# A Return to Rawls: Applying Social Justice to Mental Health Provision in the Youth Offending Service

Jessica Urwin

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# Contents

List of Diagrams and Tables

## Glossary

The following are commonly used abbreviations and terms throughout the thesis. As there is not always consistency of usage of terms within the literature it was necessary to clarify their usage in this work, especially as some terms are used interchangeably in other works, but have a specific meaning here.

| Term/ Abbreviation | Full Name | Meaning |
|---|---|---|
| ADHD | Attention Deficit Hyperactivity Disorder | A group of behavioural symptoms characterised by impulsiveness and hyperactivity. |
| Asset | - | An assessment tool used by YOTs, created by the YJB. Covers factors relating to a young persons' offending, including family, education, mental health, drug and alcohol use etc. |
| Asset Plus | - | A newer variation of the Asset, which has not yet been fully rolled out across the YOS. |
| CAF | Common Assessment Framework | A standardised assessment format for assessing the needs of young people. |
| CBT | Cognitive Behavioural Therapy | A psychological approach that links thought processes with behaviours. It is one of the more popular approaches for treatment of affective disorders. |
| CAMHS | Child and Adolescent Mental Health Services | Specialist services for the treatment of young people's mental health. |
| CPN | Community Psychiatric Nurse | Trained mental health nurses who work within the community, they may see and assess people in their homes rather than a hospital. CPNs often work with the police, CAMHS, and YOTs. |
| EMDR | Eye Movement Desensitisation and Reprocessing | A therapeutic approach that assumes bad memories are the cause of trauma. Often used in PTST treatment. |
| MAPPA | Multi-Agency Public Protection Arrangements | A statutory arrangement in which authorities must work in partnership to address offending and other behaviours, which affect public protection. |
| Mental Health Worker | - | A mental health specialist. This term covers CPNs, psychologists, CAMHS staff etc. |
| PSR | Pre-Sentence Report | A report that must be completed by youth justice workers to inform magistrates about what sentence may be appropriate for a young person. |
| PTSD | Post-Traumatic Stress Disorder | A psychological condition in which a person feels prolonged distress or anxiety following a traumatic or stressful experience. |

| | | |
|---|---|---|
| SCH | Secure Children's Home | Secure residences for children and young people who are at high levels of risk and require specific care. |
| SDQ | Strengths and Difficulties Questionnaire | A psychological assessment tool, designed for used with young people |
| SIFA | Screening Interview For Adolescents | A YJB approved mental health assessment, to be used by mental health workers in the YOS. |
| SQIFA | Screening Questionnaire Interview For Adolescents | A YJB approved mental health assessment, to be used by youth justice workers. |
| SST | Soft Systems Thinking | A methodological approach created by Peter Checkland, to approach and understand problems and find a practical solution. |
| YJB | Youth Justice Board | The authority that oversees youth justice in the UK. |
| YJW | Youth Justice Worker | A member of a YOT who works directly with young people. Youth justice workers are not specialists in a particular area (excluding youth justice) and may or may not have professional training. |
| YOS | Youth Offending Service | All Youth Offending Teams comprised to make the service as a whole. The term service will be used to discuss aspects that affect all YOTs, not depending on area, such as YJB guidelines or statutory requirements. |
| YOT | Youth Offending Team | A self-contained team set up in a specific area to address youth offending. Comprised of youth justice workers, managers, a head of service and representatives of other agencies, such as CAMHS. YOTs are governed by local authorities and the YJB. |

## Abstract

Mental health services provided through the Youth Offending Service (YOS) are inadequate to meet the needs of young offenders. The differing viewpoints of mental health and criminal justice are not incompatible, but require consideration in terms of how to work together. This has not occurred within youth justice, and there are tensions between the YOS and CAMHS. If the YOS structure better allowed for social justice approaches to occur within practice, these tensions could be avoided and the needs of young people better met. This research looked at the ways in which provision of mental health services impacts upon social justice within the YOS. A case study was constructed looking in detail at mental health provision, the challenges faced by mental health workers and their ability to overcome these problems. Mental health workers and managers within the YOS were interviewed to construct the case study. From this a number of issues were identified within practice that impact upon social justice, and how some youth offending teams had overcome them. From this both long and short-term suggestions and strategies for practice have been created to improve levels of social justice within youth justice practice.

