **Self-harm, suicide attempt, suicidal thoughts or feelings;**
- **Mental problems and difficulties according to the self-assessment of the perpetrator (statements about depressive states, anxiety, phobias, hypochondria, mood disorders.**

**Also, we check if there is some issues as the following:**

**Information indicating behavioral disorders in childhood;**

**History of severe head injuries, epileptic seizures, frequent and long fainting spells;**

**History of taking medication for psychological difficulties in the past;**

**History of psychiatric treatment;**

**The perpetrator was hospitalized in the psychiatric ward of the health facility.**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

**Probation staff** ☒

Other criminal justice staff ☐

Nurse ☐

General practitioner ☐



Psychiatrist ☐  
Psychologist ☐  
Social worker ☐  
Other (please specify)

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves ☐  
**Inviting external services to work on their premises** ☒  
Referring people to external services working elsewhere ☐  
Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? Yes ☐ **No** ☒

If yes, please provide details of these here

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? Yes ☐ **No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities?

**Probation officers don't work with family members at all**

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities? **No**

## CZECH REPUBLIC

1. Which country/jurisdiction do you work in/represent?

**Czech Republic - Probation and Mediation Service**

2. What is your job title?

**Head of the Department of Analysis - Head of the Department of Methodology**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

### **MANUAL FOR WORKING WITH DEPENDENT PERSONS (topics).**

**Theoretical part (Dependency phase, change cycle stage, available services for dependents).**

**Practical part (Safety of worker working with drug addicts, security at the Centre PMS, tester manipulation, field work safety, working with addictive or alcohol-dependent offenders, mapping the offenders situation, communication with dependent offenders.**

### Section 2: The Organisation of Probation and Mental Health Care Provision

The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021? **24 605.**

**DATA SOURCE: AIS PMS - administrative and statistical file system.**

**The number of persons in individual case of the supervision or care of probation agencies by above-mentioned categories including cases within pre-sentence reporting and parole and including minors.**

**The number of person without cases within pre-sentence and parole reporting was 23 731 (31.01.2021).**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? **Yes ☒**

**Note: Only work with drug and alcohol addict and gamblers.**

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

**Content:**

- **Adaptation course (Drug testing)**
- **RNA (Identification risk of addictions or abuses)**
- **Qualification training courses (Working with dependants)**
- **Further education system (Working with dependants)**

**Providers:**

- **Internal drug coordinators**
- **External lecturer from NGO active in the field of drug addiction**

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or **tick here ☒ if unknown**)

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability? **11,6 %**

**Percentage of person under probation and care with:**

- **drug and alcohol diagnosed addiction or problem abuse or gambling**
- **imposed treatment (drug, alcohol, sexual)**

**Note: 21,3 % including person with by court imposed prohibited using drug and alcohol and optional cure.**

**Other mental disorders we can't quantify.**

a. What data/ information do you base this estimate on?

**It is based on offenders data filled in our administrative and statistical file system.**

b. Has specific research been carried out on this? If the answer is yes, please provide details

**No, it hasn't.**

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No ☒**

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☒  
 Ministry of Health/Healthcare services ☒  
 Voluntary sector providers ☒  
 Other (please specify)

**Note: Ministry of Justice (Detention centres), Ministry of Health (Health services), NGO (Health and social services).**

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☒  
 Court ☒  
 Prison ☒  
 Probation ☐

**Note: Law enforcement agencies (Police, Prosecutors, Judges) ask for expert opinions. Prison Service has internal psychologists and psychiatrists.**

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff ☐  
 Other criminal justice staff ☐  
 Nurse ☐  
 General practitioner ☐  
 Psychiatrist ☒  
 Psychologist ☒  
 Social worker ☐  
 Other (please specify)

**Note: Probation staff can identify the potential suspicion of mental disorders or disabilities and inform the relevant court. There are no psychiatrists and psychologists in our organization.**

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**Probation officer can help the client with contact:**

**Mandated treatment in available medical centres and doctors**

**Offer of available health / social services in the region.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves ☐  
 Inviting external services to work on their premises ☐  
 Referring people to external services working elsewhere ☒  
 Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **No** ☒

If yes, please provide details of these here

**Note: Probation and Mediation Service does not implement this type of program, but uses the offers of locally available NGO programs.**

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities? **No, it isn't.**

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities? **No, it isn't.**

## DENMARK

1. Which country/jurisdiction do you work in/represent?

**Denmark, Department of the Prison and Probation Service**

2. What is your job title?

**Legal Special Consultant**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

**Nothing to report.**

### Section 2: The Organisation of Probation and Mental Health Care Provision

#### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021? **7.770.**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training?  
**Yes** ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

**There are non-mandatory courses in institutions, which specifically address inmates with mental health problems. The courses aim at employees in different institutions in the social sector. The course providers are both private academies and University Colleges.**

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or tick here ☐ if unknown)

**Provision of mental health care for people on probation is handled by the public health care authorities in Denmark, who service the general public.**

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

a. What data/ information do you base this estimate on?

b. Has specific research been carried out on this? If the answer is yes, please provide details

**The Prison and Probation Service does not have any available systematic data regarding clients under probation supervision who might have a current mental disorder or disability.**

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction?

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?) **No** ☒

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☒  
Ministry of Health/Healthcare services ☒  
Voluntary sector providers ☐  
Other (please specify) ☐

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☐  
Court ☒  
Prison ☒  
Probation ☐

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

**In several cases, a so-called "personal examination" is conducted before a sentencing in the courts. As a part of the personal examination, there is a possibility for a psychiatrist to conduct an assessment whether or not the individual suffers from any mental disorders or disabilities. This assessment is an integrated part of the subsequent sentence.**

**As an integrated part of the probation procedure, the supervision department will be given necessary health care journals from prison, where information regarding mental disorders or disabilities would be stated.**

**At this point, the citizen is using his or hers own general practitioner. It will be the general practitioner who conducts the examination and therefor the general practitioner who knows which screening tools/questions are commonly used.**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff ☐  
Other criminal justice staff ☐  
Nurse ☐  
General practitioner ☐  
Psychiatrist ☐  
Psychologist ☐  
Social worker ☐  
Other (please specify) ☐

**The citizen is at this point using his or hers general practitioner. The Supervisory authority will, to the extent possible, be aware of and react if the client should need to deal with mental conditions.**

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**The citizen contacts the general practitioner.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves ☐  
Inviting external services to work on their premises ☐  
Referring people to external services working elsewhere ☒  
Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **No** ☒

If yes, please provide details of these here

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities? **No** ☒

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities? **No** ☒

## FINLAND

1. Which country/jurisdiction do you work in/represent?

**Finland**

2. What is your job title?

**Senior Specialists in Central Administration**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

**Supervisors are obligated to guide a person to social services if he/she assess the need for support and services. Supervisors are also obligated to inform social services if a person is incapable to take care of himself or if interests of the child are involved. (Social Welfare Act 35 §)**

→ **Referring to social services**  
<https://stm.fi/en/social-services>

**OR**

→ **Referring to general practitioner / psychiatric nurse at public health care**  
<https://stm.fi/en/mental-health-services>

### Section 2: The Organisation of Probation and Mental Health Care Provision

#### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021? **3812 (1st of February 2021).**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? **No** ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or **tick here** ☒ **if unknown**)

**Criminal Sanctions Agency doesn't have a budget for mental health care. The mental health services are provided by municipality.**

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**A very rough estimation is more than 50 %. We do not have specific research to prove that.**

What data/ information do you base this estimate on?

**Based on the research (2010) 46 % of people under probation supervision has used mental health services during their lives.**

a. Has specific research been carried out on this? If the answer is yes, please provide details

**Health, working capacity and need for treatment of criminal sanction clients (2010).**

**In this research the sample group consisted of male prisoners (N = 309), female prisoners (N = 101), fine default prisoners (N = 100), life sentence prisoners and prisoners held in preventive detention (N = 100) and offenders serving a community sanction (N = 101).**

**Author: Matti Joukamaa & al. University of Tampere, Tampere School of Public Health; Tampere University. Criminal Sanctions Agency.**

**Abstract also in English:**

**<https://www.rikosseuraamus.fi/fi/index/ajankohtaista/julkaisut/risenjulkai/susarja/rikosseuraamus/sia/kkaidenterveystyokykyjahoidontarve.html>**

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐

**Ministry of Health/Healthcare services** ☒

Voluntary sector providers ☐

Other (please specify)

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☐

**Court** ☒

**Prison** ☒

**Probation** ☒

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

**We don't use any specific validated screening tools (only general risk and need assessment) but we can do our assessments in co-operation with social and health care services (also data collection).**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

**Probation staff** ☒

Other criminal justice staff ☐

**Nurse** ☒

**General practitioner** ☒

Psychiatrist ☐

Psychologist ☐

**Social worker** ☒

Other (please specify)

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

## Interview by supervisor

- Referring to social services
- Service needs assessment (by social worker / municipality)

OR

- Referring to general practitioner / psychiatric nurse at public health care
- Assessment of the need for treatment
- Referral to specialised medical care

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

- |   |                                     |
|---|-------------------------------------|
| Providing interventions/treatment themselves            | <input type="checkbox"/>            |
| Inviting external services to work on their premises    | <input type="checkbox"/>            |
| Referring people to external services working elsewhere | <input checked="" type="checkbox"/> |
| Mixture of the above                                    | <input type="checkbox"/>            |

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **No** ☒

If yes, please provide details of these here

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities? **No** ☒

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities? **No** ☒

## FRANCE

1. Which country/jurisdiction do you work in/represent?

**France**

2. What is your job title?

**Directorate of Prison Administration (DAP) health unit and co-ordinator for loss of autonomy**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

**Persons in semi-liberty (on day release) are covered by ordinary law and therefore have access to ordinary healthcare. The same applies to all those under the supervision of prison rehabilitation and probation services in community settings.**

**In addition, strand 5 of the 2019-2022 health roadmap for persons under judicial supervision ("Ensuring continuity of care in the case of prison release and ending of judicial measures") is intended to ensure continued care and treatment for detained persons, in particular between secure and community settings.**



## Section 2: The Organisation of Probation and Mental Health Care Provision

### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

As at 31 January 2021, there were 163 212 persons under supervision in community settings.

It should be noted that the prison administration is responsible for persons serving sentences who are not in detention (in particular, persons under electronic monitoring). The committal memorandum is the deed by which the prison administration is assigned responsibility for persons placed in pretrial detention or sentenced to imprisonment (with it, the head of the facility confirms the committal of the person concerned); it covers placement in community settings and placement under electronic monitoring. The release order ends such committal.

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training?  
Yes ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

The National Union of Families and Friends of the Mentally Sick and/or Disabled (UNAFAM), which is a partner of the Directorate of Prison Administration, and the training department of Caen prison administration developed a training course on "Care for persons with mental disorders" several years ago. The course is available for prison staff and stakeholders (senior management, management, guards, prison rehabilitation and probation officers (CPIP), administrative staff, etc.). It lasts a day and covers the following points:

- Pathologies,
- Mental disability,
- Some potential warning signs,
- Establishing contact with people with mental disorders.

The training course is now well established. In addition to Rennes Inter-regional Directorate of Prison Services (DISP), Bordeaux DISP is going to run the course with UNAFAM in its area in 2021. UNAFAM and the Directorate of Prison Administration are also considering its roll-out in the other Inter-regional Directorates of Prison Services.

A Mental Health First Aid (PSSM) training course has been run for prison staff since 2020 under a partnership with the National Union of Families and Friends of the Mentally Sick and/or Disabled (UNAFAM).

This course is intended to raise awareness among and inform prison staff so that they better understand mental disorders.

Its objectives are:

- Developing basic skills concerning mental health disorders;
- Better understanding the different types of mental health attacks/crises;
- Developing interpersonal skills: listening without judging, offering reassurance and providing information;
- Dealing more effectively with aggressive behaviour;
- Testing and taking ownership of an action plan to be used to provide immediate support in the event of mental health issues.

12 of these mental health first aid courses were held in 2020; 28 are planned in 2021.

Specifications for the development of training on "mental health and behavioural disorders" for prison staff, and provided by staff of healthcare units and/or regional medical psychology departments, are also being drawn up in co-operation with the Directorate General of Care Provision (DGOS).

In addition, as part of the initial training provided by ENAP (National Prison Administration Academy), future prison staff, including rehabilitation and probation staff (managers and officers), receive training on suicide prevention. In this connection, they are trained to assess suicide risks.

Moreover, although there is no training on “mental health” as such, ENAP runs psychology courses for all target groups, which cover mental health and relevant care provision in prison establishments. These courses are tailored to the needs of the various target groups concerned.

ENAP also runs “simulation” sessions for guards and prison rehabilitation and probation officers on dealing with behavioural disorders.

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or **tick here** ☒ **if unknown**)

**Under Law No. 94-43 of 18 January 1994 on Public Health and Social Protection, the Ministry of Solidarity and Health has sole responsibility for healthcare provision for prisoners.**

**Persons under the supervision of the Prison Rehabilitation and Probation Service in community settings and those in semi-liberty (on day lease) are covered by ordinary law.**

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**We do not have this information. Persons under the supervision of the SPIP in community settings and those in semi-liberty (on day release) are covered by ordinary law.**

a. What data/ information do you base this estimate on?

b. Has specific research been carried out on this? If the answer is yes, please provide details

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If ‘yes’ please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐

**Ministry of Health/Healthcare services** ☒

Voluntary sector providers ☐

Other (please specify)

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

**Arrest (police)** ☒

**Any person placed in police custody may request to be examined by a doctor (Article 63-3 of the Code of Criminal Procedure). When such a request is made, the examination must be performed within the first three hours of custody unless insurmountable obstacles prevent it. The doctor indicates whether the person is fit to be kept in custody and makes any relevant assessments.**

**Upon referral to the prosecution service and committal for trial in criminal courts, associations or the Prison Rehabilitation and Probation Service may be asked to conduct quick social checks, for which social workers and prison rehabilitation and probation officers gather information from the accused about their state of health: health issues (physical or mental), existing care (what type, frequency, medical history, place of care), any addictions, active involvement in care measures, suicide risk, ability to meet the basic needs of daily life.**

**The reports drawn up indicate whether these points were checked and by which means.**

**Court ☒**

During the preliminary investigation phase, a medical/psychological examination may be ordered by the investigating judge or requested by the parties.

**Prison ☒**

Upon imprisonment, prisoners are placed in a “new admissions” wing, where they are seen by a member of the prison medical staff and the Prison Rehabilitation and Probation Service. These staff assess the prisoners’ state of health, in particular with a view to preventing any attempts at suicide. Medical care may be provided at any time during imprisonment, hospitalisation may be requested and the Prison Rehabilitation and Probation Service may ask the relevant judge to order an expert assessment. Sentences may be suspended or adjusted for medical reasons.

**Probation ☒**

In the case of supervision in community settings, the prison rehabilitation and probation officer makes an overall assessment of the health situation of the persons concerned. Their health situation is a decisive factor in terms of assessing them and providing care and supervision. To this end, the officer compiles all relevant judicial documents, such as medical-psychological examinations conducted previously, medical care provided in prison if the person had been imprisoned, care/treatment obligations or orders. The officer also interviews the person concerned to gather information (previous or ongoing medical care, etc.).

In the assessment phase or during supervision, the relevant rehabilitation and probation officer may be assisted by the department’s multidisciplinary team. In particular, they may seek the advice of the Prison Rehabilitation and Probation Service psychologist as to whether psychological or psychiatric care is needed. They may request a psychiatric assessment from the relevant judge when they deem this necessary for the person’s care.

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

**The prison administration does not arrange screening. Persons on probation are covered by ordinary law and the same screening arrangements therefore apply as for the general public.**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

- |                              |  |
|------------------------------|--|
| Probation staff              | <input type="checkbox"/>                             |
| Other criminal justice staff | <input type="checkbox"/>                             |
| Nurse                        | <input type="checkbox"/>                             |
| General practitioner         | <input type="checkbox"/>                             |
| Psychiatrist                 | <input type="checkbox"/>                             |
| Psychologist                 | <input type="checkbox"/>                             |
| Social worker                | <input type="checkbox"/>                             |
| Other (please specify)       | <input checked="" type="checkbox"/> See reply below: |

**Persons on probation are covered by ordinary law and the same screening arrangements therefore apply as for the general public. Accordingly, if they suspect they have a mental disorder, they make appointments to be examined by a doctor/specialist in mental disorders. Screening is therefore at the initiative of the person concerned.**

**The same applies to disabilities. However, the relevant issues may be raised in the context of supervision by the Prison Rehabilitation and Probation Service (SPIP) and referrals may be arranged. The latter are compulsory if a court order has been issued requiring the person on probation to seek care/treatment.**

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**Persons on probation are covered by ordinary law. The care pathway is the same as for the general public. The same psychiatric care arrangements therefore apply as for the general public.**

The legal basis is Law No. 2005-102 of 11 February 2005 on Equality of Rights and Opportunities, Participation and Citizenship for Persons with Disabilities.<sup>1</sup> The underlying spirit here is that of a comprehensive approach to the individual from the angle of the disability, in which the link between the medico-social aspects and care provision is vital. Precedence is given to a networked approach so as to ensure co-ordinated action. The right to compensation is provided for in this legislation.

The rule is for the initiative to lie initially with the person placed under judicial supervision, while the exception to the rule for persons with mental disorders is hospitalisation at the request of a third party (Article L3212-1s of the Public Health Code). In the case of persons with physical disabilities, if any legislation indicating an exception to the rule exists, we are not aware of it.

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves ☐

Inviting external services to work on their premises ☐

Referring people to external services working elsewhere

☒ Such referrals are made if a court order has been issued requiring the person on probation to seek care/treatment.

Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **Yes** ☒

If yes, please provide details of these here

The prison rehabilitation and probation officer is in charge of assessing compliance with care/treatment orders (issued by judicial authorities before or after sentencing, although the majority are issued after sentencing; the socio-judicial voluntary sector is responsible for many presentencing measures).

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **Yes** ☒

The prison administration keeps records of suicides by persons serving sentences both in detention and elsewhere (electronic monitoring, placement outside custodial system).

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

Breakdown of suicides of persons serving sentences on probation outside of prison (i.e. total number of suicides of persons serving sentences outside of prison, except suicides in hospital facilities by persons serving sentences and suicides by persons in semi-liberty (on day release) when outside prison and on prison leave) from 2010 to 2020:

Place		2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Total
Placed outside							1	2					3
Under electronic monitoring	Placement under electronic monitoring	6	4	9	5	8	9	7	5	7	9	1	72
	End-of-sentence electronic monitoring (SEFIP)		1										1
Total		6	5	9	5	8	10	9	5	7	9	1	76

14. Is there specific work with family members of the persons who experience mental disorders and disabilities?

A project concerning persons who experience mental disorders and disabilities run by the National Union of Families and Friends of the Mentally Sick and/or Disabled (UNAFAM) will be established shortly.

<sup>1</sup> <https://www.legifrance.gouv.fr/loda/id/JORFTEXT000000809647/>

The aim is to provide the families of prisoners who experience mental disorders with information about the scope of its work and how it is organised, in particular through:

- the distribution of leaflets, guides and posters through family visit centres;
- posters in visiting rooms;
- presence in family visit centres during opening hours, within its means and subject to the agreement of the family visit centres.

