Current Awareness Bulletin:

Latest Forensic Evidence

August 2026

This current awareness bulletin compiles recently published evidence relevant to the field of forensic mental health, including evidence relating to prison and police services. It is produced on a quarterly basis by the Librarian at The State Hospital.

The search strategy and sources included are based on the topic of forensic mental health and may not be exhaustive or complete. Please also be aware that the sources listed have not been through a quality assurance process.

Your feedback is welcome – please contact the Librarian at The State Hospital if you have any feedback or comments about this bulletin.

Contents

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Adverse Childhood Experiences

Beeck, M. v., et al. (2026) **'Adverse Childhood Experiences and their Relationship with Psychological Disorders and Violent Criminal Behaviour within a Forensic Psychiatric Cohort.'** ***Criminal Behaviour and Mental Health 36*****(3), 130–140.**

ABSTRACT Background Adverse childhood experiences (ACEs) are traumatic events occurring before the age of 18 that may undermine a child's sense of safety, stability and attachment. ACEs can have lifelong consequences, including an elevated risk of developing psychological disorders and an increased likelihood of engaging in delinquent or violent behaviour later in life. Clinical practice suggests that many forensic psychiatric patients have a history of ACEs, but scientific research on ACEs within this population remains limited. Aim To study the prevalence of ACEs before the age of 18 within a large Dutch forensic psychiatric prison cohort and the relationship between repeated ACEs and psychopathology or violent criminal behaviour. Methods Data collected from 3421 adults (91% men) who had been admitted to one of the four penitentiary psychiatric centres (PPCs) in the Netherlands were used to examine the prevalence of ACEs and their association with different clusters of

psychological disorders or violent criminal behaviour. Results Over half of the men (1,633, 53%) and nearly two thirds of the women (198, 62%) had experienced repeated ACEs. The men with repeated ACEs had greater odds of having a neurobiological developmental disorder, having committed a violent offence and developing a substance use or addiction disorder, a personality disorder and/or a trauma- or stress-related disorder. The women with repeated ACEs had greater odds of developing a personality disorder. Conclusions Our findings underscore the importance of incorporating assessment of trauma histories and trauma-informed service for forensic psychiatric offenders. We also add evidence for the potential for early intervention, given that repeated ACEs were associated with certain mental disorders and with violent offending, in particular for men.

Cohen, J. R., et al. (2026) **'Beyond Adverse Childhood Experiences: What should be Considered for Trauma-Focused Adolescent Mental Health Risk Assessments?'** ***J Interpers Violence 41*****(13-14), 4578–4608.**

To align with emerging policies for adolescents, feasible, accurate, and equitable trauma-focused assessment protocols need to be developed. To date, most research on this topic has focused on whether traditional adverse childhood experiences (i.e., maltreatment, impaired caregiving) can adequately index mental health risk. Yet, there are noted clinical and statistical drawbacks to this approach. Instead, examining threat and reward biases, two subtypes of cognitive biases stemming from interpersonal trauma exposure, may provide a reasonable alternative to adversity screening. Thus, the aim of this study was to examine the accuracy and fairness of self-reported, trauma-informed cognitive vulnerabilities for classifying concurrent and prospective adolescent mental health risk relative to more commonly assessed childhood adversities. In a diverse adolescent sample (N = 584; M_{Age} = 14.43; 48.9% female; 35% African American; 38.5% White; 40% Hispanic) youth completed measures for adversity exposure (family, dating, and community violence), threat biases (posttraumatic cognitions, hostility), and reward biases (anticipatory, consummatory) during an initial assessment, as well as symptoms of posttraumatic stress (PTS), depression, and violent behavior at baseline and 1 year later. Indices of statistical discrimination, calibration, and statistical fairness were examined using an evidence-based medicine analytic approach, which was subsequently compared to a machine learning approach. Overall, posttraumatic cognitions emerged as an accurate and statistically fair predictor of prospective PTS (area under the curve $[AUC]_{95\%\ CI}$ = [0.63, 0.78]; diagnostic likelihood ratio $[DLR]_{95\%\ CI}$ = [1.32, 3.52]), and to a lesser extent depression ($AUC_{95\%\ CI}$ = [0.56, 0.70]; $DLR_{95\%\ CI}$ = [1.25, 2.98]), and both models were well calibrated (i.e., p-value >05 for Spiegelhalter's Z test). Meanwhile, community violence (CV) exposure best classified the risk for prospective violent behavior ($AUC_{95\%\ CI}$ = [0.62, 0.73]; $DLR_{95\%\ CI}$ = [2.68, 5.49]), especially in males, and was well calibrated. The machine learning algorithms added limited incremental validity to our predictions. Our study suggests that focusing on posttraumatic cognitions and less invasive adversity items (i.e., CV exposure) may lead to trauma screening and assessment protocols that are accurate, equitable, and feasible to implement within applied settings serving diverse youth.

Münevver Özdemir, and Yazici, H. (2026) **'The Relationship between Child Maltreatment, Posttraumatic Stress Disorder Symptoms, and Posttraumatic Growth: Mediating Role of Insecure Attachment.'** ***J Interpers Violence 41*****(13-14), 4380–4401.**

Although the direct link between child maltreatment and adult mental health outcomes is well known, the mediating role of relational factors in these associations has been underexamined. The current study aims to examine the potential mediating role of insecure attachment to romantic partners on the relationship between child maltreatment and posttraumatic stress disorder (PTSD) symptoms and posttraumatic growth (PTG). A cross-sectional study with 366 adults who have been in a romantic relationship for at least 3 months was conducted in Turkey. Data were collected through the Childhood Trauma Questionnaire Short Form, Post-Traumatic Stress Disorder Checklist-5, Posttraumatic Growth Inventory, and Experiences in Close Relationships-Revised Scale. Structural equation modeling was used to test the research hypotheses. Attachment anxiety mediated the relationship between child maltreatment and PTSD symptoms. Further, attachment avoidance mediated the relationship between child maltreatment and PTG. The findings strengthened the evidence on impaired attachment is a significant risk factor associated with psychological adjustment in adults who were maltreated as children. The findings might provide new strategies or targets for attachment-based therapeutic and preventive interventions aimed at mitigating PTSD symptoms and fostering PTG in adults who were maltreated as children.

