

Summaries

Justitiële verkenningen (Judicial explorations) is published eight times a year by the Research and Documentation Centre of the Dutch Ministry of Justice in cooperation with Boom Juridische uitgevers. Each issue focuses on a central theme related to judicial policy. The section Summaries contains abstracts of the internationally most relevant articles of each issue. The central theme of this issue (nr. 3, 2008) is *Enforced care*.

Enforced care: an exploration of possibilities and limitations

M. van Ooyen-Houben, D. Roeg, C.H. de Kogel and M. Koeter

In the last few years a trend is seen towards promoting an increase in the use of mandatory hospitalization, coercive and quasi-coercive treatment and intensive community-based care for people with mental health and social problems. This trend is seen in public policy and within the mental health care, care for drug addicts, forensic psychiatric, and prison systems.

In this article the authors discuss what is known about behavioral mechanisms and effectiveness of enforced care. In addition, they provide an overview of the civil and penal legislation that enables pressure and coercion in the context of public protection and mental health care. They also explore the concepts of formal (legally defined) involuntary care and informal (not legally defined) involuntary care, which is sought under pressure of others.

Professional care in a coercive context

A. Menger

This article focuses on the conditions, knowledge and methodology necessary for providing professional care in a coercive context.

The argument rests on five pillars. First, smooth cooperation and tuning in is needed between various partners in the judicial chain, for instance between the judiciary and the probation service. Second, the reason for judicial action, for instance an act of crime, is the starting point for the contact between the care provider and his client. This helps defining the scope of the interaction and the problems to be addressed. Third, it is crucial to realise that resistance (or 'reactance') of the client against the relief or probation worker, the therapy or treatment et cetera is normal. Fourth, one can

not expect a client to be motivated from the start. On the contrary, a lack of motivation is often part of the client's problem. Finally all the attention for What Works? should not lead to underestimating the importance of the question Who Works? The author stresses that successful care workers are those who constantly assess their own performances and react with flexibility to the client's needs. It is therefore crucial to leave some autonomy to care workers to choose their own working methods.

Paradoxes or dilemmas? On coercion in the work of the Dutch Probation Service

R. Poort and A. Andreas

This article deals with coercion and quasi-coercion in the work of the Dutch Probation Service. The authors first give a short description of the Probation Service's history and the relations with the ministry of Justice. Then they analyse the development from a structure of voluntary assistance to a context in which former convicts or prisoners on parole are obliged to meet with their probation officer regularly. Realising this change asked for adaptations within the organisation of the Probation Service and made learning new skills for the probation officers necessary. In this article these processes of change are described from within.

Care and coercion from a professional ethical perspective

G.A.M. Widdershoven and T.A. Abma

Care providers who work with vulnerable people (such as young psychiatric patients or people with an intellectual disability) are sometimes confronted with criminal behavior of their clients. They may doubt whether they should inform the police about this. Respect for autonomy is often regarded as a reason for not intervening in such situations. The authors argue that refraining from interventions does not always do justice to the client's autonomy. Often, clients need help and support to find ways to live a meaningful life. This requires an active attitude of caregivers, stimulating the client not to go out with 'wrong friends'. Interference and persuasion may actually foster the client's autonomy. This does not mean that any kind of intervention is morally justified. Interventions should be effective, and actually help the client to become more autonomous. They should not be more intrusive than necessary. Finally, they should be evaluated

with the client, in order to learn how to accommodate care to the individual person.

Legal aspects of enforced treatment

A. van der Horst

The author discusses the legal possibilities for forced medical and therapeutic treatment of inmates in Dutch penitentiary institutions. At this moment such a treatment is only possible in a situation of acute danger for the inmate or his direct environment. Under discussion is now a bill proposing to broaden this danger criterion. Forced treatment might be in the interest of an inmate when this enlarges his prospects for release out of the institution and for a 'normal' life. However, the application of this principle asks for new and carefully designed criteria and procedures. The author summarizes several recent expert and advisory reports on this topic.