UNAFAM informs prisoners' families who contact it about means of communication for passing on information to prison healthcare units about their relatives' care pathways and - in emergencies - to authorised staff regarding worrying developments in their health based on information provided to it by prison services.

There is no specific work concerning disability.

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities?

There is no formal gender approach in the probation sector, but provision for persons with such disorders is looked at from the angle of gender and its impacts.

A research project on the mental health of persons leaving prison was started by a team from Lille in September 2020. The study includes a section on women's mental health. Prisons which house women are therefore included in the scope of the study and as regards the groups taken into account by the prison administration. This is also reflected in Action 20 of the roadmap, the aim of which is to improve women's access to medical psychology services.

## GERMANY

1. Which country/jurisdiction do you work in/represent?

11 of the 16 states of the Federal Republic of Germany

The participating states were:

Baden-Württemberg (BW)  
Bayern (Bavaria) (BY)  
Berlin (BE)  
Brandenburg (BB)  
Hessen (HE)  
Mecklenburg-Vorpommern (Mecklenburg-Western Pomerania) (MV)  
Niedersachsen (Lower Saxony) (NI)  
Nordrhein-Westfalen (North Rhine-Westphalia) (NW)  
Saarland (SL)  
Schleswig-Holstein (SH)  
Thüringen (Thuringia) (TH)

2. What is your job title?

BW: Criminologist (clerk) at the central social work department (headquarter of probation service in South Germany)

BY: Probation officer of the Free State of Bavaria

BE, BB: Court aides and probation officers at the Social Services of the Judiciary

HE: Head of Division for the Social Services of the Judiciary in the Hessian Ministry of Justice

MV: Head of Department of Social Services of the Judiciary in the State Office for Outpatient Offender Work Mecklenburg-Hither Pomerania / Court and Probation Services

NI: Social worker

NW: Head of Division

SL: Head of Division at the Saarland Ministry of Justice

SH: Social pedagogue/social worker (Dipl. FH); Employee at the Ministry for Justice, Europe and Consumer Protection, Kiel

TH: Clerk for the administration of social services

#### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

BW: The Bewährungs- und Gerichtshilfe Baden-Württemberg (BGBW) has established a specialist concept. In each of our 9 facilities, we have a specialist for different topics, such as the topic “persons under probation with mental disorders”. These specialists have up-to-date expertise as well as methodical and didactical skills. Core tasks of the specialists include training and counselling of the probation officers, if needed case analysis, crisis intervention and tandem support for difficult cases. They also organize specialist days, training courses and lectures as well as networking meetings. The specialists offer case discussions and consultation hours for their colleagues. In order to enable continuous knowledge building, the specialists have 5 training days per year at their disposal. For quality assurance purposes, the central social work department of the BGBW, holds an annual meeting with all specialists.

BY: In Bavaria, there are no special (political) programs, recommendations or similar. The binding quality standards of the Bavarian probation service apply to the work of the probation service in Bavaria. These are available on the homepage of the Bavarian State Ministry of Justice under the following link:

[www.justiz.bayern.de/gerichte-und-behoerden/oberlandesgerichte/muenchen/bewaehrungshilfe.php](http://www.justiz.bayern.de/gerichte-und-behoerden/oberlandesgerichte/muenchen/bewaehrungshilfe.php)

NI: There are quality standards in the ambulant judicial social services in Lower Saxony. The corresponding manual in English is attached as an appendix ambulant.

SH: In Schleswig-Holstein, there are no known special programs or procedures for the treatment of probationers with mental illness in the sense of health care. In order to counteract stigmatization and promote participation in the health care spectrum, the support of mentally ill or conspicuous probationers is aimed at enabling access to general medical and therapeutic services.

In general, health care for mental illness/psychiatric disorders is organized as decentralized and community-based as possible. In Schleswig-Holstein, outpatient services as well as inpatient or day-care services are available for persons with mental illnesses, which are also open to offenders. Probation officers have knowledge of the regional support services and cooperate with/provide access to:

- Low-threshold regional counselling services provided by governmental and non-governmental organizations
- Psychotherapists in private practice, who are required by the Psychotherapy Guidelines to offer timely consultation hours and acute treatment.
- Specialists in private practice (neurology/psychiatry, addiction medicine)
- The emergency rooms of psychiatric clinics/departments (in the event of acute psychiatric or psychotic crises), as well as day clinics and outpatient follow-up care
- Specialist and rehabilitation clinics
- Social psychiatric services of the health authorities
- Offers of addiction support for probationers with ICD10 F10-F19 disorders;

- Offense-specific services for sex offenders and violent offenders, which are also open to probationers with mental disorders.

The following programs are available for probationers with crime-relevant disturbance patterns:

- "Don't become an offender" - low-threshold counselling and treatment offer for persons with sexual preference disorder directed at minors
- Forensic specialist outpatient clinics - for treatment for persons with sexual preference disorder, usually in accordance with a directive under the Criminal Code
- Suspension of execution of sentence according to § 35, 36 des Betäubungsmittelgesetzes (Narcotics Act) in favour of a mostly inpatient addiction therapy measure.

BE, BB, HE, MV, NW; SL, TH: Specific political programs, recommendations, reports or similar documents as mentioned above do not exist.

## Section 2: The Organisation of Probation and Mental Health Care Provision

The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

**Total in Germany: 126.931.**

**In detail:**

**BW: 16.984**

**BY: 20.875**

**BE: 4.973**

**BB: 3.251 subjects (of whom 718 subjects were under management supervision)**

**HE: 10.386**

**MV: 3.542 (On the reporting date December 31, 2020)**

**NI: 13.753**

**NW: 42.142 (On the reporting date: December 31, 2020)**

**SL: 2.558**

**SH: 3.425**

**TH: 5.042**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training?

**BW: Yes**

**BY; NI; SL; TH: No.**

**BE: No.** In the state of Berlin, only state-certified social workers, special educators and psychologists are employed in the probation service, who already have the necessary knowledge and appropriate awareness of the topic of mental health due to their training. Routine training for employees is therefore not required. However, there are various training opportunities, also on the subject of mental health.



BB: No. However, mental health disorders of probationers are the subject of individual, voluntary training opportunities for probation officers.

Provider:

- Justice Academy of the State of Brandenburg
- Own offers of the department for social services in the form of workshops
- State Academy for Public Administration

Trainings:

- Training of specific methods and knowledge as well as solution strategies to disturbance fields, problem fields, such as addiction, psychiatric illnesses. Training on strategies for motivating change with practical components,
- Training courses on "working with mentally ill lawbreakers" and "working with sex offenders",
- Supervision offers for all social workers on professional work (case supervision) and also on personal and individual topics (individual supervision), if there is a relation to the work.

HE: No. However, Hesse offers regular training for probation officers on the subject of mental disorders and illnesses. This is more general information than sensitization in the sense of the question. These training courses are offered by a psychiatrist.

MV: No. However, the educational center of the MV prison system offers regular, annual training courses on dealing with mentally abnormal prisoners/ probationers.

Goal: To improve the confidence in dealing with mentally conspicuous prisoners/ probationers.

Contents:

- Observation of prisoners/subjects and recognition of abnormalities
- Imparting knowledge about specific disturbance patterns that are associated with behavioural problems
- Possibilities of intervention for the participants of the training course

NW: Yes. There is a regular training offer, but without obligation to participate

SH: No. Although there is no routine training, the further training program for probation officers in SH regularly includes further training on how to deal with probationers with mental disorders or challenging behaviour; in addition, in the work with probationers with sexual preference disorder, an in-depth area on working with sex offenders and regular specialized supervision is offered.

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

BW: Probation staff can receive intern or extern trainings. Intern we provide further training on the topic "Clients with mental disorders". Probation officers have also the possibility to take individual supervision. Every of our 9 facilities has a probation officer with special skills in this subject. This specialized probation officer can advise colleagues or organizes trainings.

NW: Objective of the training offer: Participants will be aware of the special problems involved in dealing with the subject group.

Content: Dealing with mentally ill offenders places a high burden on probation staff.

The event is intended to provide information about certain clinical pictures, to help explain psychological reactions and behaviours, and to lead to a greater understanding in dealing with these probationers. It is also intended to provide information about counselling services and treatment options.



**Provider: Justice Academy of the State of North Rhine-Westphalia.**

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or tick here ☐ if unknown)

**BW:** The budget is 12,50 Euro per employee per year

**BY:** Health care is not an original task of the Bavarian probation service. In this respect, the probation service merely provides supportive and advisory assistance. A separate budget for persons with mental illnesses who are subject to the probation service is therefore not provided in the justice budget for the area of probation assistance.

**HE:** In Hesse, mental health care for persons under probation supervision is not the responsibility of the justice system.

**BE, BB, MV, NI, SL, SH:** unknown.

**NW:** Unknown. However, expenditures are not capped in principle.

**TH:** Mental health care and probation supervision are separate. In this respect, there is no budget specifically earmarked for mental health care for persons under probation supervision. When probation officers identify mental health issues in probationers, they may involve, for example, the Sozialpsychiatrische Dienst (Social Psychiatric Service, SPDI), a therapist in private practice, or inpatient mental health care.

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**BW, BY, BE, MV, SL:** This group of persons is not recorded statistically.

**BB:** The percentage of subjects with mental disorders, including addictive disorders, is estimated at 40 to 50 percent. There is no statistical recording of this.

**HE:** The percentage is about 15% of those under probation supervision.

**NI:** Maximum approx. 20% (depending on definition).

**NW:** As far as recorded, the share was approximately 13% as of December 31, 2020.

**SH:** Approximately one quarter of the probationers recorded had a confirmed diagnosis, while another 15 percent were suspected by the probation service. Drug-related illnesses were not taken into account. In almost half of the total number of persons recorded, a substance abuse problem is assumed, although there are various overlaps with (other) mental disorders or disabilities.

**TH:** An estimated 10% of the test persons suffer from mental illnesses (this does not include test persons who also have addiction or substance abuse problems). It is estimated that 50% of the test persons suffer from addiction.

It can be assumed that the number of probationers with addiction or substance abuse problems is higher than estimated by the practitioners. In addition, it can be assumed that the number of probationers with imperceptible mental health problems is also higher than the estimated number. This applies, for example, to personality disorders that cause hardly any difficulties in the judicial context.

a. What data/ information do you base this estimate on?

**BB:** These are empirical values from the probation department. The work with probationers is based on quality standards. For example, social histories are taken and criminogenic factors are determined. This results in individual assessments by the probation officers.

**HE:** In Hesse, a computer application which is called "SoPart" is used. This also allows mental health to be recorded. Entries were made in the "Health" field for 82% of the registered persons under

probation supervision, of whom 21% had mental illnesses/disorders. It can be assumed that if there are no entries, there are no illnesses/disorders.

**NW:** Overall statistics on the general living situation of clients as of 12/31/2020 State of North Rhine-Westphalia.

**SH:** The data of 218 probationers, distributed among 4 probationers, were counted.

**TH:** The information is based on estimates of the three regional heads of social services in the judiciary of the Free State of Thuringia.

b. Has specific research been carried out on this? If the answer is yes, please provide details

**None.**

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction?

**BW; BY; HE; MV; NI; NW; SL; SH; TH:** No ☒

**BE, BB:** Yes ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

**BE:** Data on the mental health status of probationers are routinely recorded in the electronic probation file. This data is derived from information provided by the commissioning authorities (courts, clemency authorities, etc.), which regularly provide information on existing disorders or illnesses of probationers, for example in the form of forensic psychiatric reports obtained there. In addition, all subjects are requested to provide self-disclosure as part of the obligatory anamnesis procedure at the beginning of probation supervision. This information may also be supplemented by data and information provided by third parties involved in the probation supervision process, such as specialists from the Forensic Therapeutic Outpatient Clinic.

**BB:** The work with the probands is based on quality standards. In the first 6 months after taking over the case, the document "Case assessment and clarification of needs" is prepared on the basis of the documents (judgment/decision, if necessary expert opinion, regular discussions with the probands). In this document, the personal/health situation of the probationer is recorded and criminogenic factors are identified and worked on by the probation officers with the probationer in the course of the placement/care period. Mental disorders and addictions are among the stable-dynamic factors (criminogenic factors).

The work with the probationers always takes place in an individual setting (one probation officer and one probationer). The probation officers document their work in probationer files (paper files and electronic). However, separate statistics are not kept.

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐  
Ministry of Health/Healthcare services ☐  
Voluntary sector providers ☐  
Other (please specify)

**BW: Other:** Bewährungs- und Gerichtshilfe Baden Württemberg (BGBW).

**BY; BE; BB; HE; MV; NI; SL; SH:** Ministry of Health/Healthcare services.

**NW:** Ministry of Justice/Criminal Justice agencies; Ministry of Health/Healthcare services.

**TH:** Ministry of Justice/Criminal Justice agencies; Ministry of Health/Healthcare services; Voluntary sector providers.

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☐  
Court ☐  
Prison ☐  
Probation ☐

BW; BB; NI; SL; SH: Court, Prison.

BY: Court, Prison.

Notice: In criminal proceedings, the public prosecutor's office or the court may commission an expert opinion at any time if there are indications of mental disorders. An expert opinion may be obtained in particular on the question of culpability. In the case of placement in a detention facility, psychiatric hospital or preventive detention ordered by judgment, the court shall examine within the statutory regular time limits whether the conditions for the continuation of the placement continue to exist. In doing so, the court is to commission external experts to assess the person concerned at regular intervals, which is also done in practice.

BE: Arrest (Police); Court; Prison and Probation.

Notice: The term "screened" used in question 7. is understood here broadly, i.e., in the sense of a review of the mental health status of some kind and not solely in the sense of the use of scientifically established testing procedures for diagnosis.

In practice, such a review takes very different forms in the various stages of the process. For example, during (provisional) arrest, the police officers generally only make a rough assessment as to whether the person concerned should be taken to a psychiatric hospital on account of his or her condition. In the course of the preliminary investigation by the public prosecutor's office and the intermediate or main proceedings by the courts, however, a forensic psychiatric expert opinion is obtained in reported cases, which has to make use of scientifically recognized test procedures tailored to the issue in question. Upon admission to a Berlin correctional facility, appropriately trained specialists also assess the mental state with regard to the need for treatment and, in particular, arrange for routine suicide screening. In the case of placement in a correctional facility, the competent court reviews on a regular basis whether the conditions for continued placement continue to be met. In the context of probationary services, the mental health status is assessed as described in the answer to question 5.a. under section 2 by compiling the findings from the medical history interview and information from other agencies involved.

HE; MV: Arrest (Police); Court; Prison.

NW: Arrest (Police); Court; Prison and Probation (hence all).

TH: Court; Prison and Probation. With regard to probation, only with the inclusion of standard care, if this appears to be indicated.

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

BW; NI; TH: There are no special screening tools regarding this topic.

BY; HE; MV; SL: Mental disorders are only recorded if there are corresponding findings in an expert opinion, judgment or if the person makes statements in the context of probation supervision, but are not identified by probation officers.

BE: The probation officers determine the mental health status of the probationers in the course of a detailed medical history interview and on the basis of the information provided from the previous judicial proceedings or via other interfaces. In this respect, reference is again made to the answer to question 5.a. under section 2. Routine screening on the basis of specific tests or diagnoses according to ICD-10 do not take place.

BB: See question 5, but screening is not done by probation officers.

NW: The outpatient social service of the justice system does not generally require professionals to use certain survey instruments. Instead, the specialists of the outpatient social service of the justice system work according to the quality standards introduced as binding in North Rhine-Westphalia, which, among other things, also address anamnesis in probation assistance and supervision of conduct. The quality standards contain uniform survey and questionnaires as well as processing lists, some of which are based on scientific findings and have been introduced into the SoPart Justice specialist application via the state association.

SH: Probation officers do not use psychological tests or diagnostic procedures. If relevant for the resocialization process, probationers are asked about health problems and, if necessary, the need for support or treatment, and allegedly conspicuous behaviour is reflected upon.

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff	<input type="checkbox"/>
Other criminal justice staff	<input type="checkbox"/>
Nurse	<input type="checkbox"/>
General practitioner	<input type="checkbox"/>
Psychiatrist	<input type="checkbox"/>
Psychologist	<input type="checkbox"/>
Social worker	<input type="checkbox"/>
Other (please specify)	

BW; BB; MV; SL; SH: Psychiatrist, Psychologist.

BY: Psychiatrist, Psychologist.

Notice: The mere fact that a person is subject to probation is not a criterion for testing for mental illness. Such tests are regularly carried out only if the probationer receives accompanying psychotherapeutic treatment/therapy, especially with regard to the risk of recidivism.

BE: Probation staff; General practitioner; Psychiatrist; Psychologist; Social worker.

Notice: The term "to screen" is again understood broadly here and not solely in the sense of using scientifically established test procedures to make a diagnosis.

HE: Other: If a person under probation supervision gives the impression to the responsible probation officer that a psychiatric/psychological assessment is indicated, contact is made with the social psychiatric service of the local health offices or the probationer's family doctor. However, this is done only after the person has given his or her written consent, except in situations of danger to the person himself or herself or to the general public.

NI: No answer provided.

NW: Other: Experts commissioned by courts and judicial authorities, usually psychologists and physicians, insofar as the disorder does not already result from an expert opinion of the penitentiary.

TH: Probation staff (Based on basic knowledge of mental health care only. No testing methods are used systematically.); Psychiatrist; Psychologist; Social worker.

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

BW; NW; SL; SH: Probation officers refer their clients to suitable institutions/responsible (municipal) authorities.

BY; NI: Access to mental health care is available to all individuals with health insurance, and this generally includes probation subjects.

BE: All persons under probation supervision have access to the public (or municipal) health care system. Individuals have access to specialized services provided by the probation service if there is a forensic indication.

**BB:**

- Probationers turn to doctors or psychologists, psychiatrists out of their own suffering.
- Probationers are motivated by probation officers to seek treatment/therapy/counselling from physicians or psychologists, psychiatrists.
- Probation officers provide assistance with hospitalization or applications to enable the probationer to receive further assistance, e.g. court-appointed guardians.
- If the probationer consents to treatment - court-ordered instructions for probationers to receive/perform counselling/therapy with psychologists, psychiatrists, or to report to the specialized outpatient clinic and attend counselling appointments. Probation officers motivate the probationers and support the fulfilment of court orders.

**HE:** See answer 9.

**MV:** See answer 8.

**TH:** After initial identification of corresponding problems, subjects can be referred to a therapist in private practice or to inpatient care if compliance is sufficient. If there is an acute need for action, the socio-psychiatric service or emergency physician can be involved.

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

- |   |                          |
|---|--------------------------|
| Providing interventions/treatment themselves            | <input type="checkbox"/> |
| Inviting external services to work on their premises    | <input type="checkbox"/> |
| Referring people to external services working elsewhere | <input type="checkbox"/> |
| Mixture of the above                                    | <input type="checkbox"/> |

**BW; BY; NW:** Inviting external services to work on their premises; Referring people to external services working elsewhere.