## Introduction


## Research Context

Following the 1998 Crime and Disorder Act (Home Office, 1998), youth justice in England and Wales was reformed into a new system, the Youth Offending Service (YOS). The service is comprised of multi-agency Youth Offending Teams (YOTs) within each local authority area that work with young offenders in the community to ensure that the orders or restrictions mandated by courts are maintained, and to lessen the risk of re-offending. YOTs were created within a context of developing multi-agency working, due to the complex needs of young offenders (Holdaway et al., 2001). The overall aims of the YOS, as stated by the Youth Justice Board (YJB) are:

> "We work to prevent children and young people under 18 from offending or re-offending. We ensure custody is safe and secure, and addresses the causes of their offending behaviour." (Youth Justice Board, 2011a)

Due to a localist agenda, YOTs were given the power to recognise which resources were most necessary within their area and commission services accordingly (Yates, 2012). Within YOTs there may be a combination of youth justice workers, intensive surveillance and supervision (ISS) workers, police, and others, all of whom manage the offending behaviours of young people, and the needs of the criminal justice system. Whilst the YOS is primarily a criminal justice organisation, it is required to attend to the welfare needs of young people also. One reason for this is that all work involving children and young people must meet the requirements of the Children Act (Home Office, 2004), which specifies that children or young people in need must be given access to care. To support the delivery of welfare care to young people many YOTs have a number of staff who are specialists in particular aspects of social or welfare needs. This can be school liaisons, healthcare specialists, housing officers, and mental health workers.


As can be seen in its aims and purpose, the YOS is committed to reducing re-offending. Whilst there is not a causal link between welfare needs and re-offending behaviours, there is a strong correlation between the two (Myers and Farrell, 2008; Putnins, 2002; Webster, 2006; Williams et al., 2010; Young and Thome, 2011). Young people with unmet welfare needs are more likely to re-offend (McAra and McVie, 2007; Muncie, 2006a; Smith, 2005; Webster, 2006). Mental health issues are common amongst young offenders (Anderson et al., 2004; Burnett-Zeigler et

al., 2012; Harrington et al., 2005; Leon, 2002; Townsend et al., 2007; Wong et al., 2013), and are particularly so amongst those who are persistent young offenders (Carswell et al., 2004; Harrington et al., 2005; Mitchell et al., 2011). To address these needs, thus providing care and potentially addressing the cause of individuals offending behaviour, the YOS has a statutory requirement to provide mental health care.

The creation of YOTs promoted multi-agency practice and this has developed further, through 'joined-up working' initiatives, and the support of practice sharing (Burnett and Appleton, 2004; Robinson and Cottrell, 2005). However, this approach has not been co-ordinated or guided by the YJB, which led to confusion about its implementation (Holdaway et al., 2001; Khan and Wilson, 2010). Multi-agency partnerships were particularly encouraged between the YOS and mental health services, as there was a large amount of evidence for young offenders having a high level of mental health need (Anderson et al., 2004; Carswell et al., 2004; Harrington et al., 2005; Khan, 2010a; Leon, 2002; Marshall et al., 2011; Nicol et al., 2000; Stallard et al., 2003; Walsh et al., 2011; Williams et al., 2010). The YOS were required by the YJB to provide for these issues, however, the nature of this multi-agency approach was not clarified, meaning that differences in provision occurred between YOTs, and that young offenders were not receiving an equal service.

YOTs must have some provision for mental health care. YOTs can decide what mental health provision is most suitable within their local authority and structure it as they wish. However, Khan and Wilson (2010) found that six distinct types of provision reoccur throughout the country. By surveying every YOT in England and Wales regarding their mental health provision, Khan and Wilson found that many YOTs used the same strategies in commissioning and structuring provision. This often relied on seconding mental health workers from local Child and Adolescent Mental Health Services (CAMHS). Of the six types of provision they found, there were differences in the level of resources, views of mental health work, and approach to commissioning services, which created differences in practice. The six types of provision are:

- **Lone Worker**: A single mental health worker seconded from CAMHS into the YOT.

- **Foot-in-Foot-out**: Either one or two mental health workers spending equal amounts of time in the YOT and CAMHS.

- **Health Team Within a YOT**: Two or more mental health workers form part of a team of other welfare and health workers who work directly within the YOT to deliver an integrated service.