De-escalation

Han, X., and Wang, Y. (2026) **'Broadening the Understanding of De-Escalation in Acute Mental Health Units: From Individual Nursing Skill to Relational Responsiveness.'** ***Journal of Psychiatric and Mental Health Nursing 33*****(4), 616–617.**

Forensic Mental Health

Hasperhoven, M., et al. (2026) **'Key Dimensions of Work Climate in Forensic Mental Healthcare in the Netherlands: A Qualitative Study.'** ***International Journal of Forensic Mental Health 25*****(3), 223–235.**

Forensic mental healthcare is considered a stressful environment of professional practice. Forensic professionals encounter numerous occupational difficulties, such as dealing with violence, managing high workloads, coping with the consequences of staff shortages, and high societal pressure. To understand what is important to professionals in their work climate, this study aimed to explore the key dimensions of the work climate in forensic mental healthcare in the Netherlands, across both inpatient and outpatient settings. First, desk research was conducted. Documents were selected from the databases of the Inspection Services of Justice and Security, the Healthcare and Youth Inspectorate, and the Custodial Institutions Agency in the Netherlands. Second, eight interviews were held with forensic professionals. A thematic analysis was conducted to analyze the data. Three main dimensions were

generated: (a) Fundamentals, (b) Self-Governance, and (c) Interpersonal Relationships. A main finding in this study was that meaningful formal and informal interpersonal relationships between forensic professionals seem to be of vital importance in the work climate. This study provides insights and opportunities for forensic institutions and for professionals themselves to create or maintain a supportive work climate.

Shizukawa, K., et al. (2026) 'Reflective Practice, Team Polarisation, and Therapeutic Containment in Inpatient Forensic Psychiatric Care: A Targeted Narrative Review.' ***The Journal of Forensic Psychiatry & Psychology 37*(3-4), 440–456.**

High Security

Gilling, L., et al. (2026) 'The Crux of Decisions about Who Requires High-Security Care: A Systematic Analysis of Referrals to the State Hospital.' ***Med Sci Law 66*(3), 192–201.**

There has been limited study to date into the specific patient factors that influence decisions about an individual's need for high-security psychiatric care. Admission to high-security services requires careful assessment and consideration to ensure patients receive the least restrictive care justified, and those who are most likely to benefit from it are admitted. This retrospective case-control study describes the demographic, clinical and risk characteristics of referrals made to the State Hospital in Scotland during a 12-month period, and delineates differences between referrals that were accepted and rejected for admission. It updates the methods of a previous study undertaken at the State Hospital. Six variables differentiated rejected and accepted referrals in univariate analyses. Multivariate logistic regression found that a model with only the individual's age, whether they were prescribed antipsychotic medication at the time of referral, and whether they had a history of violent convictions, best predicted referral outcome. The findings support the conclusion that it is not only an individual's risk of violence or the severity of their mental illness in isolation, but the combination of these factors that is deemed to necessitate high-security care within a stratified forensic mental health system.; There has been limited study to date into the specific patient factors that influence decisions about an individual's need for high-security psychiatric care. Admission to high-security services requires careful assessment and consideration to ensure patients receive the least restrictive care justified, and those who are most likely to benefit from it are admitted. This retrospective case-control study describes the demographic, clinical and risk characteristics of referrals made to the State Hospital in Scotland during a 12-month period, and delineates differences between referrals that were accepted and rejected for admission. It updates the methods of a previous study undertaken at the State Hospital. Six variables differentiated rejected and accepted referrals in univariate analyses. Multivariate logistic regression found that a model with only the individual's age, whether they were prescribed antipsychotic medication at the time of referral, and whether they had a history of violent convictions, best predicted referral outcome. The findings support the conclusion that it is not only an individual's risk of violence or the severity of their mental illness in

isolation, but the combination of these factors that is deemed to necessitate high-security care within a stratified forensic mental health system.

Medication

Abu Khait, A., et al. (2026) 'Predicting Medication Adherence in Schizophrenia: The Role of Reminiscence Functions and the Moderating Effect of Metacognitive Beliefs on the Effect of Insight on Medication Adherence.' ***Issues in Mental Health Nursing 47*(7), 714–726.**

Personality Disorders

Pasetto, A., et al. (2026) 'Survey on Nursing Education and the Perceived Burden of Borderline Personality Disorder in France.' ***Issues in Mental Health Nursing 47*(7), 727–732.**

Short, R., et al. (2026) 'Ethnicity and Pathway Progression: A Retrospective Cohort Study of Male Offenders Managed Under London Offender Personality Disorder Pathway Services.' ***Criminal Behaviour and Mental Health 36*(4), 173–178.**

Background

In the United Kingdom, the Offender Personality Disorder (OPD) Pathway provides a psychologically informed pathway of services—from screening to formulation to referral to treatments/interventions—for men and women whose offending is linked to their complex mental health needs. Evidence shows that individuals from most ethnic minority groups in the United Kingdom are over-represented at all stages of the criminal justice system (including arrests, cautions and convictions). Such individuals may, however, be disadvantaged in terms of their access to and engagement with this specialist service.

Aim

To examine the extent to which self-reported ethnicity was associated with progression through discrete stages of the OPD Pathway in London.

Methods

Linked administrative data from 8816 men who screened into the OPD Pathway from 2011 to 2022 were used to examine the association between self-reported ethnicity (categorised as White, Black, Asian or mixed) and the last known recorded Pathway stage (screened-in and no further work, case consultation/formulation, referral to services, accessing service and completion).