**BE; MV:** Mixture of the above.

**BB, HE; SL; SH; TH:** Referring people to external services working elsewhere.

**NI:** No answer provided.

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision?

**BW; BY, BB; HE; MV; NI; NW; SL:** No ☒

**BE; SH; TH:** Yes ☒

If yes, please provide details of these here

**BE; SH:** Under certain conditions, the court may issue specific treatment instructions to the person on probation, which must be implemented. These include, for example, the instruction - to be specified in more detail by the court - to undergo psychotherapeutic treatment or to present himself regularly at the Forensic Therapeutic Outpatient Clinic.

**MV:** Subjects who have been released from the correctional system may be instructed to undergo treatment in the so-called "Forensic Institute Outpatient Clinics (FIA)".

Subjects who are under probation supervision and have been released from prison can be instructed to undergo treatment in a forensic therapeutic aftercare outpatient clinic. The therapy there is offense-specific rather than disorder-specific.

13. Are the number of deaths by suicide by persons under probation supervision collected nationally?

**BW; BY; BE; BB; HE; MV; NI; NW; SL; SH; TH (hence all participating states): No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities?

**BW; HE: No** ☒

**BY; BE; MV; NI; SL; SH; TH: No.** However, relatives of persons suffering from mental disorders or a disability have access to the public health care system and can make use of the counselling and assistance services there. In addition, there is a network of self-help organizations and offers of free carriers whose services can be accessed.

**BB: No,** but probation officers provide family members (even if they are not directly involved) with information about regional counselling centers and networks, if applicable.

**NW: This is a municipal matter. We do not have any findings.**

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities?

**BW; BY; MV; NI; SL; SH: No** ☒

**BE; BB, HE: Yes.** Probation officers generally maintain a gender-sensitive approach in their work with probationers. In this respect, this also applies to persons with mental disorders or disabilities.

**NW: No answer provided.**

**TH: No,** there is no specific gender-sensitive approach. Social work is guided, among other things, by the approach of lifeworld orientation and in this way takes into account individual aspects of the personality of the subjects.

## HUNGARY

1. Which country/jurisdiction do you work in/represent?

**Hungarian Prison Service**

1. What is your job title?

**Senior Desk Officer**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

### Section 2: The Organisation of Probation and Mental Health Care Provision

#### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021? **2 111.**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? **No** ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or **tick here** ☒ **if unknown**)

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability? **13,55 %**

a. What data/ information do you base this estimate on? national level data provides

b. Has specific research been carried out on this? If the answer is yes, please provide details

**Yes. All prison service probation officers assessed the mental health of the persons under probation.**

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

**Ministry of Justice/Criminal Justice agencies** ☒

Ministry of Health/Healthcare services ☐

Voluntary sector providers ☐

Other (please specify)

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

**Psychologists employed in prison institutions examine detainees in connection with detention.**

Arrest (Police) ☐

Court ☐

Prison ☐

Probation ☐

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

**Screening tools developed for persons under probation are not used by psychologists working in prison institutions. Regarding psychological examinations, the following examination procedures are included in the toolbox: interview, exploration.**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff ☐

Other criminal justice staff ☐

Nurse ☐

General practitioner ☐

Psychiatrist ☐

Psychologist ☐

Social worker ☐

Other (please specify) ☒ **No specific screening is performed. Persons under probation may seek the assistance of the probation officer on their own.**

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**Persons under probation may turn to the probation officer, who will direct them to the appropriate site for a qualified expert.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?



- Providing interventions/treatment themselves ☐
- Inviting external services to work on their premises ☐
- Referring people to external services working elsewhere ☐
- Mixture of the above** ☒

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **No** ☒

If yes, please provide details of these here

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No** ☒  
If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities? **No** ☒

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities? **No** ☒

## ICELAND

1. Which country/jurisdiction do you work in/represent?

**Iceland**

2. What is your job title?

**Clinical Lead at the Prison and Probation Administration**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

**A mental health interdisciplinary mental health team has been established for the prison system, starting in 2020. The team includes psychologists, a psychiatrist, psychiatric nurses and hopefully will have the resources to access other professions as needed. The team operates on the basis of internationally recognized standards, evidence-based methodology and clinical treatment guidelines. The team works both onsite (within the prisons) as well as using teleconferencing equipment when needed or when appropriate. The team works closely with employees of the prison service, mental health teams in the community, health care institutions and other service providers to ensure continuity of services once the detainee has left prison.**

**The main goals of the prisons' mental health team:**

- To provide general and specialized mental health services in prisons;**
- To provide individualized, coordinated and continuous mental health services in collaboration with health and social services inside and outside prisons.**

### Section 2: The Organisation of Probation and Mental Health Care Provision

The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

**The total number of person on probation was 171 thereof 44 who were under special supervision with restrictive measures.**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? **Yes** ☒



- a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

**Probation staff are few and far between in Iceland but the personnel who work with those of probation are either social workers and/or psychologists who all have formal training in mental health issues.**

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or tick here ☐ if unknown)

**Funding for the mental health team for the year 2021 is approximately 450.000 euros or 70.000.000 Icelandic krona. However, the team has only been up and running for a year and their main emphasis has been on servicing detainees in prison although part of their services is linked to those on probation there is no formal breakdown of the costs associated with it as of yet. The overall approach to mental health problems of those on probation is that they should receive the same services as anyone else in the community and the focus being that they are linked to public health services.**

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**Serious mental disorders or disabilities within the probation population, at any given time, is estimated to be around 15% not including those who are addicted to drugs.**

- a. What data/ information do you base this estimate on?

**The data used is first and foremost based on professional opinions of those working within the prison system. In some cases there is a formal diagnosis of serious mental disorder.**

- b. Has specific research been carried out on this? If the answer is yes, please provide details

**No research has been done on this group.**

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

- a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐  
**Ministry of Health/Healthcare services** ☒  
Voluntary sector providers ☐  
Other (please specify) ☐

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☐  
Court ☐  
**Prison** ☒  
Probation ☐

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

**Mini Mental State.**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff ☐  
Other criminal justice staff ☐  
Nurse ☐

General practitioner ☒  
 Psychiatrist ☐  
 Psychologist ☐  
 Social worker ☐  
 Other (please specify) ☒ **Mental health teams working within prison/probation.**

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**In general those on probation would have the same access to mental health care like any other person in Iceland. They would in general contact their GP, psychiatrist or the psychiatric ward at the University Hospital - Landspítali. The probation team in many instances assists those in need to access services. In cases where there is a known problem when a person leaves prison they would be followed and treated by an independent mental health team that works within the prison/probation sector until their continuity of care is ensured.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves ☐  
 Inviting external services to work on their premises ☐  
**Referring people to external services working elsewhere** ☒  
 Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **No** ☒

If yes, please provide details of these here

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities? **No** ☒

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities?

**Probation personnel as well as mental health workers are aware of the sensitivities surrounding gender and mental health and take care to take that into account in their practice.**

## IRELAND

1. Which country do you work in/represent for the CEP?

**Ireland**

2. What is your job title?

**Assistant Principal Probation Officer**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to the mental health of people on probation (send as attachments with the completed survey)

**Not available.**

2. How would you describe the main aims of the probation service in your country?

**The Probation Service is an agency within the Department of Justice. We play an important role in helping to reduce the level of crime and to increase public safety by working with offenders to help**

**change their behaviour and make good the harm done by crime. We are the lead agency in the assessment and management of offenders in our community.**

## Section 2: The Organisation of Probation and Mental Health Care Provision

### The Organisation of Probation

1. How many people are supervised by the probation service in your country? **10,000 on a daily basis.**
2. Do probation staff in your country routinely receive mental health awareness training? **No** ☒
- a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).
3. What is the total budget for the provision of mental health care for people on probation in your country? (Please provide details, or tick here ☐ if unknown)

**No allocated budget. Services provided with the general population.**

4. Approximately what percentage of people on probation in your country do you estimate have a current mental illness?

**At least 40% (adults).**

- a. What information do you base this estimate on?

**Dr Christina Power's mental health report.**

5. Is information on the prevalence of mental illness amongst people on probation routinely collected in your country? **No** ☒
- a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)
6. Which organisation(s) have responsibility for providing mental health care for people on probation in your country?

Ministry of Justice/Criminal Justice organisations	<input type="checkbox"/>
<b>Ministry of Health/Healthcare services</b>	<input checked="" type="checkbox"/>
<b>Voluntary sector providers</b>	<input checked="" type="checkbox"/>
Other (please specify)	<input type="checkbox"/>

7. At what stage(s) of the criminal justice system are people screened for mental illness? (Please tick all that apply)

Arrest (Police)	<input type="checkbox"/>
<b>Court</b>	<input checked="" type="checkbox"/>
<b>Prison</b>	<input checked="" type="checkbox"/>
Probation	<input type="checkbox"/>

8. Please provide details of which screening tools/questions are commonly used to detect mental illness amongst people on probation.

**No specific tools other than mental health section in the LSI-R.**

9. Who usually screens for mental illness amongst people on probation?

Criminal justice staff	<input type="checkbox"/>
Nurse	<input type="checkbox"/>
<b>General practitioner</b>	<input checked="" type="checkbox"/>
Psychiatrist	<input type="checkbox"/>
Psychologist	<input type="checkbox"/>
Social worker	<input type="checkbox"/>

Other (please specify) ☐

10. Please describe the route(s) by which people on probation usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**Via the GP.**

11. If probation is involved in the provision of mental health care to offenders, which of the following best characterise its role?

- Providing interventions/treatment itself ☐  
Inviting external services to work on its premises ☐  
**Referring people to external services working elsewhere** ☒  
Mixture of the above ☐

12. Does the probation service have any order requirements/programmes specifically for offenders with mental illness? **No** ☒

If yes, please provide details of these here

13. Are the number of deaths by suicide by people on probation collected nationally?

**Yes Recorded under critical incidents records.**

If 'yes' can you attach a document that shows trends in probation suicides over the past ten years or so?

**Not available**

**ITALY**

1. Which country/jurisdiction do you work in/represent?

**Italy**

2. What is your job title?

**Social Worker**

Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

**Act No. 180 of 1978 (the so-called Basaglia law, from the name of the psychiatrist behind this reform) granted dignity and rights to those suffering from serious psychiatric disorders; it abolished mental asylums, a total institution in which inpatients felt their identity had been erased, and identified the territory as the most appropriate place of intervention for the protection of mental health.**

**However, the Judicial Psychiatric Hospitals, so called since 1975 (i.e.: OPGs in Italian), which used to house offenders suffering from psychiatric problems, remained in operation. These facilities depended on the Penitentiary Administration Department and therefore suffered from the prevalence of custodial needs over treatment needs.**

**The Italian Parliament decided to close the OPGs by Act No. 81/2014 that entered into force on 31 March 2015. This epoch-making reform replaced the OPGs with the Residential facilities for the Execution of Security Measures (REMS in Italian), managed by the Regions, to ensure assistance and care inspired by the principles of deinstitutionalisation and social inclusion.**

**Therefore, the criminal offenders who are acquitted on grounds of insanity are, since then, subject to either non-custodial (probation) security measures or custodial (REMS) security measures, in accordance with Act No. 81/2014.**

However, until 2019, no such protection existed for those who had not been identified at the trial stage (i.e. acquitted on grounds of insanity) or for those who had witnessed the onset of the illness during the execution of the sentence and, therefore, were not subject of a security measure.

The Constitutional Court's judgment no. 99 of 2019 has intervened, in accordance with Article 3 of the Constitution, to ensure the care of detainees with psychiatric problems by cancelling such an unequal treatment between those who suffer from a serious physical infirmity and those who have a psychiatric pathology, thus allowing the enforcement of alternative measures even in cases of serious mental illness that emerged eventually.

At present, therefore, judges can enforce a set of rules which ensure equal treatment to all persons with mental problems who enter the penal circuit, whether they were identified beforehand and were therefore regularly recipients of security measures or they were already detained and their pathologies emerged subsequently. If a serious psychiatric illness manifests itself during imprisonment, the judge may order that the offender be treated outside the prison. The alternative measure of home detention may be granted, as is already the case for serious physical illness, even when the remaining sentence is more than four years. In addition, the measure of Probation may be granted under the supervision of the local Social Service in order for the offender to continue or undertake a therapeutic and psychiatric assistance programme. This measure shall be monitored by the Probation Services of the Ministry of Justice in close cooperation with the Region's Mental Health Department.

## Section 2: The Organisation of Probation and Mental Health Care Provision

### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

#### **Offenders in Charge of Probation Services as to 31 December 2020 Alternative Measures to Detention**

<b>Probation</b>	<b>16.698</b>	
<b>Home Detention</b>	<b>11.704</b>	
<b>Semi-liberty</b>	<b>748</b>	
<b>Total</b>		<b>29.150</b>

#### **Substitutive Sanctions**

<b>Semi-detention</b>	<b>4</b>	
<b>Conditional Release</b>	<b>110</b>	
<b>Total</b>		<b>114</b>

#### **Security Measures**

<b>On Parole</b>	<b>4311</b>	
<b>Total</b>		<b>4.311</b>

#### **Community Placements**

<b>Community Service (Drug Legislation)</b>	<b>691</b>	
<b>Community Service (Traffic Legislation)</b>	<b>8055</b>	
<b>Total</b>		<b>8.746</b>

#### **Community Placements**

<b>Supervision of the Social Service</b>	<b>18.518</b>	
<b>Total</b>		<b>18.518</b>
<b>Total persons</b>		<b>60.839</b>

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? **No** ☒
3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or **tick here** ☒ **if unknown**)
4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**Unknown.**

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐  
**Ministry of Health/Healthcare services** ☒  
Voluntary sector providers ☐  
Other (please specify)

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☐  
**Court** ☒  
**Prison** ☒  
**Probation** ☒

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision: **Interviews and Diagnostic Tests.**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff ☐  
Other criminal justice staff ☐  
Nurse ☐  
General practitioner ☐  
**Psychiatrist** ☒  
Psychologist ☐  
Social worker ☐  
Other (please specify)

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**People in alternative measures are entitled to apply to the Mental Health Department either on their own initiative and encouraged by their family members or can be referred by the competent social worker of the relevant Probation Service, who shall act upon consulting with the Mental Health Department and with the consent of the person concerned.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves ☐  
Inviting external services to work on their premises ☐  
**Referring people to external services working elsewhere** ☒  
Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **No** ☒

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No** ☒

14. Is there specific work with family members of the persons who experience mental disorders and disabilities?

**Yes, the Mental Health Department cooperates with the patient's family.**

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities?

Yes, treatment approaches try to take gender differences into account. Risk and protective factors can be investigated as well as care and treatment provided only if efforts are made to understand any social, environmental and relational conditions within which greater distress occurs, including from a gender perspective.

Regards,

Italy's Juvenile & Community Justice Department (DGMC) of the Ministry of Justice.

## LATVIA

1. Which country do you work in/represent for the CEP?

Latvia

2. What is your job title?

Senior Expert of State Probation Service of Latvia, Re-socialisation Department, Programme Unit, Kristiana Lapina (member of CEP Mental Health expert group)

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

No data has been gathered on the mental health of people on probation as of now but there are plans to do this in the future.

### Section 2: The Organisation of Probation and Mental Health Care Provision

#### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

According to data for 2019 - 17787 persons per year all functions (Data for 2020 are not yet ready for publication). As of February 10, 2021, there were 3,291 clients under supervision.

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training?  
Yes ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

The courses are prepared and delivered by specialists, giving an overview of the mental illnesses the probation officers might come across in their clients. Initially, the training content was prepared and tested by external service providers. Initially, the training content was prepared and tested by external service providers. Sākumā apmācības saturu sagatavoja un pārbaudīja ārējie pakalpojumu sniedzēji. Initially, the study content was prepared and tested in the outsourced providers.

Sākotnēji mācību saturs tika sagatavots un pārbaudīts ārpakalpojumu sniedzējos.

Nevarēja ielādēt visus rezultātus

Mēģināt vēlreiz

Notiek atkārtots mēģinājums...

Notiek atkārtots mēģinājums...

The further learning process is continued and provided by the probation service. The theoretical part of the study includes the main topics related to the characteristics of mental disorders and work with them in the context of the probation service. In general, the training is focused on the recognition of mental disorders.

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or tick here ☒ if unknown)

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**Such data are not yet available to the State Probation Service.**

a. What data/ information do you base this estimate on?

b. Has specific research been carried out on this? If the answer is yes, please provide details

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

**Probation service collects information on its clients by completing a risk assessment form, where information on any known illnesses, including mental illnesses can be mentioned, but information on the prevalence of mental illness amongst people on probation has not been, as of now, routinely collected. Some clients arrive at the Probation Service with an already pre-diagnosed mental condition, whilst others are unaware they have a mental condition.**

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐

Ministry of Health/Healthcare services ☐

Voluntary sector providers ☐

**Other (please specify)**

☒ **Probation officer may prescribe a mandatory psychiatric evaluation for the client to attend at a specialist. The Ministry of Health is responsible for providing mental health care for people on probation.**

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

**Arrest (Police)** ☒

**Court** ☒

**Prison** ☒

**Probation** ☒

**People may be screened for mental illness at any stage of the criminal justice system.**

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

**As described in 5.**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff ☐

Other criminal justice staff ☐

Nurse ☐

General practitioner ☐

**Psychiatrist** ☒

**Psychologist** ☒



Social worker ☐  
Other (please specify)

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

Normally, if the probation officer suspects the client needs an evaluation of either a psychiatrist, psychologist, or psychotherapist, then he recommends the client to visit the respective specialist. A psychiatric evaluation is ordered to be made in cases where it needs to be determined if the client is able to partake in probationary programs. If the client needs to be put in a ward, this can only be decided by a psychiatrist.

Additional information: General conditions for placement in a ward applies to anyone, who is diagnosed with a psychiatric disorder. The person receives treatment voluntarily. Cases, where psychiatric treatment may be administered without the patient's consent is outlined in the Medical Act, paragraph 68. Based on this act, the courts may decide treatment is necessary without the patient's agreement in the following cases:

1) patient has been or is threatening to inflict bodily harm either to themselves or another person, or has been threatening and acting coercively towards other persons and the medical specialist discovers that the patient has mental illness that poses high risk for inflicting bodily harm to self or others;

2) patient has been or is demonstrating inability or neglect to take care of themselves or dependant persons and the medical specialist discovers that the patient has mental illness that poses high risk for serious and unavoidable deterioration in health of the patient;

3) Psychiatric Assistance Service Ward also includes Forensic Psychology Unit and involuntary treatment centre with security - we have one like this in Latvia and people are placed in it by court decision. This is also an area for the court to determine, and not of the Probation Service.

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves ☒  
Inviting external services to work on their premises ☐  
Referring people to external services working elsewhere ☒  
Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? No ☒

People diagnosed with mental illnesses or psychiatric disorders receive individual treatment, looking for the best solution to apply for each particular person.