- **Outreach Consultative**: Two or more mental health workers split the area into manageable sections to refer young people to local services or deliver interventions. Usually found in large, rural settings.

- **Virtual Locality**: Two or more mental health workers directly deliver services, but also work closely with voluntary or community organisations and CAMHS to find specialised help for young people.

- **External One Stop Health Shop**: A specialised team of mental health workers who are separate from the YOT and CAMHS, but directly serve the YOT through delivering assessment and interventions to referred young people.

Khan and Wilson's work was the first to establish what mental health provision existed within the YOS. There were no evaluative aspects to their work, and the question still remains regarding which of these forms of provision is the most appropriate within practice.

Youth justice workers can refer young people to mental health professionals within the YOS for assessment, and tools and guidance to aid this have been developed. The role of mental health workers within the YOS is to assess young people for mental health need, and refer them to specialist services if necessary. However, work into the provision of mental health services has shown that this is not always the case in practice, and mental health workers often carry out mental health interventions (Callaghan, Young, et al., 2003; McClelland and Cavanagh, 2009). In some cases it has been found that mental health workers were expected by YOTs to carry out the same role as youth justice workers (Nacro Cymru, 2009). There are tensions between welfare and youth justice workers within the YOS, including mental health workers (Smith, 2005). It is clear that further questions need to be answered regarding the how the provision of mental health services within the YOS can meet the needs of young people.

## The Problem Situation

The phrase 'problem situation' is rooted in Soft Systems Thinking (SST), which was created by Checkland (1999). This approach deconstructs a problem, allowing underlying theoretical aspects to emerge, and specific steps to be taken to understand why the problem has occurred and how it can be overcome to achieve a specific goal which is currently prevented by the problem situation (Checkland and Tsouvalis, 1997; Tsouvalis and Checkland, 1996). SST has been used within the analysis of this work (*See Page 88*), and also to structure the presentation of the completed thesis (*See Page 10*). The term 'problem situation' recognises that issues within existing systems or structures are not necessarily cohesive, simple, or purposefully created. Problems are situational, they are a combination of factors that may change depending on the context, actors, and what is trying to be achieved. Thus the various aspects that contribute to a problem should be considered within the context they occurred in. In this work, the problem situation is that the mental health needs of young offenders are not met by the provision supplied by the YOS. This specific situation takes place within a larger context of conflict between social and criminal justice within the YOS.

Youth justice aims to achieve both social and criminal justice (Cook, 2006; Youth Justice Board, 2011a), however, it has not balanced these two philosophical perspectives, which can lead to tensions within practice (Cook, 2006; Muncie, 2006b; Van Soest, 1994). Requiring YOTs to provide mental health care caused these underlying issues to become explicit. Mental health services are voluntary, whereas criminal justice is mandatory. This exemplifies a number of contrasts between the two services; mental health work often views service users as active participants with a high level of agency and control over their treatment, whereas within criminal justice, young people are often powerless, with little to no control over their treatment. There are elements of both care and control within each discipline (Corrigan and Wassel, 2008; Donoghue, 2011), and the contrasts that are created are broadly similar to the contrasts between criminal and social justice. Neither approach is incorrect, particularly when considering the aims of each system, however, it has been posited that criminal and social justice are linked, and neither one can be truly achieved without the other (Cook, 2006; Fourie, 2006). As the YOS must cater to both criminal justice and mental health needs, it must be seen how it reconciles or balances the two perspectives.