Results

Adjusting for baseline risk, time on the OPD Pathway and London borough, we found that those who self-identified as Black (compared to White) were under-represented at all stages of the Pathway (compared to baseline), suggesting that these individuals tended to get ‘stuck’ at the early Pathway stages.

Conclusions

These findings add weight to suggestions of probably disproportionate disadvantage among men identifying as Black in accessing important dedicated services for offenders with personality disorder. Our data have been used to inform exploration of programme changes, and next steps will include exploration of what has driven this under-representation of non-White ethnic groups across the service and whether more sensitively informed strategies can improve equitable access and benefits.

Yakeley, J., et al. (2026) **'Mentalization-Based Treatment for Antisocial Personality Disorder: Evaluating the Implementation of a Randomized Controlled Trial in the UK Criminal Justice System.'** ***International Journal of Forensic Mental Health 25*****(3), 208–222.**

Randomized controlled trials (RCTs) are the gold standard for evaluating interventions, yet their use in criminal justice settings remains limited and challenging. This qualitative study examined barriers encountered during a multi-site RCT of mentalization-based treatment for men with antisocial personality disorder (ASPD) under probation community supervision in the United Kingdom. Sixteen focus groups were conducted with mentalization-based treatment therapists, offender managers, psychologists, and research staff across 13 sites. Thematic analysis identified five primary challenges: Staff emotional burden, Participant attrition, Systemic constraints within the justice system, Trial design challenges, and Intervention-specific implementation problems. Staff emotional burden emerged as a substantial and under-recognized barrier, associated with systemic instability, professional isolation, and the demands of sustained clinical work with resistant participants. In response, the trial introduced adaptive strategies intended to mitigate these barriers, including strengthened leadership structures, enhanced supervision, improved engagement with probation services, involvement of peer researchers to support trust and participation, and increased procedural flexibility to accommodate participants? circumstances. These findings underscore the value of embedding qualitative evaluation within RCTs to support timely, targeted adaptations that enhance feasibility, staff well-being, and retention. Despite the inherent complexity of conducting trials in criminal justice contexts, responsive and reflexive trial design can support ethical and rigorous evaluation of psychological interventions for high-risk populations.; Randomized controlled trials (RCTs) are the gold standard for evaluating interventions, yet their use in criminal justice settings remains limited and challenging. This qualitative study examined barriers encountered during a multi-site RCT of mentalization-based treatment for men with antisocial personality disorder (ASPD) under probation community supervision in the United Kingdom. Sixteen focus groups were conducted with mentalization-based treatment therapists, offender managers, psychologists, and research staff across 13 sites. Thematic analysis identified five primary challenges: Staff emotional burden, Participant attrition, Systemic constraints within the justice system, Trial design challenges, and Intervention-specific implementation problems. Staff emotional burden emerged as a substantial and under-recognized barrier, associated with systemic instability, professional isolation, and the demands of sustained clinical work with resistant participants. In response, the trial introduced

adaptive strategies intended to mitigate these barriers, including strengthened leadership structures, enhanced supervision, improved engagement with probation services, involvement of peer researchers to support trust and participation, and increased procedural flexibility to accommodate participants? circumstances. These findings underscore the value of embedding qualitative evaluation within RCTs to support timely, targeted adaptations that enhance feasibility, staff well-being, and retention. Despite the inherent complexity of conducting trials in criminal justice contexts, responsive and reflexive trial design can support ethical and rigorous evaluation of psychological interventions for high-risk populations.

Physical Health

Latter, R., et al. (2026) **'Physical Health Screening of Consumers in a Mental Health Rehabilitation Setting: Implementation and Evaluation of an Online Tool.'** ***Issues in Mental Health Nursing 47*****(7), 683–692.**

Physical Intervention

Asayesh, H., et al. (2026) **'Coercive Measures in Patients Hospitalized in Psychiatric Wards: A Contextual Concept Analysis using a Hybrid Model.'** ***Issues in Mental Health Nursing 47*****(6), 614–625.**

Dvorakova, E., et al. (2026) **'Healthcare Professionals' Experiences of Seclusion Practices in an Inpatient Forensic Mental Health Service in England: A Qualitative Study.'** ***International Journal of Forensic Mental Health 25*****(3), 196–207.**

Research has identified that restrictive practices, specifically the use of seclusion rooms, are traumatizing for patients and staff within forensic mental health settings. A few studies have explored the impact of seclusion practices on staff, but these have been limited to nurses' and healthcare assistants' experiences. The current qualitative study included 12 healthcare professionals from various disciplines involved in seclusion practices (healthcare assistants, mental health nurses, junior doctors, and psychiatrists). Interviews were analyzed using inductive Thematic Analysis. Four main themes emerged from the data analysis: *multidisciplinary teamwork, skills required for good practice, patient-centered approach, and the impact of seclusion practices*. The findings have implications for practice, including the importance of multidisciplinary team training and monthly ward-based case formulations, as well as for future research in this area.

Prisons

Ayhan, F., and Güner, A. E. (2026) **'Factors Affecting the Body Awareness Levels of Incarcerated Individuals.'** ***Justice, Opportunities, and Rehabilitation 65*****(5), 359–379.**

Borawski, D., et al. (2026) **'Loneliness, Meaning in Life and Distress among Incarcerated Men: The Moderating Role of Search for Meaning.'** ***Criminal Behaviour and Mental Health 36*(3), 112–120.**

Background

Incarceration often disrupts an individual's sense of purpose and connectedness, contributing to loneliness and psychological distress. Identifying psychological resources that might buffer these effects is especially relevant in correctional settings. One such resource, emphasised in Viktor Frankl's existential theory, is search for meaning—a motivation to pursue existential purpose.