If yes, please provide details of these here

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? No ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities? No ☒

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities? No ☒

## LITHUANIA

1. Which country/jurisdiction do you work in/represent?

**Lithuanian Probation Service**

2. What is your job title?

**Chief Specialist**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

**Law on Mental Health Care; Lithuanian Health Strategy for 2014-2025; The Mental Health Strategy.**

### Section 2: The Organisation of Probation and Mental Health Care Provision

#### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021? **15417.**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? **No** ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or **tick here** ☒ **if unknown**)

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**No data collected about these issues.**

a. What data/ information do you base this estimate on?

b. Has specific research been carried out on this? If the answer is yes, please provide details

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies

☐

**Ministry of Health/Healthcare services**

☒

Voluntary sector providers

☐

Other (please specify)

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

**Arrest (Police)**

☒

**Court**

☒

**Prison**

☒

Probation

☐

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

**In case probation officers have any suspicion on mental disorders or disabilities amongst persons under probation supervision, they recommend to their clients to apply into appropriate public health care institutions.**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff	<input type="checkbox"/>
Other criminal justice staff	<input type="checkbox"/>
Nurse	<input type="checkbox"/>
General practitioner	<input type="checkbox"/>
Psychiatrist	<input type="checkbox"/>
<b>Psychologist</b>	<input checked="" type="checkbox"/>
Social worker	<input type="checkbox"/>
Other (please specify)	

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**Persons under probation supervision, as well as other persons, who have compulsory health insurance, has full access to any mental health care services free of charge. If they need it, they should personally contact appropriate health care institution.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves	<input type="checkbox"/>
Inviting external services to work on their premises	<input type="checkbox"/>
<b>Referring people to external services working elsewhere</b>	<input checked="" type="checkbox"/>
Mixture of the above	<input type="checkbox"/>

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **No** ☒

If yes, please provide details of these here

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities? **No** ☒

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities? **No** ☒

## LUXEMBOURG

1. Which country/jurisdiction do you work in/represent?

**Grand Duchy of Luxembourg**

2. What is your job title?

**Probation Officer - Probation Service Co-ordinator**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

### Section 2: The Organisation of Probation and Mental Health Care Provision

#### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021? **1 218**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? **No** ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or tick here ☒ **if unknown**)

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability? **No statistics available**

a. What data/ information do you base this estimate on?

b. Has specific research been carried out on this? If the answer is yes, please provide details

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐

**Ministry of Health/Healthcare services** ☒

**Voluntary sector providers** ☒

Other (please specify)

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☐

**Court** ☒

**Prison** ☒

Probation ☐

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff ☐  
Other criminal justice staff ☐  
Nurse ☐  
**General practitioner** ☒  
**Psychiatrist** ☒  
Psychologist ☐  
Social worker ☐  
Other (please specify) ☐

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves ☐  
Inviting external services to work on their premises ☐  
**Referring people to external services working elsewhere** ☒  
Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **No** ☒

If yes, please provide details of these here

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities? **No** ☒

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities?

## MALTA

1. Which country do you work in/represent for the CEP?

**Malta**

2. What is your job title?

**Senior Psychologist**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to the mental health of people on probation (send as attachments with the completed survey)

**We don't have any specific guidelines related to probation, however, recently a 10-year national mental health strategy was launched (encompassing 2020 to 2030).**

**Link:**

**[https://deputyprimeminister.gov.mt/en/Documents/National-Health-Strategies/Mental\\_Health\\_Strategy\\_EN.pdf](https://deputyprimeminister.gov.mt/en/Documents/National-Health-Strategies/Mental_Health_Strategy_EN.pdf)**

2. How would you describe the main aims of the probation service in your country? According to the Departmental webpage, the Vision Statement states that:

**"The Department of Probation and Parole aims at enhancing community safety by reducing recidivism**

through the implementation of Restorative Justice measures and the use of Community-Based Sanctions”.

Whereas, the Mission Statement states that the department aims:

To help ensure social stability by contributing to minimise the frequency of crime for more public protection and by ensuring the re-integration of offenders.

To ensure that the services offered address the needs of the Criminal Justice System in line with principles of Restorative Justice”.

## Section 2: The Organisation of Probation and Mental Health Care Provision

### The Organisation of Probation

1. How many people are supervised by the probation service in your country?

**On average, the department supervises around 1000 offenders per year.**

2. Do probation staff in your country routinely receive mental health awareness training? **Yes** ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

**Staff activities and training seminars are organised on a yearly basis. This is usually carried out “in-house” or at-times, other professionals are brought in. Topics covered usually centre on stress management, coping skills, avoiding burnout. Staff events, which are usually held on an annual basis, are aimed at increasing staff well-being.**

3. What is the total budget for the provision of mental health care for people on probation in your country? (Please provide details, or tick here ☐ if unknown)

**There isn't a specific allocated budget for the provision of mental health care for probationers.**

4. Approximately what percentage of people on probation in your country do you estimate have a current mental illness?

**I would estimate, that to some degree, most probationers will present with mental health issues, varying from anxiety (even in relation to having to undergo Court proceedings), depression to having a dysfunctional personality.**

a. What information do you base this estimate on?

**Referrals received by the Psychology Unit within the Department, almost always reference the need for psychological intervention due to some form of mental health issue.**

5. Is information on the prevalence of mental illness amongst people on probation routinely collected in your country? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for people on probation in your country?

Ministry of Justice/Criminal Justice organisations ☐  
Ministry of Health/Healthcare services ☐  
Voluntary sector providers ☐  
Other (please specify)

**Primarily, the Psychology Unit within the department itself, however, probationers may also be in contact with the mental health services provided by the state, non-governmental organisations and the private sector.**

7. At what stage(s) of the criminal justice system are people screened for mental illness? (Please tick all that apply)

Arrest (Police) ☐  
**Court** ☒  
**Prison** ☒  
**Probation** ☒

8. Please provide details of which screening tools/questions are commonly used to detect mental illness amongst people on probation

**Assessments are usually carried using personality assessments (such as MCMI, PAI) in combination with a clinical interview. At times, specific tools are used, such as GAD, in conjunction with "forensic" tools such as ADS, STAXI or STATIC. Case formulation is used to develop an idiosyncratic intervention plan.**

9. Who usually screens for mental illness amongst people on probation?

Criminal justice staff ☐  
Nurse ☐  
General practitioner ☐  
Psychiatrist ☐  
**Psychologist** ☒  
Social worker ☐  
Other (please specify) ☐

10. Please describe the route(s) by which people on probation usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**Generally, probation officers supervising the offender would refer cases to the Psychology Unit within the department. Some of these referrals would include Court/Parole Board-mandated treatment although some of these would also be self-referrals.**

11. If probation is involved in the provision of mental health care to offenders, which of the following best characterise its role?

**Providing interventions/treatment itself** ☒  
Inviting external services to work on its premises ☐  
**Referring people to external services working elsewhere** ☒  
Mixture of the above ☐

12. Does the probation service have any order requirements/programmes specifically for offenders with mental illness? **No** ☒

If yes, please provide details of these here

13. Are the number of deaths by suicide by people on probation collected nationally? **No** ☒

If 'yes' can you attach a document that shows trends in probation suicides over the past ten years or so?

## MONTENEGRO

1. Which country/jurisdiction do you work in/represent?

**Montenegro / Probation service within the Ministry of Justice, Human and Minority Rights**

2. What is your job title?

**Probation Officer**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

**There is no any recent national document (in the form of a policy, procedure, guide or report) relating to the treatment of persons with mental disorders or disabilities who are under probation service supervision.**

### Section 2: The Organisation of Probation and Mental Health Care Provision

#### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021? **129 persons.**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? **No** ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or **tick here** ☒ **if unknown**)

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**It is difficult to us to give an approximate estimate of the percentage of persons under probation supervision who have some form of mental disorder or disability, since there are no official statistics on this.**

a. What data/ information do you base this estimate on?

**N/A**

b. Has specific research been carried out on this? If the answer is yes, please provide details **No** ☒

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies

☐

**Ministry of Health/Healthcare services**

☒

Voluntary sector providers

☐

Other (please specify)



7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☐  
**Court** ☒  
Prison ☐  
Probation ☐

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

**A general risk assessment tool is used, within which there is a determination of a criminogenic factor related to mental health. In addition to the tools, a court verdict, available medical reports and a convict's statement are used to detect mental disorders or disabilities amongst persons under probation supervision.**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

**Probation staff** ☒  
Other criminal justice staff ☐  
Nurse ☐  
General practitioner ☐  
**Psychiatrist** ☒  
Psychologist ☐  
Social worker ☐  
Other (please specify) ☐

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**Only in the case that the court has imposed on the convicted person the measure of obligatory treatment of his mental problem, that person will be subjected to treatment in the supervision procedure. The court will impose one such measure on a convicted person only if during the court proceedings it determines that the criminal offense was committed due to a mental health problem, or that such a condition may affect that person to commit criminal offenses in the future.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves ☐  
Inviting external services to work on their premises ☐  
**Referring people to external services working elsewhere** ☒  
Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **No** ☒

If yes, please provide details of these here

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities?

**Involving a family members, as a support, in working with a person who has a mental disorders or disabilities is desirable, but not mandatory. This contact with a family members is mainly based on providing feedback on the person's progress in the treatment process.**

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities?

**No, there is not gender approach.**

## PORTUGAL

1. Which country/jurisdiction do you work in/represent?

**Portugal**

2. What is your job title?

**Head of the Community Measures Division - Directorate-General for Probation and Prison Services (DGRSP)**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

- **Report “Case Management: Need analysis and guideline proposals” (Directorate-General for Probation and Prison Services, November 2016): 42% of community measures include the court order of mental health treatment, including treatment for addictions; such order is the most frequent among probation measures (between 52 and 58%); for parole, mental health treatment is present in 12% of the measures, most frequently related to the treatment of addictions; mental health treatment is most frequently imposed in domestic violence crimes (50%), theft (58%), road offences (41%), drug related crimes (37%) and sex crimes (33%). It is also a very common order in arson crimes (48,2%).**
- **Report “Probation intervention in security measures for non-criminally responsible offenders” (Directorate-General for Probation and Prison Services, October 2018): all offenders are subject to mental health treatment (required by law); most common disorders are intellectual disability (37,8%), psychosis/schizophrenia (32,4%), personality/impulse control disorder (13,5%) and bipolar disease (10,8%).**
- **Report “Probation and community mental health services” (Directorate-General for Probation and Prison Services, November 2019): The majority of the community mental health services that collaborate with probation teams are NGO (32%), followed by hospitals (29,5%), institutions for the treatment of addictions (23,0%) and primary healthcare units (13,0%).**
- **Recommendations for referral and collaboration between probation and community mental health services (under development): joint recommendations are being prepared between the Directorate-General for Probation and Prison Services (Ministry of Justice) and the National Mental Health Program (Ministry of Health) to define procedures for the referral of probationers and parolees with mental health treatment orders and/or mental health problems. Such procedures stem from the need to overcome difficulties that have been identified when requesting mental health interventions, as well as communication problems between institutions.**

### Section 2: The Organisation of Probation and Mental Health Care Provision

#### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021? **26.991 (data collected on 31-03-2021).**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? **No ☒**

a. If ‘yes’ please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or tick here ☒ **if unknown**)

**Probationers and parolees use the public mental health services that are available to all citizens.**

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

1) About 40-50%, if we include addictions.

These are very rough estimates of the percentage of people under supervision with mental health problems, as no standard data exist.

2) Security measures for non-criminally responsible offenders due to mental health disorders represent about 1% of the community measures and this is the only objective data we have available.

a. What data/ information do you base this estimate on?

1) Internal reports and the number of measures that include the judicial obligation of mental health treatment, including addictions.

2) Internal statistics.

b. Has specific research been carried out on this? If the answer is yes, please provide details.

Internal reports on related matters have allowed some estimates, but no specific research has been carried out.

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐

**Ministry of Health/Healthcare services** ☒

Voluntary sector providers ☐

Other (please specify) **NGO**

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☐

**Court** ☒

**Prison** ☒

**Probation** ☒

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision.

**Mental health assessments are only performed if there is a court request for expert psychological assessment. The expert has autonomy to choose which tools to use in each case. Common tools include personality inventories, such as MMPI-2, NEO-PI-R, MACI and the PCL-R. For psychopathology, screening tools like the Mini-Mental and SCID are used.**

**Mental health assessments also occur when probationers have a court order regarding mental health treatment or there is suspicion of a mental health disorder. In both cases they will be screen and assessed by mental health services in the community.**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

**Probation staff** ☒

Other criminal justice staff ☐

Nurse ☐

General practitioner ☐

Psychiatrist ☒  
 Psychologist ☒  
 Social worker ☐  
 Other (please specify)

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**Persons under probation will be referred to mental health care if there is a court order, which can happen in probation and parole measures and is mandatory for security measures applied to non-criminally responsible offenders. If there is no court order regarding mental health, but there is a request by to court to elaborate an individual rehabilitation plan, mental health treatment can be proposed by the probation officer, when suspicion exists that there may be a mental health problem. Mental health care can also be proposed to court by the probation officer as substitute of other orders that cannot be accomplished due to evident mental health problems of the offender. Independently of the existence of a court order, during supervision the probationer or the parolee can be advised by the probation officer to seek voluntary mental health care in the community.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves ☐  
 Inviting external services to work on their premises ☐  
**Referring people to external services working elsewhere** ☒  
 Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision?

If yes, please provide details of these here

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities? **No** ☒

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities? **No** ☒

1. Which country/jurisdiction do you work in/represent?:

**Romanian Probation System**

2. What is your job title?

**Probation Inspector**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey):

#### **1) The Romanian probation system**

The approach of mental health issues is still being a challenge for the Romanian probation system due to the difficulties faced in working with mental disorders and to the lack of specialization regarding training the probation counsellors in addressing such issues. First, it is important to mention that the probation supervision in Romania is focused both on control and assistance/support for the supervised person in order to address the social and criminogenic needs and to diminish the reoffending risk. The two central elements of the probation work are the main directions of the supervision process, and also, are applicable in working with mental health probationers. The balance between control and support is very sensitive in working with mental health disorders, having in mind that most of these aspects are not medically diagnosed (certified by documents) and the probation counsellor has only a few clues about it, observing the changes regarding behaviour of the persons (violent and aggressive actions, impulsivity, abuse of drugs/alcohol, refuse of cooperation, excitement and others). In working with mental health disorders it is important for the probation counsellor to identify the signs and symptoms which could lead to medical diagnosis regarding a mental health disorder. In this respect, some guidelines are offered by the Probation Counsellor Manual, which contains a distinct chapter dedicated to approaches of the mental health disorders in probation and specific aspects in working with mental illness.

The main activities of the Romanian probation services are related to the following stages of the criminal trial:

- before the trial, during the prosecution - the pre-trial reports for juveniles in order to assess the reoffending risk and the risk factors;
- during the trial, before the sentencing - the pre-sentential reports for minors and adults, at the request of the court (similar like before, the assessment of the risk) ;
- post-trial - stage- the execution of the community sentences and post release phase (the supervision of educative noncustodial measures imposed for minors, the supervision in case of the postponement of the sentence, the suspended sentence under probation supervision, the conditionally release from prison).

#### **2) The principles of the Romanian probation system**

It is relevant to emphasize the most important principles of probation work in Romania in order to show a clear overview of the probation system. Thus, according to the legal provisions and to the probation working standards, the most relevant principle is the case management, meaning the coordination of the following stages: the assessment of the supervised person, planning the intervention, guiding and monitoring the control measures and the assistance process and effectively implementing the sentence or only coordinating the community institutions involved within this stage. This principle is relevant in addressing mental health probationers in order to conduct the assessment, to plan and monitor the intervention within the community by the probation case manager and to cooperate with medical care units in order to offer an adequate framework for a specialized intervention.

As well, we can highlight the proportionality of the intervention during supervision, according to the level of risk and to the criminogenic needs in order to guide the intensity of the control measures and the intervention. The signs of mental illness are explored during the supervision meetings with the case manager and are addressed accordingly, within the probation service or within the community institutions, in special in medical care units, through specialists.

Last, but not least, in case of mental health disorders identified within the probation population, the proper approach envisages a multidisciplinary intervention, based on the case referral within the community in the first stage for a focused and adequate/appropriate support, which involves social care, psychotherapy, psychological counselling and sometimes, medical treatment, recommended by a psychiatrist.

### 3) Assessing the defendants with mental health problems

The reports for defendants are an important tool used by the courts in order to impose the penal sanction having in view the individual and the offence. Actually the conclusions of the pre-trial reports as a result of the assessment process are used by the court to guide and justify the sentence, in most cases. Thus, the assessment process conducted in order to prepare the pre-trial/pre-sentential report for juveniles or adults includes the following aspects and items: a complete analysis of the criminal behaviour, criminal record, information concerning the social and familial environment, with an accent on the support, resources, values and principles, the educational and school instruction level, the working status and working experience, skills, motivation to change the problematic behaviour, the physic and psychological health and addictions, and as well, other information regarding the general behaviour of the defendant within the community. Based on the above mentioned dates, the probation counsellor is able to evaluate the reoffending risk, the factors that could increase and decrease the level of the risk, and to propose to the court an adequate measure or sanction, including some specific obligations according to the social and criminogenic needs of the assessed person. As we mentioned above, the pre-trial assessment is focused on the evaluation of the general health of the person and medical/psychological issues, and in this respect, the probation counsellor can cooperate with specialists (psychologists and psychiatrists) in order to address properly mental health issues and to obtain useful information for the report. In such cases, the conclusions of the assessment report are related to the identified mental health problems and could include the recommendation to follow medical and psychological treatment within the noncustodial or custodial sanction imposed by the court. As well, it is important to early detect the signs of the mental illness for an adequate plan that could help take measures and guide the intervention.

### 4) Working with persons under probation supervision

If we have in view how we specifically address the mental health issues, it is relevant to highlight a few aspects regarding the supervision process as it is developed and implemented within the Romanian probation system. Starting with the first probation meeting between the probation counsellor case manager and the supervised person, focused on building the professional relationship, gaining trust, showing respect and offering all the necessary information related to the sanction and the supervision process, the next stages envisages the risk and needs evaluation, planning the sentence and the whole process and developing the proper intervention (or only monitoring the intervention when it is conducted by another specialist) and at the end, assessing the finalization of the supervision. As it is mentioned before, the social assessment of the criminogenic needs in order to estimate the level of the reoffending risk could guide the following steps: the supervision plan and the intervention. The signs of mental health illness are explored and approached within the first probation meetings and at the end of the initially assessment, the case manager would be able to decide the referral of the case to another community institution for medical care, psychological therapy or counselling or medical treatment. If the probation counsellor has some doubts about the signs of mental illness, he can collaborate with specialists in order to clarify and obtain an accurate overview of the case. Usually, in such cases it is difficult to obtain the consent of the probationer (because sometimes he denies or he doesn't recognize the problem) in order to follow a treatment program, if the court hasn't imposed a specific obligation for the convicted person.

According to the Romanian criminal code provisions, such obligation could be to comply with the requirement of treatment and healthcare measures - for drug and alcohol addiction and for other medical conditions. This specific obligation it could be established by the court when decides a community sanction for the defendant, and as well it could be disposed during the supervision at the request of the probation counsellor case manager. In this respect, an important and useful tool of the probation case manager is the possibility of changing the content of obligations imposed by court



according to the criminogenic needs and the level of reoffending risk. Thus, during the supervision period, the case manager could ask the court to impose the obligation to comply with medical care measures, if the case. The revocation of the sentence is possible in case of breaches related to the obligation; in such cases the person could serve the sentence in prison.

