

Working at the Interface of Health and Criminal Justice: An Interpretative Phenomenological Analysis Exploration of the Experiences of Liaison and Diversion Nurses - Emerging Findings

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Abstract : Introduction: Public health approaches to offender mental health are driven by international policies and frameworks in response to the disproportionately large representation of people with mental health problems within the offender pathway compared to the general population. Public health service innovations include mental health courts in the US, restorative models in Singapore and, liaison and diversion services in Australia, the UK, and some other European countries. Mental health nurses are at the forefront of offender health service innovations. In the U.K. context, police custody has been identified as an early point within the offender pathway where nurses can improve outcomes by offering assessments and share information with criminal justice partners. This scope of nursing practice has introduced challenges related to skills and support required for nurses working at the interface of health and the criminal justice system. Parallel literature exploring experiences of nurses working in forensic settings suggests the presence of compassion fatigue, burnout and vicarious trauma that may impede risk harm to the nurses in these settings. Published research explores mainly service-level outcomes including monitoring of figures indicative of a reduction in offending behavior. There is minimal research exploring the experiences of liaison and diversion nurses who are situated away from a supportive clinical environment and engaged in complex autonomous decision-making. Aim: This paper will share qualitative findings (in progress) from a PhD study that aims to explore the experiences of liaison and diversion nurses in one service in the U.K. Methodology: This is a qualitative interview study conducted using an Interpretative Phenomenological Analysis to gain an in-depth analysis of lived experiences. Methods: A purposive sampling technique was used to recruit n=8 mental health nurses registered with the UK professional body, Nursing and Midwifery Council, from one UK Liaison and Diversion service. All participants were interviewed online via video call using semi-structured interview topic guide. Data were recorded and transcribed verbatim. Data were analysed using the seven steps of the Interpretative Phenomenological Analysis data analysis method. Emerging Findings Analysis to date has identified pertinent themes: • Difficulties of meaning-making for nurses because of the complexity of their boundary spanning role. • Emotional burden experienced in a highly emotive and fast-changing environment. • Stress and difficulties with role identity impacting on individual nurses' ability to be resilient. • Challenges to wellbeing related to a sense of isolation when making complex decisions. Conclusion Emerging findings have highlighted the lived experiences of nurses working in liaison and diversion as challenging. The nature of the custody environment has an impact on role identity and decision making. Nurses left feeling isolated and unsupported are less resilient and may go on to experience compassion fatigue. The findings from this study thus far point to a need to connect nurses working in these boundary spanning roles with a supportive infrastructure where the complexity of their role is acknowledged, and they can be connected with a health agenda. In doing this, the nurses would be protected from harm and the likelihood of sustained positive outcomes for service users is optimised.

Keywords : liaison and diversion, nurse experiences, offender health, staff wellbeing

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