Aims

To investigate whether search for meaning moderates associations between loneliness and (a) presence of meaning and (b) psychological distress. We also explored whether presence of meaning mediates the link between loneliness and distress and whether any such indirect association varies by levels of search for meaning.

Methods

A total of 114 male prisoners aged 18–65 years (mean 37.25, SD = 9.52) were recruited from two correctional facilities encompassing closed and semi-open units. Participants completed the revised UCLA Loneliness Scale, the Perceived Stress Scale and both subscales of the Meaning in Life Questionnaire (MLQ).

Results

Higher loneliness scores were associated with lower presence of meaning and higher distress. Presence of meaning mediated the relationship between loneliness and distress. Search for meaning moderated the link between loneliness and presence of meaning: The association was weaker at higher levels of search.

Conclusions

Identification of presence of meaning as a key mechanism relating loneliness and distress among these incarcerated men extends research on meaning in life to a setting where management of loneliness and distress may be key to safety and underscores the potential relevance of meaning-centred interventions in prison settings.

Ellen van, d. V., et al. (2026) **'Exploring the Social-Emotional Challenges of Dutch Correctional Staff Working with Violent Detainees.'** ***The Prison Journal 106*(4), 457–479.**

This qualitative study explored the social-emotional challenges of correctional staff working with violent detainees, together with their perceived collegial and organizational support. Since discussing such challenges is generally taboo among correctional staff, rigorous methodological strategies were employed to ensure safety and confidentiality, resulting in interviews with the majority of the multidisciplinary staff at the Dutch Facility for Uncontrollably Violent Detainees. Applying thematic

analysis to transcripts, the results revealed significant opportunities to enhance staff's social-emotional well-being, highlighting that emotional safety, collegial interaction, and organizational support are more critical concerns than the violent population itself.; This qualitative study explored the social-emotional challenges of correctional staff working with violent detainees, together with their perceived collegial and organizational support. Since discussing such challenges is generally taboo among correctional staff, rigorous methodological strategies were employed to ensure safety and confidentiality, resulting in interviews with the majority of the multidisciplinary staff at the Dutch Facility for Uncontrollably Violent Detainees. Applying thematic analysis to transcripts, the results revealed significant opportunities to enhance staff's social-emotional well-being, highlighting that emotional safety, collegial interaction, and organizational support are more critical concerns than the violent population itself.

Ferdik, F., et al. (2026) **'Unravelling the Wellbeing Needs of Correctional Officers: Results from Nine Separate Focus Groups.'** ***Psychology, Crime & Law 32*****(7), 1109–1133.**

Jacob T.N. Young. (2026) **'What does Culture "Look Like"? Cultural Models, Heterogeneity, and the Meaning of Trust in a Women's Prison.'** ***Criminal Justice and Behavior 53*****(8), 1101–1124.**
"Culture" is frequently invoked as an explanatory device in criminology and criminal justice. Research examining the "culture" of women's prisons emphasizes the salience of trust relationships for understanding social order. However, this work primarily documents the importance of trust, with less attention to understanding the meanings incarcerated women attribute to trust relationships. This manuscript presents two studies examining the cultural domain of trust in a women's prison. Study 1 uses qualitative inquiry (*n* = 29) to identify key themes regarding the meaning of the domain. Building from these findings, Study 2 (*n* = 198) develops quantitative measures to examine a cultural model of trust. Results for Study 2 reveal two cultural models of trust (i.e., a multicentric cultural domain) and highlight how knowledge of the cultural model correlates with beliefs relevant to the setting (i.e., cultural consonance). Implications for the study of culture in criminology and criminal justice are discussed.

Laivonen, P., et al. (2026) **'Primary Psychoses among Sentenced Prisoners in Finland.'** ***Criminal Behaviour and Mental Health 36*****(3), 105–111.**
ABSTRACT Background Recent studies suggest an increased prevalence of primary psychotic disorders among sentenced prisoners in Finland. Exploring the extent and correlates of lifetime primary psychoses through high-quality data is crucial for early identification and effective interventions within correctional settings. Aims To establish the current lifetime prevalence and comorbidities of primary psychotic disorders among sentenced prisoners in Finland and to explore associations between these and sex, solitary confinement, forensic mental health examination, index offence and total days imprisoned. Methods Data were derived from a subsample (n = 295) of the Health and Wellbeing of Prisoners 2023 (Wattu IV) study (n = 529). Assessments included Structured Clinical Interview for the US Diagnostic and Statistical Manual for Mental Disorders (DSM-IV; SCID I and II). Details of offending to date and imprisonment history from official records and self-reported solitary confinement were included in the database. Logistic regression analysis was used to examine associations between lifetime primary

psychotic disorders and variables significantly related in binary analyses. Results Twenty-four (8%) participants had a lifetime primary psychotic disorder, according to SCID-based data. A further 100 (34%) had a lifetime substance-induced psychotic disorder. The odds of primary psychotic disorder were over five times (OR 5.22) higher among women than men. For more detailed analyses, prisoners with a drug-related psychosis could not be separated from prisoners without psychosis. The odds of disciplinary solitary confinement were over three times (OR 3.36) higher among those with lifetime primary psychosis than among all other sentenced prisoners and over four and a half times (OR 4.61) higher among those requesting it. Neither index offence nor total lifetime days imprisoned had any relationship with primary psychosis. Conclusions This study updates the understanding of lifetime primary psychotic disorders and their correlates in Finnish prisons, descriptively suggesting a likely rise in their prevalence from 6% in 2017 to 8% in 2023, a 33% increase. The finding that twice as many female as male prisoners have primary psychosis aligns with previous research. The higher use of solitary confinement among sentenced prisoners with lifetime primary psychosis than among other sentenced prisoners, including those with substance-related psychosis, is new and troubling. As only one third of these prisoners with primary psychosis had had a court-ordered forensic mental health examination to determine the need for psychiatric treatment and, specifically, compulsory treatment instead of a prison sentence, our findings suggest an urgent case for re-examining pathways into healthcare for prisoners both during pretrial detention and after sentencing.