Another obligation that could be imposed to the supervised person is to follow a social reintegration program, meaning, according to the probation working standards, the following:

- intervention programs, focused on cognitive-behavioural therapy;
- intervention programs, such as those focused on the Goldstein method, the Moreno method;
- psychotherapy;
- psychiatric treatment;
- occupational therapy;
- educational, prevention and short-term intervention program;
- informative programs, including legal issues;
- psychological counselling;
- vocational counselling;
- support- counselling;
- relationships counselling;
- motivational counselling;
- any other type of assistance and counselling activities, which aims to adequately cover the identified criminogenic needs.

The access to mental health care providers is problematic. Making sure that individuals have access to mental healthcare could improve their lives and could raise the safety within the communities and also could facilitate the reintegration process during the probation supervision. For many, it could dramatically reduce or eliminate the risk of suicide, clarify legal issues, solve family conflicts, employment issues, address substance abuse and further mental and physical health problems. Even the probation system deals with many issues in order to support the reintegration of these persons in the community, it is important to understand the access the mental healthcare services, in order to ensure this access during the supervision term; as well inter-institutional collaboration is very important, and the case management is playing a central role in this respect.

Trainings for probation staff in order to identify the mental health issues during the risk and needs assessment process and to manage mental health probationers is also a key for improving the social intervention during the supervision period.

The increased number of supervised persons with mental illnesses represents a big challenge for the probation counsellors and also for the entire society. The support relationship between probation counsellor and probationers with mental illnesses has a significant importance in this area, despite the fact that we don't have interventions designed specifically for this type of problems and also we don't have training initiatives designed to prepare probation staff about mental health issues. The lack of specific programs and interventions to address mental health probationers is one of the Romanian probation system needs and in this respect it should be developed and implemented measures and actions.

In Romanian probation system, the mental health education by developing special social programs is a reality and the need of specific approaches in order to decrease stigmatization and to increase the knowledge of mental illnesses among probation staff it is known and accepted as a direction to follow.

## Section 2: The Organisation of Probation and Mental Health Care Provision

### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

**On 31.01.2021 we have at the level of the probation system a number of 68.790 active cases.**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? **No** ☒

- a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

Although we cannot talk about courses dedicated to this topic, the initial training of probation counselors also includes this aspect, including in the probation manual there is a section dedicated to this topic. So the importance of this topic is known, but still insufficiently developed.

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or tick here ☐ if unknown)

Due to the nature of the intervention performed in the probation system in the mental health problem, we cannot speak of a budget dedicated to this problem. However, a budget that indirectly supports this area is needed, by providing the necessary funds for the development of vocational training programs in this regard.

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

It is difficult to estimate a number of people with such problems, in the absence of an evaluation tool dedicated to this aspect and without specific training of counselors in this regard.

- a. What data/ information do you base this estimate on?

- b. Has specific research been carried out on this? If the answer is yes, please provide details **No** ☒

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

- a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐

**Ministry of Health/Healthcare services** ☒

Voluntary sector providers ☐

Other (please specify)

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

**Arrest (Police)** ☒

**Court** ☒

**Prison** ☒

**Probation** ☒

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision:

The pre-trial assessment is focused on the evaluation of the general health of the person and medical/psychological issues, and in this respect, the probation counsellor can cooperate with specialists (psychologists and psychiatrists) in order to address properly mental health issues and to obtain useful information for the report. In such cases, the conclusions of the assessment report are related to the identified mental health problems and could include the recommendation to follow medical and psychological treatment within the noncustodial or custodial sanction imposed by the court. As well, it is important to early detect the signs of the mental illness for an adequate plan that could help take measures and guide the intervention. There are no specific assessment tools used by the probation counsellors in order to detect the signs of mental illness. If we have in view how we specifically address the mental health issues, it is relevant to highlight a few aspects regarding the supervision process as it is developed and implemented within the Romanian probation system. As it is mentioned before, the social assessment of the criminogenic needs in order to estimate the level of the reoffending risk could guide the following steps: the supervision plan and the intervention.



The signs of mental health illness are explored and approached within the first probation meetings and at the end of the initially assessment, the case manager would be able to decide the referral of the case to another community institution for medical care, psychological therapy or counselling or medical treatment. If the probation counsellor has some doubts about the signs of mental illness, he can collaborate with specialists in order to clarify and obtain an accurate overview of the case. Usually, in such cases it is difficult to obtain the consent of the probationer (because sometimes he denies or he doesn't recognize the problem) in order to follow a treatment program, if the court hasn't imposed a specific obligation for the convicted person.

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

- |                              |                                     |
|------------------------------|-------------------------------------|
| Probation staff              | <input type="checkbox"/>            |
| Other criminal justice staff | <input type="checkbox"/>            |
| Nurse                        | <input type="checkbox"/>            |
| General practitioner         | <input checked="" type="checkbox"/> |
| Psychiatrist                 | <input checked="" type="checkbox"/> |
| Psychologist                 | <input checked="" type="checkbox"/> |
| Social worker                | <input type="checkbox"/>            |
| Other (please specify)       |                                     |

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply):

Access to specialized medical services is achieved even independently of the probation intervention, often people who have mental disorders and who reach the record of probation services being in the record of a specialist in this respect.

If we have in view how we specifically address the mental health issues, it is relevant to highlight a few aspects regarding the supervision process as it is developed and implemented within the Romanian probation system.

According to the Romanian criminal code provisions, such obligation could be to comply with the requirement of treatment and healthcare measures - for drug and alcohol addiction and for other medical conditions. This specific obligation it could be established by the court when decides a community sanction for the defendant, and as well it could be disposed during the supervision at the request of the probation counsellor case manage. In this respect, an important and useful tool of the probation case manager is the possibility of changing the content of obligations imposed by court according to the criminogenic needs and the level of reoffending risk. Thus, during the supervision period, the case manager could ask the court to impose the obligation to comply with medical care measures, if the case. The revocation of the sentence is possible in case of breaches related to the obligation; in such cases the person could serve the sentence in prison.

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

- |   |                                     |
|---|-------------------------------------|
| Providing interventions/treatment themselves            | <input type="checkbox"/>            |
| Inviting external services to work on their premises    | <input checked="" type="checkbox"/> |
| Referring people to external services working elsewhere | <input checked="" type="checkbox"/> |
| Mixture of the above                                    | <input type="checkbox"/>            |

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision?

No. But, counselors may be trained to recognize signs (at initial assessment, during monitoring) and to guide them to the appropriate services / institutions. Another main responsibility is to make proposals to introduce the obligation to treatment.

If yes, please provide details of these here

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? No ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities?

The probation counsellor has the possibility to involve the family, to cooperate with relatives and members of family if it is necessary.

The intervention carried out during the supervision period in the case of people with mental health problems is similar to the intervention carried out in general cases, with a greater emphasis on exploring the person's internal and external resources.

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities?

In this regard, we can mention the orientation of probation counselors' interventions in the way of adopting qualitative practices, respecting dignity and avoiding discrimination of any kind, as well as individualizing each intervention in order to achieve the ultimate goal of social reintegration of supervised persons. Social reintegration cannot be achieved in the absence of their integration in the community to which they belong, by providing access to social services, adapted jobs and the like, desideratum for which the actions realized in the planning of the interventions are thought. Thus, we don't provide a gender approach concerning this issue.

## RUSSIAN FEDERATION

### *Attachment to the letter to the Department of New Challenges and Threats of the Ministry of Foreign Affairs of the Russian Federation on the PC-CP Questionnaire*

The Federal Penitentiary Service of the Russian Federation works on creation and establishment of the Probation Service in the Russian Federation.

In accordance with the legislation, some probation functions are carried out by the criminal executive inspections, namely, criminal penalties and measures of a criminal nature against persons, convicted persons without isolation from society, as well as monitoring the presence of suspects or accused persons at the place of execution of the preventive measure in the form of home arrest and compliance with court prohibitions by suspects or accused persons, in respect of which a prohibition of certain actions, house arrest or bail has been chosen in the form of a preventive measure.

One of the main tasks is the organization of activities assistance to convicts in social adaptation. Social adaptation is a set of measures aimed at assistance to persons in difficult situations in the realization of their constitutional rights and freedoms, as well as assistance in the labor and household structure, including psychological assistance, in social; service organizations in accordance with the Federal Law of 28.12.2013 No. 442-FZ "About bases of social service of citizens in the Russian Federation, "as well as regulatory legal acts of state authorities of the constituent entities of the Russian Federation.

The federal executive authority which is carrying out functions on development and realization of public policy and legal regulation in the sphere of social service is the Ministry of Labour and Social protection of the Russian Federation (Paragraph 1 of the Provision on the Ministry of Labour and Social Protection of the Russian Federation, approved by the Russian Federation Government decree of 19.06.2012 No. 610).

Persons in difficult situations, including those who consume narcotic drugs and psychotropic substances for non-medical purposes, social service organizations provide assistance in social rehabilitation, including psychological rehabilitation, in the manner determined by the state authorities of the constituent entities of the Russian Federation (article 26, part 3, of Act No. 182-FZ).

Procedure for monitoring the execution of the obligation to undergo treatment by convicted, recognized drug addicts from drug addiction and medical and (or) social rehabilitation approved by order of the Ministry of Justice of Russia and the Ministry of Health of Russia dated 03.02.2020 No. 7/59.

According to article 21, paragraph 1, of the Criminal Code of the Russian Federation, a person who was insane during the commission of a socially dangerous act, that is, could not realize the actual

nature and social danger of his actions (inaction) or direct them due to chronic mental disorder, temporary mental disorder, dementia or other painful state of the psyche, is not subject to criminal liability.

This rule is applied in systematic connection with the provisions of paragraph 7, part 1, article 73 of the Code of Criminal Procedure of the Russian Federation (hereinafter - the Code of Criminal Procedure of the Russian Federation), which stipulates that circumstances that may entail exemption from criminal liability and punishment and paragraph 3 Article 196 of the Code of Criminal Procedure provides that the appointment and conduct of a forensic examination is mandatory if it is necessary to establish the mental or physical condition of a suspect, accused, when there is a doubt about his sanity or ability to independently defend his rights and legitimate interests in criminal proceedings.

In accordance with article 12, paragraph 6.1, of the Penal Enforcement Code of the Russian Federation, convicted persons have the right to psychological assistance provided by psychologists of the criminal executive inspection. Convicts participate in psychological assistance activities only with their consent.

The activities of psychologists are organized in accordance with the requirements of the order of the Ministry of Justice of Russia dated 12.12.2005 No. 238

"On approval of instructions for the organization of the activities of the psychological service of the penal system," according to which the main tasks in the activities of psychologists of the criminal executive inspections, are: making a psychological diagnosis and making recommendations individualization of the process of execution of criminal punishment on the basis of studying the individual psychological characteristics of the convicted person; psychological correction of convicts' behaviour, psychological support for the professional activities of the officers of the criminal executive inspections, psychological support for newly recruited officers, professional and psychological training and staff counselling; study of socio-psychological climate in groups, psychoprophylaxis and psychological correction of destructive behaviour, emotional burnout and professional deformation of employees.

Psychologists of the criminal executive inspections work with all categories of convicts registered, but priority areas are measures with juvenile convicts, women who have been granted a stay of sentence, convicts who are at risk, including those convicted of crimes against the sexual integrity of minors.

In recent years, the following psycho-corrective programmes have been developed and sent for use in the practical activities of psychologists of the criminal executive inspections for the correction of convicts without isolation from society and the formation of their motivation to law-abiding behaviour:

"Anger Management" (applied since 2009);

"Reducing the aggressiveness of persons convicted of violent crimes to noncustodial sentences" (applied since 2007);

"Awareness of one's role in the family" (applied since 2011);

"Repeat Crime Prevention Program and offences among juvenile convicts registered in criminal executive inspections "(applied since 2019);

"Program of preventive work with parents that have children - juvenile offenders who have been punished, not related to isolation from society "(applied since 2020).

In addition to the recommended FSIN of Russia, other publicly available psychocorrection programs are used, including those independently developed by psychologists of the criminal executive inspections.

For example, an in-depth psychodiagnostic examination is carried out with juvenile convicts, followed by the compilation of a psychological characteristic reflecting not only the individual and personal characteristics of the convict, but also psychological recommendations for further work with the convict.

## SERBIA

1. Which country/jurisdiction do you work in/represent?

**Republic of Serbia Ministry of Justice - Administration for the Enforcement of Penal Sanctions**

2. What is your job title?

**Head of the Department for Treatment and Alternative sanctions**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

### Section 2: The Organisation of Probation and Mental Health Care Provision

#### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? **No** ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or **tick here** ☒ **if unknown**)

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability? **We don't have that information.**

a. What data/ information do you base this estimate on?

b. Has specific research been carried out on this? If the answer is yes, please provide details

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐

**Ministry of Health/Healthcare services** ☒

**Voluntary sector providers** ☒

Other (please specify)

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☐

**Court** ☒

Prison ☐

Probation ☐

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

- Probation staff ☐  
Other criminal justice staff ☐  
Nurse ☐  
General practitioner ☐  
**Psychiatrist** ☒  
Psychologist ☐  
Social worker ☐  
Other (please specify) ☐

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**Persons under the supervision use national health care system us other community members, the different is in the procedure how they get permission to go to the doctor, where for each doctor's examination they need to have permission by Director of the Administration for the Enforcement of Penal Sanctions.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

- Providing interventions/treatment themselves ☐  
Inviting external services to work on their premises ☐  
**Referring people to external services working elsewhere** ☒  
Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **No** ☒

If yes, please provide details of these here

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities?

**No, but if Probation Officer recognize a need for this kind of support, he referring family members to external services or NGO's.**

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities? **No** ☒

## SLOVAK REPUBLIC

1. Which country/jurisdiction do you work in/represent?

**Slovak Republic**

2. What is your job title?

**Ministry of Justice, Criminal Law Department - Probation, Mediation and Crime Prevention Unit,  
Director**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

**There is no special policy or guidance regarding the persons under probation service supervision who experience mental disorders or disabilities in Slovak Republic.**

### Section 2: The Organisation of Probation and Mental Health Care Provision

#### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021? **Approx. 12 500 - 13 000 (The number at 31 January 2020 was 12 933).**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? **No** ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or **tick here** ☒ **if unknown**)

**There is no special budget for the mental health care purposes/activities intended for the probationers or probation officers.**

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**Approx. 2 % officially certified. Number of cases with mental disorder/disability without the official statement - from 25 % up to 40 %**

a. What data/ information do you base this estimate on?

#### **Knowledge of the senior probation officers - the heads of respective regions.**

b. Has specific research been carried out on this? If the answer is yes, please provide details

**No research has been carried out.**

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies

☐

**Ministry of Health/Healthcare services**

☒

Voluntary sector providers

☐

**Other (please specify)**

**☒ There is no such a special task assigned. The Ministry of Health established a working group on mental health in the country in order to prepare solutions for particular groups of individuals in the country, including probationers.**

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

**Arrest (Police)**

☒

**Court**

☒

**Prison**

☒

Probation

☐

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

**There is no regulation for screening or similar activity. If the probation officer finds out there might be a mental health issue, he/she advise the probationer to meet a practitioner or specialist. The probation officer is not entitled to order such a meeting or treatment and the probationer is not obliged to undergo it.**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff

☐

Other criminal justice staff

☐

Nurse

☐

General practitioner

☐

Psychiatrist

☐

Psychologist

☐

Social worker

☐

**Other (please specify)**

**☒ There is no regulation for screening or similar activity. If the probation officer finds out there might be a mental health issue, he/she advise the probationer to meet a practitioner or specialist.**

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**The probation officer provides the probationer with contact information on concrete health care provider, he/she may mediate such an examination.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves

☐

Inviting external services to work on their premises

☐

**Referring people to external services working elsewhere**

☒

Mixture of the above

☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **No** ☒

If yes, please provide details of these here

13. Are the number of deaths by suicide by persons under probation supervision collected nationally?

**No** ☒



If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities?

**No, there is no such a policy.**

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities?

**No, there is no such a policy.**

## SLOVENIA

1. Which country/jurisdiction do you work in/represent?

**Slovenia**

2. What is your job title?

**Secretary**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

### Section 2: The Organisation of Probation and Mental Health Care Provision

#### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

**1.102 cases included in the treatment and 962 cases of misdemeanours, which are not included in the treatment (only community work), all together 2.064 cases.**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? **No** ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or **tick here** ☒ **if unknown**)

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability? **15%**

a. What data/ information do you base this estimate on?

**Data based on estimation of probation officers (conversation with offenders), on documentation of court, prison, health institutions.**

b. Has specific research been carried out on this? If the answer is yes, please provide details

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐  
**Ministry of Health/Healthcare services** ☒  
Voluntary sector providers ☐  
Other (please specify)

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☐  
**Court** ☒  
**Prison** ☒  
**Probation** ☒

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

**Courts use the forensic experts, prisons have psychological tests/treatment, probation officers use the questions about well-being, taking medication, treatment by a psychiatrist...**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

**Probation staff** ☒  
Other criminal justice staff ☐  
Nurse ☐  
General practitioner ☐  
Psychiatrist ☐  
**Psychologist** ☒  
**Social worker** ☒  
**Other (please specify)** ☒ **Probation officers are social workers, psychologists, social pedagogues and others.**

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**Probation officers refer offenders to the mental care institutions and cooperate with them.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

**Providing interventions/treatment themselves** ☒  
Inviting external services to work on their premises ☐  
**Referring people to external services working elsewhere** ☒  
Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **No** ☒

If yes, please provide details of these here

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities? **No** ☒

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities? **No** ☒

## SPAIN

1. Which country/jurisdiction do you work in/represent?

**Spain**

2. What is your job title?

**Deputy Assistant Director-General for Open Regime and Alternative Sentences and Measures**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

**First, we want to clarify that we will include under the term “probation”, offenders serving an alternative sentence and offenders on conditional release.**

**Regarding people who are serving a sentence or an alternative measure, there are two options: In some cases, the court decision includes the obligation of the offender to participate in a mental health treatment programme. In that case, the probation officer refers the offender to a public resource and makes a follow up of the case, informing the court periodically.**

**When an offender with a mental disorder is sentenced to a regular alternative measure (community work or suspended sentence) because his/her mental condition has not been identified in court, the probation office may refer him/her to the Extended Bridge Programme (EBP). The main objective of the program is to detect these cases and establish a connection between the offenders and the community resources, both social and health, thus improving their health and at the same time avoiding new prosecutions and imprisonments. For example, if the probation officer detects that an offender who has to serve a community service sentence has a severe mental disorder, he/she will propose to the judge the possibility that the offender serves the sentence through his participation in the EBP. This will prevent compliance breaches and will contribute to a better rehabilitation of the offender.**

**Similarly, for offenders with intellectual disabilities, the Integrate Programme (IP) is available. The main objective of this program is the early detection of intellectual disability, improving their health and establishing connections with community social and health resources. This programme is in a pilot phase.**

**It is intended that these types of interventions continue when the offender finishes his/her sentence.**

**For people on conditional release there is the Bridge Programme. The objective of this programme is to facilitate and develop a process of reintegration into the community for people with mental disorders who are in open regime in any of its modalities, also covering the period of conditional release. Different types of intervention are carried out: psychosocial care, support for psychiatric and psychosocial rehabilitation, acting as health mediators, providing legal advice, foster care and family support, and job development programs.**

### Section 2: The Organisation of Probation and Mental Health Care Provision

The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

**Alternative sentences and measures: 43868**

**Conditional Release: 5230**

**Total: 49098.**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training?  
**Yes** ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

**In the initial training for health practitioners, nurses, psychologist, some training on mental health is provided.**

**Also, when a new programme is developed, there are specific trainings and implementation follow-up meetings.**

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or **tick here** ☒ **if you unknown**)

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**We do not collect specific data on offenders with mental disorders or disabilities, besides the offenders who participate in the programmes mentioned above.**

**Number of offenders participating in the EBP, IP or referred to public mental health resources for court mandate: 185 people (0,38%) (26 March 2021).**

**Number of offenders on conditional release participating in the Bridge Program: 26 people (0,05%) (March 2021).**

a. What data/ information do you base this estimate on?