Laura Lutgen-Nieves, et al. (2026) **'Surveying Correctional Health Staff on Medication for Opioid use Disorder Diversion: Barriers and Mitigation Strategies.'** ***J Correct Health Care 32*****(3), 171–177.** Diversion of medications for opioid use disorder (MOUD) is a well-documented concern among correctional staff and leadership and is cited as a barrier to evidence-based treatment. In this Viewpoint, we explore the perceptions of medication diversion among correctional health care professionals (HCPs) as it pertains to access to care, availability of contraband MOUD in the facility, strategies to reduce diversion, and barriers to such strategies. Data come from a survey administered to 180 correctional HCPs employed within a jail or prison facility in the United States. Among respondents, the majority (*n* = 66, 68% in jails; *n* = 50, 75% in prisons) reported that contraband MOUD could be found in their correctional facility. Eighty-eight percent of jail and 87% of prison respondents believed that a long-acting injectable buprenorphine formulation could help reduce MOUD diversion within their facilities. A key barrier to reducing MOUD diversion is related to inadequate staffing for medication administration and monitoring. Policy implications and recommendations are discussed.

Smith, H. P. (2026) **'Violence Interruption in Prison: Post-Riot Resilience and Institutional Wellness in a High-Risk Environment.'** ***The Prison Journal 106*****(4), 501–520.**

Smith, J., et al. (2026) **'Factors Differentiating between Incarcerated Men and Women in New South Wales, Australia.'** ***Psychology, Crime & Law 32*****(7), 991–1008.**

Wilkinson, L., et al. (2026) **'Transgender and Gender Diverse Identity, Mental Health Conditions, and Mental Health Care in U.S. Prisons.'** ***J Correct Health Care 32*****(3), 189–197.**

Prisons, as total institutions organized around the sex/gender binary, are highly gendered institutions. Individual experiences of prison, therefore, vary dramatically by gender identity due to pains of imprisonment experienced differently by people experiencing incarceration. Building on the gendered pains of imprisonment literature, we use the public-use 2016 Survey of Prison Inmates to expand on previous research exploring the disproportionate mental health burden experienced by transgender and gender diverse (TGD) individuals who are incarcerated relative to cisgender men and women who are incarcerated. We disaggregate the TGD group to examine the different mental health burdens of TGD individuals and how the methodological task of categorizing gender identities can affect our understanding of mental health in prison. Results highlight the theoretical importance of acknowledging the stressful carceral environment and its impacts on psychological well-being and the methodological importance of understanding how decisions around the categorization of gender identity can differently impact our understanding of diverse individuals within the already-marginalized TGD population in prisons.; Prisons, as total institutions organized around the sex/gender binary, are highly gendered institutions. Individual experiences of prison, therefore, vary dramatically by gender identity due to pains of imprisonment experienced differently by people experiencing incarceration. Building on the gendered pains of imprisonment literature, we use the public-use 2016 Survey of Prison Inmates to expand on previous research exploring the disproportionate mental health burden experienced by transgender and gender diverse (TGD) individuals who are incarcerated relative to cisgender men and women who are incarcerated. We disaggregate the TGD group to examine the different mental health burdens of TGD individuals and how the methodological task of categorizing gender identities can affect our understanding of mental health in prison. Results highlight the theoretical importance of acknowledging the stressful carceral environment and its impacts on psychological well-being and the methodological importance of understanding how decisions around the categorization of gender identity can differently impact our understanding of diverse individuals within the already-marginalized TGD population in prisons.

Winsor, M., et al. (2026) **'The Impact of a Brief Psycho-Education and Skills Intervention on Trauma Symptoms in a Prison Setting: Proof of Concept using Group and Case Analysis.'** ***Int J Offender Ther Comp Criminol 70*****(12), 1296–1313.**

The links between trauma and poorer physical health and psychological well-being in adulthood are now well established. Research shows levels of trauma are especially high amongst those who are incarcerated although evidence on what works to help this group is limited. To examine the effectiveness and acceptability of participation in a new brief, structured group intervention in fostering stabilization through reducing the symptoms of post-traumatic stress disorder (PTSD) and improving mental health in male inmates who have experienced trauma. Participants completed questionnaire measures before and after treatment and provided feedback via semi structured interviews. Quantitative data were analyzed at the group and individual level and qualitative data were analyzed using content analysis. At the group level, participants showed a significant improvement in scores for PTSD, anxiety and general mental health. Examination of individual scores showed reliable and clinically meaningful change for

some individuals in trauma and mental health symptoms with little change observed for wellbeing and resilience. Participants feedback was generally positive with suggestions for future changes. Engaging in a brief group-based trauma intervention was acceptable to participants and offered significant improvements mental health and PTSD for some incarcerated individuals who have experienced trauma. This intervention may provide a cost effective and resource light approach to phase 1 PTSD treatment ahead of phase 2 treatment. It would be valuable for future research to develop understanding on who the intervention is most effective for.

Psychology

Streb, J., et al. (2026) **'Effectiveness of Dialectical Behavior Therapy in Patients in Forensic Psychiatry and Prison: Primary and Exploratory Meta-Analyses.'** ***Criminal Justice and Behavior 53*****(7), 919–938.**

We conducted primary and exploratory meta-analyses to evaluate the effectiveness of dialectical behavior therapy (DBT) and its forensic (DBT-F) and correctional (DBT-CM) adaptations in forensic psychiatric and correctional settings. Following PRISMA 2020 guidelines, a systematic search across multiple databases identified studies assessing the effects of DBT on aggression, impulsivity, emotion regulation, depression, and borderline symptoms. The primary meta-analysis included eight pretest-posttest control group studies (N = 394) and found a significant overall effect (b = −.51, p = .04) with notable heterogeneity. In a moderator analysis, a significant improvement was observed for borderline symptoms (b = −1.43, p < .001), but not for other domains. The exploratory meta-analysis of 21 studies (including one-group designs) found significant moderator effects for impulsivity, emotion regulation, depression, aggression and borderline symptoms. DBT appears promising for reducing borderline pathology in forensic and correctional settings, though more high-quality studies using well-adapted protocols are needed.