**As mentioned above, we are just providing data on the number of offenders who are participating in specific programmes for people with mental disorders or disabilities.**

b. Has specific research been carried out on this? If the answer is yes, please provide details **No** ☒

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐

**Ministry of Health/Healthcare services** ☒

**Voluntary sector providers** ☒

**Other (please specify):** ☒ **Home Office (Probation staff)**

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☐

**Court** ☒

**Prison** ☒

**Probation** ☒

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

**During the assessment interviews, in addition to personal and criminal data, social health data is collected: drug-dependency history, degree of disability, educational level, work situation, health and psychiatric history. In addition to this, a brief psychopathological examination is carried out, assessing**

the level of alertness, orientation, language, anxiety, mood, thought content, perception, impulsivity, insight.

If deemed necessary, a psychometric test can be performed: MEC (cognitive impairment), ASSIST (addictive behaviours), CAGE (alcohol), AUDIT (alcohol), General Health Questionnaire-28 (general aspects of dual psychiatric pathology).

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

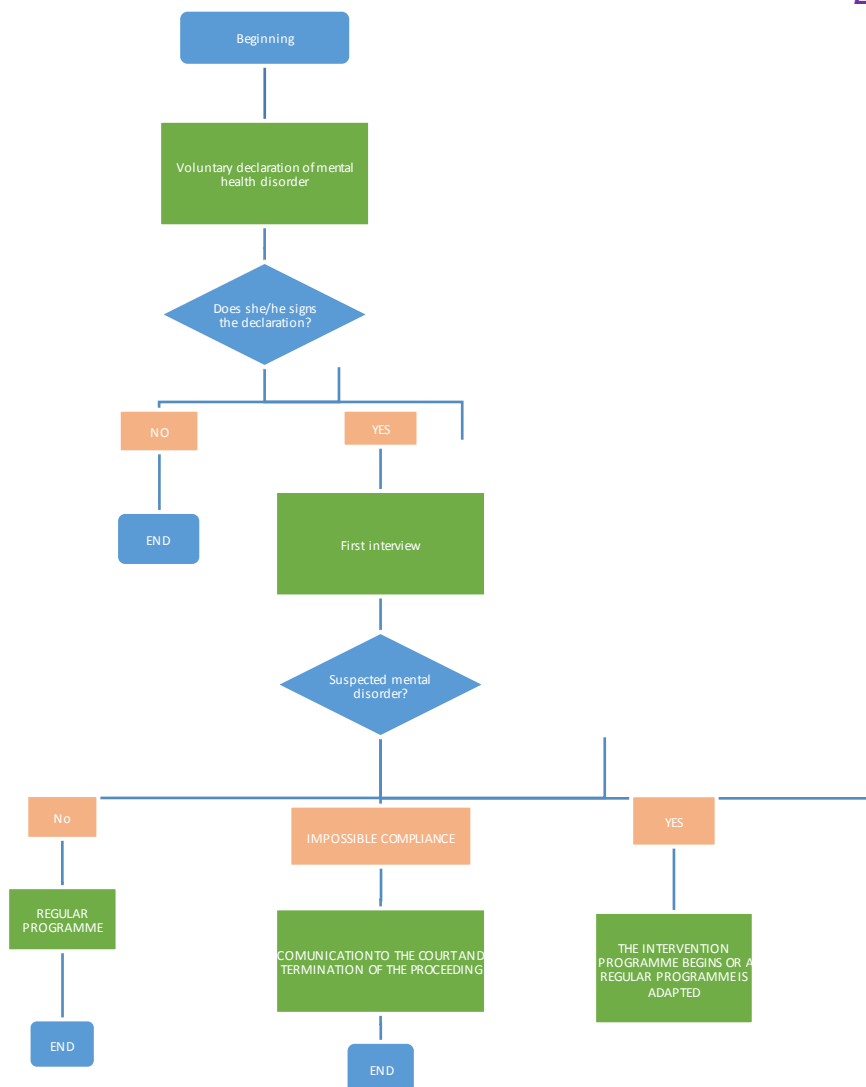
Probation staff	<input checked="" type="checkbox"/>
Other criminal justice staff	<input type="checkbox"/>
Nurse	<input checked="" type="checkbox"/>
General practitioner	<input checked="" type="checkbox"/>
Psychiatrist	<input checked="" type="checkbox"/>
Psychologist	<input checked="" type="checkbox"/>
Social worker	<input checked="" type="checkbox"/>
Other (please specify)	

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

- In the case of the EBP: Probation officers, when setting a date with the offenders for the first interview, inform them that they can provide with any information/documentation on their mental condition. During this first interview, there is an initial social and health screening. If the person agrees to the interview, he/she must sign a voluntary declaration of a mental health problem and consent for using clinical data. This is complemented by another initial interview conducted by a social worker.

If during the interview the existence of a mental illness is suspected or confirmed, the coordinator of the EBP will propose to the probation officer in charge of the case, that the offender takes part of an extended evaluation and EBP referral.

*EBP diagram*



- The programme will be applied directly when it is included in the judicial resolution of the suspension of the sentence. Likewise, if the probation officer understands that there are obligations that can be replaced by the EBP, they will make the proposal in the intervention plan to the competent court for enforcement.
- In the case of people on conditional release, they have usually been participating in the Bridge Programme during the last term of the prison sentence. Once they reach conditional release they continue as participants of the programme. If a professional detects that a person may have a mental disorder, which has not been identified during their stay in prison, they will inform the multidisciplinary team of professionals, who will assess their admission to the programme. The inmate's capacity for containment, social and health resources, future prospects, family support and needs in the community will be assessed.

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

- Providing interventions/treatment themselves ☐
- Inviting external services to work on their premises ☐
- Referring people to external services working elsewhere ☐
- Mixture of the above ☒

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **Yes** ☒

If yes, please provide details of these here

**Already explained above.**

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities?

**In the case of the EBP, probation officers do not work directly with family members. However, once offenders are referred to Psychosocial Rehabilitation Centers (run by public resources or NGOs), there is a specific intervention with families.**

**Under the umbrella of the Bridge Programme, prison social workers and other professionals work with family members, providing them with advice, information and training in communication skills, psychoeducation, management and problem solving, facilitating the use of resources, linking with self-help groups and family associations.**

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities? **No** ☒

## SPAIN (CATALONIA)

1. Which country/jurisdiction do you work in/represent?

**Spain (Catalonia)**

2. What is your job title?

**Deputy Director of Probation and Restorative Justice**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)  
No recent documents available

### Section 2: The Organisation of Probation and Mental Health Care Provision

#### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021? **8.329.**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? **No** ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or **tick here** ☒ **if unknown**)

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**We can provide the number of probationers that are serving a sentence with the obligation of following a mental health treatment: 7% of the total number of probationers.**

**Nevertheless, this data doesn't include all the probationers with mental health problems that can be serving other kind of measures or obligations.**

**A small survey carried out during 2019 showed that a 42% of probationers had some kind of low mental health problem as anxiety or depression.**

a. What data/ information do you base this estimate on?

**The number of probationers that on 31 January were following specific measures that obliges them to follow mental health treatment.**

b. Has specific research been carried out on this? If the answer is yes, please provide details **No** ☒

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction?

**Yes partially** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

**We collect data regarding probation measures that imply the obligation of following mental health treatment. Nevertheless, we don't collect data regarding mental health problems in the rest of probationers.**



6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☒  
Ministry of Health/Healthcare services ☒  
Voluntary sector providers ☐  
Other (please specify) ☐

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☐  
Court ☒  
Prison ☐  
Probation ☐

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision.

**We don't know as there are specific services that provide the judges or our services of this information: forensic services or health services. Our probation officers don't do this specific detection.**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff ☐  
Other criminal justice staff ☒  
Nurse ☐  
General practitioner ☐  
Psychiatrist ☒  
Psychologist ☒  
Social worker ☐  
Other (please specify) ☐

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**We work side by side with the Department of Health. We are working in an Agreement Justice-Health that will cover all our needs and will specify which is the map of health services that we can use, plus a specific way of derivation and follow up.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves ☐  
Inviting external services to work on their premises ☐  
Referring people to external services working elsewhere ☒  
Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **Yes** ☒

If yes, please provide details of these here:

1) **People under security measures (declared total or partially responsible of the crime committed). Security measures imply that instead of going to prison, the probationer can be referred to a mental health institution for the same time that the prison sentence lasts or can be sentenced to follow a mental health treatment in the health community services. In both cases, the Department of Health provides the Department of Justice of the mental health services but the probation officer must follow up the probationer and support hi/her rehabilitation process as well as is the one that has to inform the judge about the evolution of the probationer.**

- 2) Probationers that are totally responsible of their crime that have the obligation of following a mental health treatment as a condition of the suspension of his/her prison sentence. The way that we proceed is the same than in the first situation.

13. Are the number of deaths by suicide by persons under probation supervision collected nationally?

No ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities? No ☒

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities? No ☒

## SWEDEN

1. Which country/jurisdiction do you work in/represent?

Sweden

2. What is your job title?

Head, Probation Unit

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

**In Sweden persons serving probation sentences are included in the general health care system, it is called “a principle of normalization”. The Swedish Prison and Probation Service do not provide any national policies apart from general policies from the national health care services. In prisons there can be special policies due to security reasons.**

### Section 2: The Organisation of Probation and Mental Health Care Provision

#### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

**The number of persons supervised the 1st of October 2020 was 10 349. The figure includes those with Electronic monitoring, Conditional release (parole) with probation supervision and on Probation.**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? No ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or **tick here ☒ if unknown**)

**It is unknown due to the fact that the regular health care providers distribute health care for persons on probation (“the principle of normalization”).**

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**In prison 46% (2013) is diagnosed with a mental disorder or disability when they come in contact with SPPS. We do not have specific numbers for clients under probation supervision.**

a. What data/ information do you base this estimate on?

**National client survey 2013.**

b. Has specific research been carried out on this? If the answer is yes, please provide details

**The National client survey can be found on the following link (only in Swedish unfortunately)**  
<https://www.kriminalvarden.se/om-kriminalvarden/publikationer/kartlaggningar-och-utvarderingar/klientkartlaggning-2013/>

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐

**Ministry of Health/Healthcare services** ☒

Voluntary sector providers ☐

Other (please specify)

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

**Persons with a prison sentence has an opportunity to get in contact with health care staff in prison. Persons in the probation part of the SPPS get in contact with the regular healthcare services.**

Arrest (Police) ☐

Court ☐

**Prison** ☒

Probation ☐

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff ☐

Other criminal justice staff ☐

Nurse ☐

General practitioner ☐

Psychiatrist ☐

Psychologist ☐

Social worker ☐

**Other (please specify)** ☒ **Persons who work in the healthcare services, it can be nurses, psychiatrist, psychologists etc (not employed by the SPPS).**

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**On the same terms as every other citizen in Sweden, by get in contact with the health care agencies.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves ☐

Inviting external services to work on their premises ☐

**Referring people to external services working elsewhere** ☒

Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **No** ☒

If yes, please provide details of these here

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No** ☒

**Not by the SPPS. The Public Health Agency of Sweden and The National Board of Health and Welfare are responsible for the suicide statistics in Sweden. "Probation" is not a parameter (age, gender, education, geography, birth country).**

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities?

**No, not from the SPPS. Sometimes from social services or health care services providers. Also organisations in the civil society.**

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities?

**Not applicable for the SPPS.**

## THE NETHERLANDS

### The Participants

1. Which country/jurisdiction do you work in/represent

#### The Netherlands

2. What is your job title?

#### Researcher

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey) -

#### Short Introduction: Probation in the Netherlands

Probation in the Netherlands has three core tasks:

- Advice
- Supervision
- Community service.

These are the three core tasks of the Dutch Probation Service. Our work is always based on an assignment from the justice department. In supervisory and community service situations, we work within a compulsory framework. That means that cooperation is not optional and that failure to cooperate may have negative consequences for the client. Detention is generally the 'hidden motivation'. This is explicitly the case where the sentence includes a probationary punishment and for the community service order, in which every two hours worked is equivalent to one day in detention. The three core tasks lead to the following products:

#### Early intervention:

Our work starts directly after an arrest is made. Using a quick screening we draw up a risk profile of the suspect. We assess the risk of recidivism and check what we can do to limit the risks to society. We do this at the police station or the magistrate's office. Even when a suspect denies the charges, we still draw up a report.

#### Probation recommendation:

Based on a request by the Public Prosecution, the judicial service or the penitentiary system, we draw up a thorough analysis of an offender or suspect. We look at the crime, causes, background, relationships, alcohol and drugs, attitude and behaviour. We then use a diagnostic tool to draw up a probation recommendation for the judiciary authorities. The recommendation includes the preferred training courses and a treatment proposal as needed. This recommendation is used as a guideline for the type of sentence imposed.

The probation service in the Netherlands is active in the pre-sentence phase and issues information reports to the judicial authorities. In the Netherlands this phase is referred to as the advisory phase.

#### Probation supervision:

The judge, Public Prosecution or management of a penitentiary institution (in the event of a penitentiary programme) are our commissioning clients. We do the actual supervision and enforce adherence with any special conditions, such as a restraining order for a specific area. Each convicted person receives his or her own supervisory plan. This may include electronic monitoring, such as an ankle cuff or GPS ankle cuff. This is how we check to see if a person under probationary supervision is staying inside the required area, or staying outside the prohibited area. Intensity of supervision depends on the risk of recidivism and the offender's behaviour and motivation.

## Behavioural training:

Behavioural training courses can be imposed as a special condition during the ruling or decision. In case of probation supervision in the context of a probationary sentence or probationary release, only the judge or Public Prosecutor can decide whether the supervised person must follow behavioural training. If supervision takes place in a different context, e.g. suspended sentence, penitentiary programme, detention under a conditional hospital order, or a probationary dismissal, a probation officer may propose behavioural training on the basis of his or her authority to issue such instructions. It is necessary to provide good reasons that clarify why behavioural training was not proposed previously as a special condition. The training courses have a scientific basis. An independent accreditation committee tests and evaluates the methods used and the results achieved. This approach makes it possible for us to provide training programmes that achieve a provable result.

## Community service:

Community service orders reduce the risk that detainees will relapse into criminal behaviour. This is because people doing community service, in contrast to a prison sentence, do not lose their home and household; they continue functioning as part of society. And community service offers the person a chance to give something back to society. We ensure a good match between the convicted person and the place where the community service takes place. We supervise and guide both parties in this context. The community service may be carried out in a group setting in one of our group projects, headed by a work leader, or individual at an external project site. For example, a group might work in the municipal department that maintains public areas, or in a hospital.

## Three private organisations

Probation activities in the Netherlands are carried out by three private organisations, which are almost entirely financed by the Ministry of Justice. One of those private organizations, the SVG (Dutch for The Addiction Probation Service), deals with addiction. An indication for the SVG is that the client is addicted, and that the addiction problem is predominant in his daily life or has a major influence on his delinquent behaviour. In addition, each probation organization pays special attention to dealing with people with mild intellectual disabilities. The probation service does not provide forensic care itself, but provides indication and refers to appropriate mental care institutions. In addition, there may be regular care or an Hospital Order (in Dutch TB- measure).

## Forensic Care

Forensic care is mental health care, addiction care and care for the mentally handicapped that is part of a (conditional) sentence or penal measure. Forensic care is usually imposed by the court as part of a sentence and/or measure to someone with a mental/psychiatric disorder or intellectual disability who has committed a criminal offence.

Generally, in the phase before the offender has been sentenced, the probation service examines whether care is needed to reduce the risk of recidivism. If indicated, the probation service can propose to the judge in its advice that care should be included as a special condition to be imposed as part of the sentence.

Forensic care operates at the intersection of criminal law and healthcare. The Ministry of Justice “purchases” various forms of forensic care from more than 180 providers (<https://www.forensischezorg.nl/>). The probation service indicates for and places in ambulatory (forensic) care. For clinical forensic care an indication is required from the Netherlands Institute for Forensic Psychiatry and Psychology (department Indication Assessment Forensic Care; NIFP/IFZ). Since the nature of clinical care is a restriction of freedom, this form must be explicitly included in the special conditions imposed by the court. Ambulatory care may also, if necessary, be used by the probation service during supervision, and need not to be specifically included in the conditions imposed by the court. In a small number of cases, care is already started in the advisory phase, without indication of the probation service. For example, in cases where domestic violence plays a role. In that case, it is often important that forensic care starts as soon as possible.

## Regular care

In general, the judicial title (a decision by a judicial body) is taking precedence over other titles, such as the Law on Societal Support (in Dutch: WMO). This law entitles citizens in general to benefit from

care and assistance & support. This law applies in particular to residential care and guidance. The client can also follow treatment voluntarily. The health insurer then pays, and the client must pay a personal contribution/deductible. However, in cases of crime-related problems, it is preferable that they are dealt on the basis of a decision by a judicial body, in the form of a special condition, and as a consequence financed by the ministry of justice. In this way, the probation service can monitor and report non-compliance with the conditions to the Public Prosecutor.

### Hospital Order

The court can impose a Hospital Order (TBS-measure) on people with a psychiatric disorder who have committed a serious offense and who pose a threat to the safety of others as a consequence of a serious psychiatric disorder. (<https://www.tbsnederland.nl/tbs>). TBS stands for “placement at the discretion of the state”. The order can be imposed potentially in addition to a prison sentence. The purpose of a hospital order is to protect society and treat the psychological disorder. Hospital orders have two variations:

1. Hospital Order with compulsory treatment (The offender is placed in a closed ward of a TBS clinic) The court decides periodically on extension of the hospital order. The probation service gives advice on the contents of trial leave and during the trial leave the probation service monitors compliance with the conditions set and helps the offender to integrate back into society.
2. Conditional Hospital Order. The patient is not placed in a mental hospital, but he must comply with conditions imposed by the judge and monitored by the probation service during probation supervision. The offender needs to agree and cooperate with treatment.