Psychopathy

Conde, A. R., et al. (2026) **'Psychopathic Traits in Forensic and Community Samples: Evidence from Portugal using the Self-Report Psychopathy Scale -Short Form (SRP-SF).'** ***Behavioral Sciences & the Law 44*****(4), 675–693.**

ABSTRACT This study examined and compared the prevalence and expression of psychopathic traits in a Portuguese sample of prisoners and community members, using the abbreviated version of the Self-Report Psychopathy Scale (SRP-SF). The sample consisted of 766 participants (41.5% prisoners, 58.5% community members) of both sexes. Results indicated that prisoners presented significantly higher levels in all four facets of psychopathy. Males presented higher levels in all facets, regardless of context. The interaction between sex and context was statistically significant only in the affective facet: female prisoners presented similar levels to male prisoners, while females in the community presented lower levels. 31.4% of inmates scored high on psychopathy (≥ 70), compared to 2.2% in the community,

demonstrating the discriminant validity of the SRP-SF. The results support the dimensional conceptualization of psychopathy and illustrate the utility of the SRP-SF for forensic screening. Practical implications for forensic assessment, prison intervention, and community prevention are discussed.

Smith, C. S., and Hung, L. (2026) **'Clarifying the Language of Psychopathy.'** ***The Journal of Forensic Psychiatry & Psychology 37*****(3-4), 483–506.**

Relational Security

Greijmans, S. P. T. E., et al. (2026) **'A Definition of Relational Security within Forensic Mental Health Care: A Scoping Review and Content Analysis.'** ***The Journal of Forensic Psychiatry & Psychology 37*****(3-4), 528–563.**

Risk

Rieger, D. J., et al. (2026) **'Optimized Risk Assessment in Forensic Practice: A Comparison of Machine Learning and Manual Scoring Approaches.'** ***Behavioral Sciences & the Law 44*****(3), 349–360.**
As correctional jurisdictions and risk instrument developers look to optimize scoring for specific population needs, an open question remains - which method is optimal. Popular scoring methods range from manual simple scoring approaches (e.g., Burgess) to more complex machine learning algorithms (e.g., random forests). Prior comparisons between approaches have produced similarly acceptable levels of predictive validity. This study compares scoring methods beyond predictive validity to also assess calibration, item inclusion, and item weighting and discusses drawbacks of each approach. Scoring was developed for an actuarial release decision making risk assessment tool—the Reduction in Capacity Evaluation (ReduCE)—using manual (unweighted, Burgess, Nuffield, Nuffield 2.5, regression) and machine learning (artificial neural network, random forests) scoring methods. The machine learning methods did not outperform the manual methods in predictive validity or calibration and introduced drawbacks on item inclusion and weighting. The optimal approach for ReduCE was the Nuffield 2.5 method.

Trapp, Y., et al. (2026) **'Safewards in Forensic Mental Health Settings: A Review of the Current State of Evidence.'** ***International Journal of Forensic Mental Health 25*****(3), 183–195.**
The Safewards model was developed to identify reasons for conflict and containment and aims to reduce them in mental health units through a set of 10 interventions. This systematic literature review focuses on Safewards in forensic settings, as the model has so far been studied mainly in civil settings, and there have been no reviews that include only studies from forensic settings. The review aims to synthesize the effects of Safewards on conflict and containment rates, ward atmosphere, implementation processes, and possible adaptations for forensic settings. A systematic search of PubMed, CINAHL, APA PsycINFO, MEDLINE, Google Scholar, and forensic mental health journals was conducted, which led to eight articles that met the inclusion criteria. A constant comparative method

was used for data analysis; results are presented in tabular and narrative formats and grouped into six categories: recorded conflicts and containment rates, ward climate, implementation, fidelity, staff attitude, and adaptation for forensic settings. The results indicated that Safewards can reduce conflict and improve the perceived ward atmosphere when implemented with high fidelity and high staff engagement. Furthermore, we identified that for forensic settings, the adaptation of some interventions may be necessary, and additional interventions are proposed.; The Safewards model was developed to identify reasons for conflict and containment and aims to reduce them in mental health units through a set of 10 interventions. This systematic literature review focuses on Safewards in forensic settings, as the model has so far been studied mainly in civil settings, and there have been no reviews that include only studies from forensic settings. The review aims to synthesize the effects of Safewards on conflict and containment rates, ward atmosphere, implementation processes, and possible adaptations for forensic settings. A systematic search of PubMed, CINAHL, APA PsycINFO, MEDLINE, Google Scholar, and forensic mental health journals was conducted, which led to eight articles that met the inclusion criteria. A constant comparative method was used for data analysis; results are presented in tabular and narrative formats and grouped into six categories: recorded conflicts and containment rates, ward climate, implementation, fidelity, staff attitude, and adaptation for forensic settings. The results indicated that Safewards can reduce conflict and improve the perceived ward atmosphere when implemented with high fidelity and high staff engagement. Furthermore, we identified that for forensic settings, the adaptation of some interventions may be necessary, and additional interventions are proposed.