When carrying out probation tasks, the following applies specifically to the Hospital Order:

- Advice and supervision are performed by probation officers that are specialized in activities with regard to Hospital Orders. They have followed specific training courses about this kind of work.
- For each forensic psychiatric center a (in Hospital Orders) specialized contact officer at the probation service is assigned.
- The three probation organisations have organized a joint group in which cases are discussed, including all probation recommendations before they are sent to the courts/clinics.
- Each offender with a hospital order is supervised by two probation officers. This is called duo coaching.

## **Section 2: The Organization of Probation and Mental Health Care Provision**

### **The Organization of Probation**

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

**23.159**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training?

**Yes**

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

**Every probation officer has at least an education at a higher professional level (university of applied sciences) such as:**

**Social Work and Services**

**Social legal services**

**Social pedagogical assistance**

**Mental health awareness training is a standard part of these courses.**



At the Addiction Probation Service there is always extra training with regard to psychopathology and addiction. TBS task specialists have additional training in the field of psychopathology. In the coming years, all probation officers will be trained to recognize and deal with mild intellectual disabilities.

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or tick here if unknown)

**The budget for forensic care for probation clients is € 503,000,000.**

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**44%**

a. What data/ information do you base this estimate on?

**Based on the Recidivism Assessment Scales (RISC) that are administered to clients of the probation service, mainly in the advisory phase (so before the verdict is reached). This includes the question of mental health disorder. The instructions for the RISC contains the following passages:**

**Please give a 'yes' if ever a DSM (Diagnostic and Statistical Manual of Mental Disorders) diagnosis has been made in the area of the client's mental health. Also give a 'yes' if a mild intellectual disability has been diagnosed. Exception: score a 'no' if only a substance use disorder has been diagnosed and therefore a 'yes' is scored on the question about alcohol abuse and/or drug abuse.**

**Nationally, at least one RISC has been administered among 23,235 offenders placed under probation supervision, that is (78%) of the offenders.**

b. Has specific research been carried out on this? If the answer is yes, please provide details

**Yes, the prevalence of mild intellectual disability ( [https://www.narcis.nl/publication/RecordID/oai:hbokennisbank.nl:sharekit\\_hsleiden%3Aoi%3Aurfsharekit.nl%3Aa3945f1f-da7e-4085-8397-6e55d3725929](https://www.narcis.nl/publication/RecordID/oai:hbokennisbank.nl:sharekit_hsleiden%3Aoi%3Aurfsharekit.nl%3Aa3945f1f-da7e-4085-8397-6e55d3725929) ). Unfortunately this publication is not in English.**

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **no**

**The probation service does collect information about mental disorder or disability via the RISC, mainly in the advisory phase.**

a. If 'yes' please provide further details about how this is done (eg, who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice organizations	<input checked="" type="checkbox"/>
Ministry of Health/Healthcare services	<input type="checkbox"/>
Voluntary sector providers	<input type="checkbox"/>

Other (please specify)

7. At what stage(s) of the criminal justice system are people screened for mental disorders or disabilities? (Please tick all that apply)

Judgment (Police)	<input checked="" type="checkbox"/>
Court	<input checked="" type="checkbox"/>
prison	<input checked="" type="checkbox"/>
probation	<input checked="" type="checkbox"/>

**During the investigation phase and in the run-up to arraignment and/or court hearing, the probation service can conduct a RISC in the advisory phase or the Netherlands Institute for Forensic Psychiatry**

and Psychology can be asked for a consultation by the Public Prosecutor. The probation service can also request in-depth diagnostics: a short screening by a behavioral expert to assess problems on a psychiatric/psychosocial level, mental capacity or substance use. A psychological and/or psychiatric examination can be carried out by specifically designated and trained employees if there is an assumption of a relationship between the disorder and the offence. That can also affect the settlement the way the judicial authorities will settle the case. In case the offender is in custody, the prison system is responsible for care.

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

RISC (see question 4a the question from the OXREC about mental disorder) and the in-depth instrument within the RISC, called SCIL ( 'Screener for Intelligence and Mild Intellectual Disability'). It is a validated screening instrument with which you can estimate whether the offender has a mild intellectual disability.

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff	<input checked="" type="checkbox"/> RISC
Other criminal justice staff	
nurse	<input type="checkbox"/>
General Practitioner	<input type="checkbox"/>
psychiatrist	<input checked="" type="checkbox"/>
Psychologist	<input checked="" type="checkbox"/>
social worker	<input type="checkbox"/>
Other (please specify)	

The probation service does an exploratory screening with the RISC. In-depth diagnosis is performed by an external behavioral expert at the request of the probation service. The in-depth diagnosis focuses on psychiatry, addiction and intellectual disability, and is often used during the advisory phase. The Netherlands Institute of Forensic Psychiatry and Psychology (NIFP) offers expertise and knowledge in the field of forensic psychiatry and psychology and somatic care in correctional institutions. NIFP can issue a Pro Justitia report at the request of the Public Prosecution Service. Pro Justitia reports are investigations by a psychiatrist or psychologist into a person involved in a lawsuit. For the Pro Justitia report, it is investigated whether a suspect has a mental disorder, or whether something has gone wrong in that person's development. The psychiatrist or psychologist conducting the study also looks at the risk of recurrence and whether someone needs treatment for psychological problems.

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

The probation service indicates for and places in care institutions. If that care emanates from the decision by a judicial body, forensic care is arranged by the probation service. Ambulatory forensic care can also be arranged by the probation service independently. Clinical forensic care can only be used if it is specifically included in the special conditions, and if The Netherlands Institute of Forensic Psychiatry and Psychology (NIFP) has given an indication for this, at the request of the probation service. With the exception of admission for detoxification or observation; the probation service can also use this itself if outpatient care is included in the conditions. Regular care is generally not provided through the probation service because this often requires a referral letter from the general practitioner.

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterize their role?

Providing interventions/treatment themselves	<input checked="" type="checkbox"/>
Inviting external services to work on their premises	<input type="checkbox"/>
Referring people to external services working elsewhere	<input checked="" type="checkbox"/>
Mixture of the above	<input type="checkbox"/>

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision?

**Yes**

If yes, please provide details of these here

#### **Behavioral intervention cognitive skills**

- **CoVa (including Solo) (CoVa training helps clients to control their behavior. They learn to control impulsive behavior and solve problems on their own.)**
- **CoVa-plus (CoVa-Plus helps clients with intellectual disabilities to get a better grip on their lives. Positive life goals and tools are central to this.**

#### **Behavioral intervention aggression management**

- **Alcohol and Violence**
- **Partner violence**
- **i-Respect**

#### **Behavioral intervention substance use**

- **Alcohol and Violence**
- **Lifestyle 24/7**

#### **Behavioral intervention motivation**

- **Lifestyle 24/7 Abuse is also part of mental disorder, so the Lifestyle training is also specific to the named group**

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No**

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

## TURKEY

1. Which country/jurisdiction do you work in/represent?

**Turkey/MOJ/Probation Department**

2. What is your job title?

**Investigation Judge**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

**Individual plans and programs are developed for probationers who experience mental disorders or disabilities.**

#### ***Intensive Individual Interview***

**As a result of the determination of risk and needs, the suicidal attempt of the responsible person is determined by factors such as his / her history of violence, self-harm behaviour, and the demand for more frequent guidance. In these interviews, the relevant factors are discussed first.**

#### ***Individual Intervention Interviews (Long Term Individual Interview)***

**Group work is not planned for different reasons such as physiological and psychological health problems, criminal history, or it can be carried out with probationers are not eligible for the relevant study as a result of evaluation interviews and / or group work sessions. These interviews; It refers to all individual works aiming to create a change in behaviour in the probationers.**

### Section 2: The Organisation of Probation and Mental Health Care Provision

#### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

**333,365 probationers.**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training?

**No ☒**

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or tick here ☐ if unknown)

**Probationers have universal health insurance. Also, the health expenses of those who do not have insurance are covered by the Ministry of Health.**

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**ARDEF (Research evaluation form) and DENG (Research evaluation form for Juvenile) are used to determine the risks and needs of probationers. Probationers are on leave due to Covid-19. Therefore, no data are available.**

**ARDEF is a semi-structured Risk-Need-Compliance assessment tool. This form, which was developed in order to determine the risk, need and compliance of adult probationers within the probation system,**

has been applied in all directorates since 18.03.2013. The DENGÉ project was implemented by MoJ and UNICEF from 2015 to 2018. As some of the project outputs, TSS-RISK (Reoffending Risk Assessment Tool) and RE-FORM (Needs Assessment Tool) has been developed as semi-structured planning and evaluation tools for juvenile under probation system. The DENGÉ programme, introduced the balances between the risks and needs of the child through a two-layered assessment system and pioneered involvement of the child and her/his family in the process. The TSS-RISK, which was a software developed through data-mining technology, has been calculating the potential recidivism risk based on static parameters (such as past criminal record, type of crime, detention history, gender, age, etc.). The RE-FORM is an interactive semi-structured assessment form for the use of the probation officer to identify the protection risks and needs of the child in the eight areas of criminal history, family, education and employment, social life and peer relations, leisure time and activities, overall health, substance abuse, overall attitudes and behaviours.

- a. What data/ information do you base this estimate on?
- b. Has specific research been carried out on this? If the answer is yes, please provide details
5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction?

No ☒

- a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐

**Ministry of Health/Healthcare services** ☒

Voluntary sector providers ☐

Other (please specify)

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

**Arrest (Police)** ☒

**Court** ☒

**Prison** ☒

**Probation** ☒

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

**In ARDEF (Research evaluation form), which is used to determine the risks and needs of probationers, there are classified questions for probationers who experience mental disorders or disabilities. ARDEF (Research evaluation form) and DENGÉ (Research evaluation form for Juvenile) are used to determine the risks and needs of probationers.**

**ARDEF is a semi-structured Risk-Need-Compliance assessment tool. This form, which was developed in order to determine the risk, need and compliance of adult probationers within the probation system, has been applied in all directorates since 18.03.2013. The DENGÉ project was implemented by MoJ and UNICEF from 2015 to 2018. As some of the project outputs, TSS-RISK (Reoffending Risk Assessment Tool) and RE-FORM (Needs Assessment Tool) has been developed as semi-structured planning and evaluation tools for juvenile under probation system. The DENGÉ programme, introduced the balances between the risks and needs of the child through a two-layered assessment system and pioneered involvement of the child and her/his family in the process. The TSS-RISK, which was a software developed through data-mining technology, has been calculating the potential recidivism risk based on static parameters (such as past criminal record, type of crime, detention history, gender, age, etc.). The RE-FORM is an interactive semi-structured assessment form for the use of the probation officer to identify the protection risks and needs of the child in the eight areas of criminal history, family, education and employment, social life and peer relations, leisure time and activities, overall health, substance abuse, overall attitudes and behaviours.**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff	<input type="checkbox"/>
Other criminal justice staff	<input type="checkbox"/>
Nurse	<input type="checkbox"/>
General practitioner	<input type="checkbox"/>
Psychiatrist	<input checked="" type="checkbox"/> (Ministry of Health)
Psychologist	<input checked="" type="checkbox"/>
Social worker	<input checked="" type="checkbox"/>
Other (please specify)	<input checked="" type="checkbox"/> Sociologist, teacher

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**In due course of determination of the need of medical intervention regarding psychiatric support, probationers are referred or directed to the psychiatry service.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves	<input type="checkbox"/>
Inviting external services to work on their premises	<input type="checkbox"/>
Referring people to external services working elsewhere	<input checked="" type="checkbox"/>
Mixture of the above	<input type="checkbox"/>

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision?

Yes ☒

If yes, please provide details of these here

**Intensive and long-term individual interviews are structured for probationers who experience mental disorders or disabilities.**

#### ***Intensive Individual Interview***

**As a result of the determination of risk and needs, the suicidal attempt of the responsible person is determined by factors such as his / her history of violence, self-harm behaviour, and the demand for more frequent guidance. In these interviews, the relevant factors are discussed first.**

#### ***Individual Intervention Interviews (Long Term Individual Interview)***

**Group work is not planned for different reasons such as physiological and psychological health problems, criminal history, or it can be carried out with probationers are not eligible for the relevant study as a result of evaluation interviews and / or group work sessions. These interviews; It refers to all individual works aiming to create a change in behaviour in the probationers.**

13. Are the number of deaths by suicide by persons under probation supervision collected nationally?

No ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities?

**Addiction is a mental disorder. There is a Family Education intervention program in Combating Addiction for the families of addicted children and young people.**

**With the BAMAP-Family Education Project in Combating Addiction.**

To reach the families of individuals who are drug users or probationers in a healthy way, to focus on the known mistakes, to increase the awareness of families in cases of slippage and relapse, to draw attention to the difficulties of the treatment process and the importance of its contribution to the individual, structuring leisure time, problem solving skills An 8-session intervention program has been developed. in areas that will increase awareness on acquisition issues.

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities?

The gender approach is considered important in all the probation practices. Priority is given to projects specific to women probationers.



## UKRAINE

1. Which country/jurisdiction do you work in/represent?

**Ukraine**

2. What is your job title?

**Vlad Klysha, Head of International Cooperation Unit of the Public Institution "Center of Probation"**

### Section 1: National Policy

Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

**The work with those probation clients , who have mental disorders/disabilities is carried out on the general basis without distinguishing the specific category.**

### Section 2: The Organisation of Probation and Mental Health Care Provision

The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

**There were 54,919 probation client under the supervision of the probation units of Ukraine (according to the Article 13 of the Criminal-Executive Code of Ukraine).**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training? **No** ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each). **No** ☒

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or tick here **X if unknown**) **No** ☒

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**No data is available, because the probation units do not collect such information.**

a. What data/ information do you base this estimate on? **No** ☒

b. Has specific research been carried out on this? If the answer is yes, please provide details **No** ☒

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?) **No** ☒

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐

**Ministry of Health/Healthcare services** ☒

Voluntary sector providers ☐

Other (please specify)

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply).

**The probation clients are never subjects for such screening at the initiative of the probation unit of Ukraine.**

Arrest (Police) ☐  
Court ☐  
Prison ☐  
Probation ☐

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

**During the probation supervision of all categories of the probation clients the national tool is used to assess the risks of re-offending. It is for those adults, who have committed criminal offenses or are accused of committing criminal offenses. In the item 3.6 of the relevant document the risk factor "Mental state" has several indicators for detecting the probation clients' mental disorders/disabilities. Besides, in the item 3.3 the risk factor "Employment (as the main source of income)" has the mark on physical disorders/disabilities.**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

**The probation units are responsible for making the personal cases (files), which should contain all necessary information about the probation clients, but such screening is not envisaged.**

Probation staff ☐  
Other criminal justice staff ☐  
Nurse ☐  
General practitioner ☐  
Psychiatrist ☐  
Psychologist ☐  
Social worker ☐  
Other (please specify) ☐

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply).

**The probation clients receive all necessary assistance concerning their mental health care in the framework of the social and educational work with them. The probation clients with mental health disorders/disabilities are informed about the medical institutions or organizations, which can provide them with necessary services.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

**No, they are not involved.**

Providing interventions/treatment themselves ☐  
Inviting external services to work on their premises ☐  
Referring people to external services working elsewhere ☐  
Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **No** ☒

If yes, please provide details of these here

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities? **No** ☒

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities? **No** ☒

## UNITED KINGDOM

1. Which country/jurisdiction do you work in/represent

**The information we have provided is for *England only*. You will receive a separate return for Wales, where health is a devolved power.**

2. What is your job title?

**Policy Advisor**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

**The Government take mental health very seriously and recognises that providing the right interventions at the right time is vital to improving outcomes for people with mental health needs. Offenders often have complex health and care needs and generally experience poorer physical and mental health than the general population. In order to improve health outcomes and tackle the root causes of offending it is essential we take a whole system approach to healthcare provision for people in the criminal justice system.**

**The Community Mental Health Framework for Adults, now in early stages of implementation by NHSE/I, is a new approach in which place-based and integrated mental health support, care and treatment are situated and provided in the community.**

- This framework will support local community mental health services to move away from siloed, hard-to-reach services towards joined-up care and whole-population and whole-person approaches.**
- This should include access to psychological therapies, improved physical health care, employment support, personalised and trauma-informed care, support with medicines management and for self-harm and coexisting substance use.**
- One of the aims of the framework is to maximise continuity of care and ensure no “cliff-edge” of lost care and support by moving towards a flexible system that proactively responds to ongoing care needs.**

### *Integrated Care Systems*

**In the recent White Paper, ‘Working together to improve health and social care for all’, the Government set out its ambition for every part of England to be covered by an integrated care system (ICS). Building on work set out in the NHS Long Term Plan, the move towards ICSs will enable different parts of the health and care system to work together more effectively, in a way that will improve outcomes and address inequalities, including for people on probation.**

### *The Community Sentence Treatment Requirement Programme*

**Through the Community Sentence Treatment Requirement (CSTR) programme, health and justice partners are working to increase the use of Mental Health Treatment Requirements. This aims to screen/assess those with mental health and/or substance misuse needs and associated vulnerabilities with the ambition to increase the use of community treatment orders rather than custodial sentences.**

### *Liaison and Diversion Services*

**The Liaison and Diversion Programme was created in 2010 following on from the publication of the Bradley Report in 2009. Liaison and Diversion services now cover 100% of England.**

Liaison and Diversion services place clinical staff at police stations and courts to provide assessments and referrals to treatment and support, including those with mental health needs. Information can then be shared with police and courts (with consent) to inform sentencing and disposal decisions. Offenders may be diverted away from the criminal justice system altogether, or away from custody. This may include diversion into a community sentence with a treatment requirement.

### *RECONNECT and Enhanced RECONNECT*

In England, NHSE are rolling out RECONNECT, a Care After Custody service. This service will support those coming out of prison custody to navigate the complexity of health and social care provision and thus maintain and safeguard health improvements made in custody and thereby improve health outcomes and reduce reoffending.

The Enhanced RECONNECT service (with funding from Health), is currently being co-developed and piloted with MoJ to support the reduction of reoffending of prisoners with complex health needs (that are related to offending) who are released from prison with a high risk of harm to self or others. This service will work with the most complex and high-risk individuals for up to 1 year post release to ensure that they not only engage initially, but continue to engage with community based health and support services.

### *The OPD Pathway*

The Offender Personality Disorder (OPD) pathway programme is a cross-government change programme that jointly commissions, designs, co-finances and delivers a connected pathway of services for people in contact with the Criminal Justice System who are high risk, and likely to satisfy the diagnosis of 'personality disorder'. This is a joint responsibility between NHS England and Her Majesty's Prison and Probation Service. The pathway includes delivery of a range of processes and interventions, including case screening, psychological consultancy for Offender Managers, as well as treatment and progression services for people in prison, those in secure mental health services and to those on probation. The pathway incorporates some CSAAP accredited interventions within its range of treatment options, such as Democratic Therapeutic Communities and Mentalisation Based Therapy (MBT). Through delivery of the pathway, the Offender Personality Disorder (OPD) Pathway Programme aims to more effectively manage risk of harmful offending, reduce repeat serious harmful offending, improve psychological health and wellbeing, and improve the competence, confidence and attitudes of staff working with complex offenders, whilst aiming to increase overall efficiency and cost effectiveness.