Schizophrenia

Boylu, M. E., et al. (2026) **'Comparison of Impulsivity, Alexithymia and Facial Emotion Recognition in Schizophrenia Patients with and without Criminal Records.'** ***Criminal Behaviour and Mental Health 36*****(3), 141–154.**

Introduction

Criminal behaviour by people with schizophrenia has been attributed variously to direct effects of the illness, an interplay between clinical features and social circumstances or neither. A difficulty in the interpretation of the relevance of the illness may lie in the focus on the more clearly psychotic features and the relative neglect of emotional dysregulation or deficits in social cognition. We, therefore, aimed to examine whether psychological and social cognitive factors—such as alexithymia, impulsivity, aggression and facial emotion recognition—differ between individuals with schizophrenia who have a criminal history and those who do not.

Method

Forty-seven patients with schizophrenia and a criminal record were recruited from consecutive admissions to a specialist forensic mental health inpatient unit and 73 patients with schizophrenia but

no criminal record were recruited from a general psychiatry unit in the same hospital. All participants, aged 18–65 years, completed a battery of assessments, including the facial emotion recognition test, the Toronto Alexithymia Scale, the Barratt Impulsiveness Scale and the Buss–Perry Aggression Questionnaire, between October 2023 and June 2025.

Results

The offender-patients showed significantly higher average motor impulsivity scores, significantly higher alexithymia scores—particularly externally oriented thinking—and significantly higher anger scores, but significantly superior performance in facial emotion recognition tests, specifically identifying shame, fear, surprise and happiness more accurately than the noncriminal group. Clinically, individuals with a criminal history had a significantly later onset of disorder (30.78 vs. 23.42 years), shorter disorder duration (8.85 vs. 12.36 years) and fewer psychotic episodes (2.48 vs. 3.21) and were more prone to self-harm. The offender-patients appeared to have been less treatment-adherent; specifically, they were less likely to have sustained treatment with depot antipsychotic medication. These findings remained significant in regression analyses, with offending as the dependent variable and these other characteristics as independent variables.

Conclusion

This study adds evidence on links between criminal behaviour and schizophrenia other than, or over and above, positive psychotic symptoms. Emotional dysregulation, substance use and poor treatment adherence were problematic, but facial emotion recognition was not. Thus, forensic risk assessments should include tests of emotion dysregulation to inform clinical interventions. Attention is also needed to improve treatment engagement and substance use management. Future research is needed to better understand the apparent disconnection between intact emotion recognition and criminal behaviour in this population.

Situmorang, D. D. B., et al. (2026) **''I Hate Myself and I Want to Die': Untreated Psychosis, Self-Stigma, and the Ethical Imperative for Early Therapeutic Engagement in Schizophrenia.'** ***Journal of Psychiatric and Mental Health Nursing 33*****(4), 565–566.**

Sexual Offenders

Ana, R. C., et al. (2026) **'The Person Behind the Crime: Life Stories of Women and Men Who Committed Sexual Crimes.'** ***Sex Abuse 38*****(6), 707–731.**
Research on individuals convicted of sexual crimes has focused mainly on risk factors and recidivism. Less attention has been given to how these individuals construct meaning around their life trajectories. This qualitative study explores and compares the life narratives of men and women convicted of sexual crimes. Semi-structured life story interviews were conducted with 11 incarcerated individuals: 4 women and 7 men. Data were analyzed using narrative analysis. Five central narrative themes emerged across

participants: family, reclusion, intimate relationships, crime, and substance abuse. Participants described adverse family experiences, relational instability, and ambivalent perceptions of imprisonment. Narratives also revealed a tendency to minimize or avoid direct discussion of sexual offending, while constructing a positive and prosocial self-image oriented toward change and reintegration. Gender differences were observed in identity construction and life trajectories. These findings underscore the importance of narrative identity in understanding individuals convicted of sexual crimes. The results highlight the need for gender-sensitive, narrative-informed assessment and intervention. Integrating individuals? dominant narratives into rehabilitation may help reconstruct identity, improve responsiveness to treatment, and support more effective reintegration.; Research on individuals convicted of sexual crimes has focused mainly on risk factors and recidivism. Less attention has been given to how these individuals construct meaning around their life trajectories. This qualitative study explores and compares the life narratives of men and women convicted of sexual crimes. Semi-structured life story interviews were conducted with 11 incarcerated individuals: 4 women and 7 men. Data were analyzed using narrative analysis. Five central narrative themes emerged across participants: family, reclusion, intimate relationships, crime, and substance abuse. Participants described adverse family experiences, relational instability, and ambivalent perceptions of imprisonment. Narratives also revealed a tendency to minimize or avoid direct discussion of sexual offending, while constructing a positive and prosocial self-image oriented toward change and reintegration. Gender differences were observed in identity construction and life trajectories. These findings underscore the importance of narrative identity in understanding individuals convicted of sexual crimes. The results highlight the need for gender-sensitive, narrative-informed assessment and intervention. Integrating individuals? dominant narratives into rehabilitation may help reconstruct identity, improve responsiveness to treatment, and support more effective reintegration.

Grace Stewart (née Nock), et al. (2026) **'The Lived Experiences of Men Who Engage in Online Child Sexual Exploitation and Abuse: An Interpretative Phenomenological Analysis.'** ***Sex Abuse 38*****(5), 593–625.**

Online child sexual exploitation and abuse (OCSEA) is a complex and multifaceted form of offending that continues to increase in prevalence. Our understanding of OCSEA is challenged by evolving technologies, low rates of detection, and limited understanding of the aetiological pathways to engaging in this behaviour. The current study aimed to deepen our understanding of the aetiology of OCSEA through qualitatively exploring the lived experiences of nine men referred to New Zealand community treatment providers for OCSEA behaviours. Using Interpretative Phenomenological Analysis, men's life stories were examined across the lifespan, including childhood, pre-offending, offending, and post-offending timeframes. Five superordinate themes were developed. These described the impact of the men's developmental environment on their understanding of healthy relationships; the desire for connection and feelings of not belonging; difficulties in coping with negative emotions; escalation of both legal and illegal sexual behaviours; and factors associated with ceasing offending. The application of findings to the prevention of OCSEA are considered and directions for future research are discussed.

Technology

Ashworth, G., et al. (2026) **'Ethical Issues in the use of Electronic Monitoring (Global Positioning System 'Tracking' Technology) in Forensic Mental Health Settings – A Four Principles Approach.'** ***Med Sci Law 66*(3), 254–262.**

Electronic monitoring ('tracking') of individuals has been used in the UK criminal justice system for over three decades, and its use is increasing. Electronic monitoring has more recently been implemented in forensic psychiatric services, which has generated considerable debate about the appropriateness of its use in clinical settings, and about legal and ethical concerns. The purpose of this article is to formally address the ethical issues that arise from using electronic monitoring in forensic psychiatry. These issues are considered using the Four Principles approach to medical ethics, namely autonomy, beneficence, non-maleficence, and justice. We conclude that by adopting a patient-centred approach, where informed consent is sought, and the patient's best interests remain central to the decision-making process, electronic monitoring is both ethical and justifiable. More robust studies are required to develop standardised clinical guidelines for the use of EM in forensic psychiatry, and to apply the theory of patient-centred, consent-driven care to practice.

Violence

Anggraini, Y., et al. (2026) **'Psychiatric Nurse-Led Assertiveness Therapy: A Standardized Protocol for the Reduction of Violent Behavior in Schizophrenia.'** ***Issues in Mental Health Nursing 47*(6), 647–657.**

Duivesteyn, C., et al. (2026) **'Aggression Management in Mental Health Settings: The Impact of Dynamic Appraisal of Situational Aggression (DASA) and Aggression Prevention Protocol (APP) Interventions.'** ***International Journal of Forensic Mental Health 25*(3), 236–243.**

Restraint and seclusion in psychiatric settings is associated with physical and psychological harm to patients and staff. Leveraging a dynamic aggression risk assessment instrument with targeted violence prevention can reduce aggression and restrictive practices in mental health. This study aimed to investigate the use of a predictive instrument with an aggression prevention protocol to reduce aggressive incidents. The Dynamic Appraisal of Situational Aggression (DASA) instrument assessed the risk of imminent aggression in psychiatric inpatients, and the Aggression Prevention Protocol (APP) provided staff with evidence-based interventions to reduce violence risk. DASA + APP were incorporated into standard practice within forensic and general adult inpatient units. The Modified Overt Aggression Scale (MOAS), restraint/seclusion events and *pro re nata* (PRN) medication were used to measure the impact of the intervention. Feedback was obtained from nursing staff to assess the feasibility and perceived utility of the intervention. There were significant reductions in average MOAS scores (pre=1.56, post=0.80, $p = 0.007$) and PRN medication administration (pre=4.14, post=3.63, $p < 0.01$). Restraint/seclusion events declined by 26% and seclusion hours by 51%. Staff perceived DASA as an

objective, standardized communication tool; APP supported the least restrictive practices. This study supports the use of DASA + APP to identify the risk of aggression and guide proactive, individualized intervention. DASA + APP was effective in forensic and non-forensic units. Ongoing integration into clinical practice may enhance patient outcomes, staff satisfaction and treatment efficacy.

Liu, L., et al. (2026) **'Divergent Effects of Communication Skills on Aggression among Justice-Involved Youth with and without ADHD: A Propensity Score Matching Analysis.'** ***Criminal Justice and Behavior 53*****(7), 1000–1017.**
Higher rates of aggressive behavior have been reported among youth with attention-deficit/hyperactivity disorder (ADHD) compared to their peers without ADHD. However, it remains an under-explored question whether protective factors against aggression operate differently for youth with and without ADHD. Drawing on 10 years of statewide longitudinal data, this study examined communication skills as a protective factor against aggression for justice-involved youth with and without ADHD. Propensity score matching was used to minimize the difference in 20 observed covariates to increase the rigor of the estimates. We found significant protective effects of communication skills on aggression among justice-involved youth in juvenile justice residential facilities. Furthermore, youth with ADHD received amplified protective effects of communication skills. Our findings provided important implications for prevention and intervention.; Higher rates of aggressive behavior have been reported among youth with attention-deficit/hyperactivity disorder (ADHD) compared to their peers without ADHD. However, it remains an under-explored question whether protective factors against aggression operate differently for youth with and without ADHD. Drawing on 10 years of statewide longitudinal data, this study examined communication skills as a protective factor against aggression for justice-involved youth with and without ADHD. Propensity score matching was used to minimize the difference in 20 observed covariates to increase the rigor of the estimates. We found significant protective effects of communication skills on aggression among justice-involved youth in juvenile justice residential facilities. Furthermore, youth with ADHD received amplified protective effects of communication skills. Our findings provided important implications for prevention and intervention.

Mackie, P., and Olver, M. E. (2026) **'The Discrimination and Calibration Properties of the Violence Risk Appraisal Guide–Revised (VRAG-R) in a Sample of Canadian Prairie Forensic Inpatients.'** ***Criminal Justice and Behavior 53*****(8), 1083–1100.**
This study examined the discrimination and calibration properties of Violence Risk Appraisal Guide–Revised (VRAG-R) scores and risk bins in a sample of 124 forensic psychiatric inpatients found Not Criminally Responsible on Account of Mental Disorder (NCRMD) or Unfit to Stand Trial (UST), admitted under Saskatchewan Review Board jurisdiction during a 38-year catchment period. The VRAG-R was scored on all NCR and UST individuals from file, and recidivism data were obtained via official criminal records. The VRAG-R demonstrated strong discrimination properties for general and violent recidivism over 3-year, 5-year, and overall follow-ups. Calibration analyses revealed that VRAG-R recidivism norms tended to estimate higher rates of recidivism than actually observed. Overall, the results supported the

use of the VRAG-R for psychological risk assessments with a population of persons found NCRMD; however, it should be a multi-measure process that involves other empirically validated tools.

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