## Section 2: The Organisation of Probation and Mental Health Care Provision

### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

**On 29 December 2020, the total number of people on the probation service caseload in England was 209,463.<sup>2</sup>**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training?  
**Yes** ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

**Introductory mental health training is mandatory for new entrant PSOs and PQiPs through a combination of a workbook and e-learning. Further training is available on Civil Service Learning. All Approved Premises (AP) staff must attend two-day Suicide Prevention training, which is optional for NPS staff. AP staff can also benefit from Support and Safety Plan (SaSP) training and, from January**

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<sup>2</sup> These figures were taken from the quarterly statistics on the probation population. This dataset was published here: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/981212/Probation\\_Q4\\_2020.ods](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/981212/Probation_Q4_2020.ods). Table 4.8 has a breakdown of caseload by NPS division and CRCs across England and Wales. The total for England has been calculated by adding up the regional totals for 'All Probation Service supervision', excluding Wales.

2021, associated training packages will be rolled out with the Collaborative Assessment of Risk and Emotion approaches to prevent and manage risk to self. Although not strictly mandatory, all staff are strongly encouraged to attend .

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or tick here ☒ if unknown)

We are unable to provide the total budget for standard mental health care, which is funded and commissioned by NHSE, due to a lack of available data.

The budget for the OPD pathway programme - a jointly funded, commissioned and delivered pathway of services for staff (training and development), and for people who satisfy the entry criteria is approximately £70m p.a. However, this provides services across prisons and probation, and not all services are client focussed.

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**Note: The below data is for the probation population in England and Wales. England and Wales.**

According to the most recent published data on the identified needs of adults under probationary supervision in the community, as of 30 June 2018 among those individuals in receipt of a full OASys assessment across England and Wales, around 11% were recorded as having a 'mental health problem' [and about 25% were recorded as having a 'learning disability or challenge']. However, the estimates were based on 63% of the prevailing total caseload because not all adults under probationary supervision receive a full OASys assessment and the estimates did not take account of individuals who had both a mental health problem and a learning disability.

a. What data/ information do you base this estimate on?

See Table 1b in 'Identified needs of offenders in custody and the community from OASys' (2018), available at: <https://www.gov.uk/government/statistics/identified-needs-of-offenders-in-custody-and-the-community-from-oasys>.

b. Has specific research been carried out on this? If the answer is yes, please provide details **No** ☒

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☒

Ministry of Health/Healthcare services ☒

Voluntary sector providers ☒

Other (please specify)

**Note: The vast majority of mental health care provision for persons under probation supervision will be provided by statutory health care services funded by NHSE. The Probation Service's Offender Personality Disorder [OPD] pathway, providing psychological support to probation practitioners and some direct case support is located within Probation provision but externally funded by Health. In a small proportion of cases, voluntary sector support may also be a part of any sentence plan and provide support for individuals with mental health issues [including support for their families]. This could be provided by local providers such as MIND or other charitably funded or wider partnership funded organisations.**

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☒  
Court ☒  
Prison ☒  
Probation ☒

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

**We are unable to fully answer this question due to a lack of available information.**

**On the OPD Pathway, Offender Managers will screen prisoners and people on probation to see if they satisfy the inclusion criteria for the OPD pathway programme; this uses administratively held information on a criminal justice system (OASys).**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff ☒  
Other criminal justice staff ☐  
Nurse ☒  
General practitioner ☒  
Psychiatrist ☒  
Psychologist ☒  
Social worker ☒  
Other (please specify)

**Note: screening for mental health disorders or disabilities will almost exclusively be completed by health services often following referral to them by the probation practitioner. The OPD pathway [see above] includes a screening element based in OASys [see above], where certain scores trigger a referral into the OPD pathway, which could lead to an assessment overseen by a psychologist. Social Workers [employed by the local authority] are only involved in emergency assessments of mental health outside of normal working hours. This would be extremely rare for cases supervised by the NPS.**

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**We are unable to fully answer this question due to a lack of available information.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves ☐  
Inviting external services to work on their premises ☐  
Referring people to external services working elsewhere ☐  
**Mixture of the above** ☒

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision?

**Yes** ☒ **No** ☐

If yes, please provide details of these here

**Through the Community Sentence Treatment Requirement (CSTR) Programme, health and justice partners are working together to ensure greater use is made of mental health, alcohol and drug treatment requirements as part of community sentences, supporting efforts to reduce reoffending.**

**The Programme is currently operating in courts across 15 areas in England and Wales. A number of further sites are expecting to go live in 2021. In January 2019, NHS England & Improvement (NHSE/I) published their Long-Term Plan. This included a commitment to expand the CSTR Programme,**



particularly to include more female offenders, short-term offenders, offenders with a learning disability, and those with mental health and additional requirements.

The OPD Pathway programme has community based services for people who are screened in which will include the provision of one to one and group work that addresses both risk management and mental health - to note that this is jointly delivered between NHS based providers and the CJS.

13. Are the number of deaths by suicide by persons under probation supervision collected nationally?  
Yes ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

Annual statistics for deaths of offenders in the community can be found at <https://www.gov.uk/government/statistics/deaths-of-offenders-in-the-community-annual-update-to-march-2020>. Note that these figures do not go back ten years, but data reporting systems have improved year on year.

14. Is there specific work with family members of the persons who experience mental disorders and disabilities?

**Note: there is no formal structured approach but this may be picked up in a few individual cases by the Probation Practitioner working with a health provider or voluntary sector provider [see above].**

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities?

The CSTR Programme can demonstrate a gendered approach to the delivery of primary care MHTRs. A number of CSTR Sites have initially focused on providing Primary MHTRs to either female offenders or all adults. If the sites initial focus is for female offenders, a dedicated, gender specific, trauma informed approaches are provided via specialised women services. These aim to reduce short custodial sentences, proving effective and robust community orders, addressing the underlying health and social issues which may have contributed towards the offending behaviours. The CSTR programme has completed an Equality Impact Assessment, ensuring that all services are accessible irrespective of any protected characteristics.

## UNITED KINGDOM (NORTHERN IRELAND)

1. Which country/jurisdiction do you work in/represent?

**Northern Ireland**

2. What is your job title?

**Chief Executive PBNI**

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

The Department of Health in N. Ireland is currently consulting on its Ten Year Mental Health Strategy which is designed to improve mental health outcomes for people in N. Ireland. The draft Strategy sets out a new vision for mental health in Northern Ireland, as well as twenty nine high-level actions to take forward significant strategic change over the next decade. The Probation Board for Northern Ireland (PBNI) has been involved in the consultation process, to ensure that forensic population(s) are represented within the Strategy. PBNI have also been involved in the Improving Health and Criminal Justice Strategy over the last number of years, which includes the work of PBNI in dealing with service users who experience mental health problems. In addition to these strategies, there has been a significant number of high level reports published over the years on mental health issues within the Criminal Justice System, including the NI Audit Office Report (May 2019) on Mental Health in the



Criminal Justice System<sup>3</sup>, The Bamford Review of Mental Health and Learning Disability (NI) (August 2007)<sup>4</sup> which produced a Forensic Services Report detailing the work of PBNI and the CJS in managing mental health issues. One of the recommendations of this report was to develop a NI Personality Disorder Strategy, which was then published in 2010. This Strategy also set out the vision for operationalising personality disorder services across Probation, Health and the CJS.

## Section 2: The Organisation of Probation and Mental Health Care Provision

### The Organisation of Probation

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

4,165 orders which relates to 3,521 people.

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training?  
Yes ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

PBNI employ a number of Forensic and Clinical Psychologists who provide a dedicated Psychology service across the province. This includes the delivery of regular mental health awareness training to all staff. The content of this training focuses on an awareness of the different types of mental disorders, presentation of associated behaviours, recognising signs and symptoms of mental illness and associated disorders. The training also includes information and awareness on the wide range of medication prescribed to service users as well as potential side effects, an overview of services available both within PBNI and externally across the region e.g. mental health services, community/voluntary sector services. The training contains a practical element of working through case studies and providing guidance to probation staff on a range of approaches to utilise when working with service users who may be experiencing mental health problems, suicidal ideation or engaging in self-injurious behaviour.

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction?

There is no dedicated budget for the provision of mental health care for people on probation in N. Ireland. PBNI have employed their own Forensic and Clinical Psychologists over the years to work directly with and in partnership with probation staff in the management of this complex cohort of individuals. The Psychologists work very closely with the local Health Trusts and Community Forensic Mental Health Teams/ Regional Psychiatric Secure Unit to ensure that service users are able to access appropriate mental health care in the community. PBNI also work in close partnership with the N. Ireland Prison Service to ensure a joined up approach is applied for individuals being released from custody to the community with mental health needs.

4. Approximately what percentage of people under probation supervision in Your country/jurisdiction do you estimate to have a current mental disorder or disability? 65%

a. What data/ information do you base this estimate on?

Data is routinely collected and collated by PBNI Psychology Services on referral information and also on our own case management system which captures a range of information on offenders supervised by PBNI. The Psychologists collate this additional information on mental disorders from their own assessments and this assists in appropriate case planning, interventions and other services that are required to meet the needs and risks of the individuals on probation supervision.

b. Has specific research been carried out on this? If the answer is yes, please provide details.

Yes, PBNI regularly publish research papers in peer reviewed journals and present at a range of national and international conferences on offender mental health issues. A recent publication in 2020

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<sup>3</sup> NI Audit Office Report (May 2019) on Mental Health in the Criminal Justice System.

<sup>4</sup> The Bamford Review of Mental Health and Learning Disability (NI) (August 2007).

and presentation at recent conferences included the paper; "Trauma Exposure and Domestic Violence Severity in a Probation Sample" (Published in the Journal of International violence 2020).

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **Yes** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

**PBNI Psychology Department routinely record data in relation to the mental health of service users. This includes data collected at various stages during consultation with the probation officer at the assessment stage or during case management. This data is used to inform and assist in a range of interventions at court regarding sentencing and to assist in the assessment and management of service users. This information also informs a range of programmes and interventions for service users and informs various research projects at both MSc and PHD level with local and international academic institutions.**

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

**The N. Ireland Health and Social Care Trusts, including Forensic Mental Health Teams and N. Ireland's Psychiatric Medium Secure Unit.**

Ministry of Justice/Criminal Justice agencies ☒  
Ministry of Health/Healthcare services ☒  
Voluntary sector providers ☒  
Other (please specify)

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☒  
Court ☒  
Prison ☒  
Probation ☒

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision.

**Initial psychological assessments are carried out using semi-structured interviews. Self-report data is often verified by other professionals involved. Psychometrics such as Beck Depression Inventory (BDI) or the International Personality Disorder Examination (IPDE) are used.**

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff ☐  
Other criminal justice staff ☐  
Nurse ☐  
General practitioner ☐  
Psychiatrist ☐  
**Psychologist** ☒  
Social worker ☐  
Other (please specify)

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

**PBNI Psychology have established a direct referral pathway to Forensic Mental Health Teams in the various Health Trust areas. These services have been developed for those diagnosed as having a major mental illness, alongside a history of serious violent/sexual offending. Community Mental Health Teams can be accessed via an individual's GP. Various counselling services available from the community/voluntary sector can also be accessed directly for those with less severe mental health issues.**

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

Providing interventions/treatment themselves ☒

Inviting external services to work on their premises ☐

Referring people to external services working elsewhere ☒

Mixture of the above ☒

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? Yes ☒

If yes, please provide details of these here.

Conditions to engage with PBNI Psychology or mental health services and any care/treatment they recommend.

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? Yes ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

Between April 2020 and December 2020, the recorded death by suicide rate for PBNI was 4 out of 26 deaths for those under statutory supervision.

14. Is there specific work with family members of the persons who experience mental disorders and disabilities?

PBNI signpost family members to support services for families and carers within their local Health Trust area.

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities?

Gender approaches are always considered with a trauma-informed lens in terms of the appropriate assessment, intervention and treatment pathways. The specific needs of women are considered within our INSPIRE Model of working with women who offend, and their mental health needs are assessed and provided for under this model and in partnership with other criminal justice agencies and the community and voluntary sector.

## UNITED KINGDOM (SCOTLAND)

1. Which country/jurisdiction do you work in/represent?

Scotland - Justice Social Work Services (probation equivalent)

2. What is your job title?

N/A

### Section 1: National Policy

1. Please provide details of any recent national policies/procedures/guidance /reports relating to dealing with persons under probation service supervision who experience mental disorders or disabilities (please provide a short summary in English or French and send such texts as attachments with the completed survey)

The Community Payback Order Practice Guidance (<https://www.gov.scot/publications/community-payback-order-practice-guidance/pages/11/>) outlines the operation of, and best practice for, Mental Health Treatment Requirements as part of a CPO, for justice social work services.

The Memorandum of Procedure on Restricted Patients - a reference document for those who are involved with the management and care of patients subject to a compulsion order with restriction order, a hospital direction or a transfer for treatment direction; that is, patients who are subject to

special restrictions. This is aimed at those working in forensic mental health services. Apart from the growing body of trauma-informed practice training for justice social work services, there is no other specific policies/guidance etc.

## **Section 2: The Organisation of Probation and Mental Health Care Provision**

### **The Organisation of Probation**

1. How many persons were supervised by the probation service in your country/jurisdiction at 31 January 2021?

**As at 31 March 2020 an estimated 21,000 people were under supervision in Scotland.**

**\*This figure is mainly made up of community sentences, not all of which are directly supervised as such e.g. people on Community Payback Order unpaid work requirements, people subject to electronic monitoring.**

2. Do probation staff in your country/jurisdiction routinely receive mental health awareness training?  
**Yes** ☒

a. If 'yes' please could you provide a brief description of this in terms of its content and who provides it? (If multiple providers and/or courses exist, please provide a brief summary of each).

**NHS Education Scotland's 'Transforming Psychological Trauma: Knowledge and Skills framework for the Scottish Workforce' (2017) and the Scottish Psychological Trauma Training Plan (2019) are the driving force behind ensuring the JSW workforce are trauma-informed or trauma-enhanced. Community Justice Scotland also support learning for practitioners, Criminal Justice Social Workers and all those working in Community Justice settings. Resources are provided on the Knowledge Hub: <https://khub.net/web/community-justice-scotland-training-resource-packs>**

**Staff also have access to trauma training and training for working with people with personality disorders. Many local authorities run general mental health awareness training (including autism/learning disability awareness).**

**Individuals under supervision as part of CPOs, Supervised Release Orders, licences etc are supervised by qualified social workers, who will generally have had mental health awareness training as part of their degree.**

**[Mental Health Training Scotland - Providing NHS Certified mental health training across Scotland. \(scottishmentalhealth.org\)](https://www.scottishmentalhealth.org/)**

**[Overview of mental health and wellbeing - Mental health and wellbeing - Health topics - Public Health Scotland](#)**

3. What is the total budget for the provision of mental health care for people on probation in your country/jurisdiction? (Please provide details, or **tick here** ☒ **if unknown**)

4. Approximately what percentage of people under probation supervision in your country/jurisdiction do you estimate to have a current mental disorder or disability?

**This data is - generally - collected at local levels and captured by risk assessments, but it is not routinely collated nationally for people under supervision. Prevalence studies in custody and in a women's justice service indicate 70-90%.**

a. What data/ information do you base this estimate on? **See above**

b. Has specific research been carried out on this? If the answer is yes, please provide details

5. Is information on the prevalence of mental disorder or disability amongst persons under probation supervision routinely collected in your country/jurisdiction? **No** ☒

a. If 'yes' please provide further details about how this is done (e.g., who provides and publishes this data? How often?)

6. Which organisation(s) have responsibility for providing mental health care for persons under probation supervision in your country/jurisdiction?

Ministry of Justice/Criminal Justice agencies ☐

Ministry of Health/Healthcare services ☒

Voluntary sector providers ☒

Other (please specify)

7. At what stage(s) of the criminal justice procedure are people screened for mental disorders or disabilities? (Please tick all that apply)

Arrest (Police) ☒

Court ☒ In Scotland, if a request has been made for a Criminal Justice Social Work Report pre-sentence

Prison ☒

Probation ☒

8. Please provide details of which screening tools/questions are commonly used to detect mental disorders or disabilities amongst persons under probation supervision

Justice social work services in Scotland use the national Level of Service/Case Management Inventory (LS/CMI) risk assessment tool which has sections dedicated to the person's mental health and well-being (both at the pre-sentence stage, and in the full assessment which is completed if they receive a community order with supervision, or a custodial sentence requiring supervision upon release).

Many local authorities use a Community Payback Order 'entry questionnaire', commonly administered during the first supervision appointment, which would also ask about the person's mental health.

Specialist risk assessment tools also contain sections/questions on mental health (such as the Spousal Assault Risk Assessment for domestic offenders, and the Stable and Acute 2007 (SA07) for sexual offenders).

Criminal Justice Social Work Reports (at the pre-sentence stage, or court reviews) contain a section on 'health', which should incorporate mental health.

Similarly, reports requested as part of the progression process through custody have sections on mental health.

9. Who usually screens persons under probation supervision for mental disorders or disabilities?

Probation staff ☐

Other criminal justice staff ☒

Nurse ☐

General practitioner ☒

Psychiatrist ☐

Psychologist ☐

Social worker ☒\*

Other (please specify)

\*Just to note - in Scotland, justice social work services (probation service equivalent) is staffed by social workers and a range of paraprofessionals.

10. Please describe the route(s) by which persons under probation supervision usually gain access to mental health care if they need it (if you have pathway diagrams please attach these in your reply)

If they are not already engaged in mental health care and treatment, and don't feel able or are unable to refer themselves to primary or secondary care, the person's Supervising Officer would support them to do so (e.g. GP appointment; referral to or support engagement with NHS community mental health services such as psychiatric nurse; mental health teams etc), as well as identifying and supporting referrals to other services such as counselling (generic or specialist), drug and alcohol services, trauma-specialist services, if required.

11. If probation services are involved in the provision of mental health care to persons under their supervision, which of the following best characterise their role?

- Providing interventions/treatment themselves ☐  
Inviting external services to work on their premises ☐  
**Referring people to external services working elsewhere** ☒  
Mixture of the above ☐

12. Does the probation service have any supervision order requirements/programmes specifically for persons with mental disorders or disabilities under their supervision? **Yes** ☒

If yes, please provide details of these here

**Community Payback Orders can have a Mental Health Treatment Requirement (not widely imposed).**

**Drug Treatment and Testing Orders provide treatment for substance-related offending.**

13. Are the number of deaths by suicide by persons under probation supervision collected nationally? **No** ☒

If 'yes' can you attach a document that shows trends in such suicides over the past ten years?

14. Is there specific work with family members of the persons who experience mental disorders and disabilities?

**Not as laid out in legislation or policy, but there will be pockets of good practice in relation to this across the country as per.**

15. Is there a gender approach when dealing with persons who experience mental disorders and disabilities?

**The LS/CMI risk assessment includes responsivity considerations when assessing women. Some local authority justice social work services have developed specific services for women involved in the justice system, which have a gender-based approach and are trauma-informed.**