The YOS has been the subject of criticism in terms of meeting the needs of young people, and the needs of criminal justice (Bailey, 1996; Bateman, 2011; Goldson, 2011; Smith, 2010; The Howard League for Penal Reform, 2011a). These criticisms often state that the service is not reducing recidivism (Myers and Farrell, 2008), is failing to deal appropriately with young offenders (Goldson, 2000a), or is not meeting the welfare needs of young people (Patel et al., 2007). Mental health needs are common amongst young offenders (Burnett-Zeigler et al., 2012; Carswell et al., 2004; Nicol et al., 2000; Patel et al., 2007), and whilst estimates vary as to the extent of this, evaluations show that anywhere between 12% and 90% of young offenders mental health needs are not met by the YOS (Anderson et al., 2004; Centre For Social Justice, 2011; Marshall et al., 2011; Rawal et al., 2004; Townsend et al., 2007; Vostanis, 2007). It has been suggested that this problem may be due to the objectives and purpose of the YOS itself, with a focus upon outcomes and continually changing guidelines for 'best practice' (Hope, 2005; Newnham and Page, 2010). Cultural tensions between the two professions have also been given as a reason for the problems (Artaraz, 2006; Ellis and Boden, 2000; Myers and Goddard, 2012). The Ministry of Justice and YJB value research that gives clear distinct answers and solutions opposed to theoretical discussions about why something isn't working. This is due to larger cultural changes in policy that value 'evidence-based' and 'what works' approaches (Burnett and Roberts, 2004; Prior and Mason, 2010). In overlooking or underrepresenting the value of the philosophical approaches that underpin the frameworks of the YOS, fundamental structural problems within the YOS may go unconsidered and uncontested, such as the tensions between social and criminal justice. If left unresolved, these tensions will reoccur in practice, as there is not a clear philosophical approach or reasoning behind the way decisions are made. This leaves practitioners to exercise their professional judgement without a defined standard or approach. This could lead to inconsistencies in practice, and young offenders needs going unmet.

In some YOTs, the structure and function of a partnership with mental health services was given lots of consideration, including more philosophical aspects such as how welfare workers from a social justice background would fit into a criminal justice organisation. In other areas this did not occur and tensions between the two approaches became noticeable. The differences between social justice and criminal justice and the conflicts between them are well documented, particularly within the YOS (Brocato and Wagner, 2003; Nacro Cymru, 2007; Smith, 2005).

However, there have not been efforts to resolve this issue and create balance between social and criminal justice, allowing mental health practice to occur within YOTs in a way that satisfies the aims of both organisations, and meets the needs of young offenders.

As the YOS works with children and young people, it has an obligation to meet their needs and provide care to the standards outlined in the Children Act (Home Office, 2004). Yet simultaneously, the YOS also has to deliver sanctions to the same group of young people, as their actions have broken the law. Balancing these two aspects is a fundamental problem within youth justice, and causes tensions within practice. Balancing social justice and a duty of care with criminal justice and a need for punishment is difficult, and to occur successfully, consideration of the philosophical aspects of both these concepts is required. Whilst it may be thought that social and criminal justice are anathema (Downes and Hansen, 2006), this is not the case. Social and criminal justice can actually support each other, ensuring that criminal justice is delivered fairly, but also that social justice recognises and acts upon wrong doing (Cook, 2006). Social and criminal justice are dimensions that co-occur in a variety of combinations as can be seen in Diagram 1.1. At present there is a concern that criminal justice may be overriding social justice, and that the welfare needs of young people are not being met (Goldson, 2011; Léveillé and Chamberland, 2010; Muncie, 2008; Pitts, 2003), as represented by 'overlooked needs' quadrant of Diagram 1.1. Not only is this a concern due to the lack of social justice, but also because meeting needs is a potential way to reduce reoffending (Abrams, 2005; Centre For Social Justice, 2010; Myers and Farrell, 2008). It cannot be said with certainty what causes criminal behaviour, but there is a substantial body of evidence showing that young offenders have a complex number of interlinked welfare needs, that are not necessarily present amongst young people who do not offend (Carswell et al., 2004; Law et al., 2009; Liebenberg and Ungar, 2014; Vostanis, 2007). Additionally, young offenders who have had their welfare needs met are less likely to reoffend (Barry, 2010; Phoenix, 2009; Pullmann, 2006). As the aims of the YOS specifically state that preventing re-offending is part of the organisation's purpose, there must be a specific strategy to achieve this. Meeting the welfare needs of young offenders is currently the most valid approach to addressing the criminogenic needs of young people, but requires the two approaches to be balanced.

This work, by looking at the underlying philosophical structures of the YOS and their relation to practice, hopes to find ways to help youth justice to move into the 'balance' quadrant of

Diagram 1.1, where both social and criminal justice are represented equally. Whilst other research has established that this is a problem within the YOS (Bradt and Bouverne-De Bie, 2009; Downes and Hansen, 2006; Fergusson, 2007; Goldson, 2000a; Muncie, 2006b; Smith, 2011), there have not been substantive efforts to balance the two philosophical perspectives in a way that would allow practice to improve.
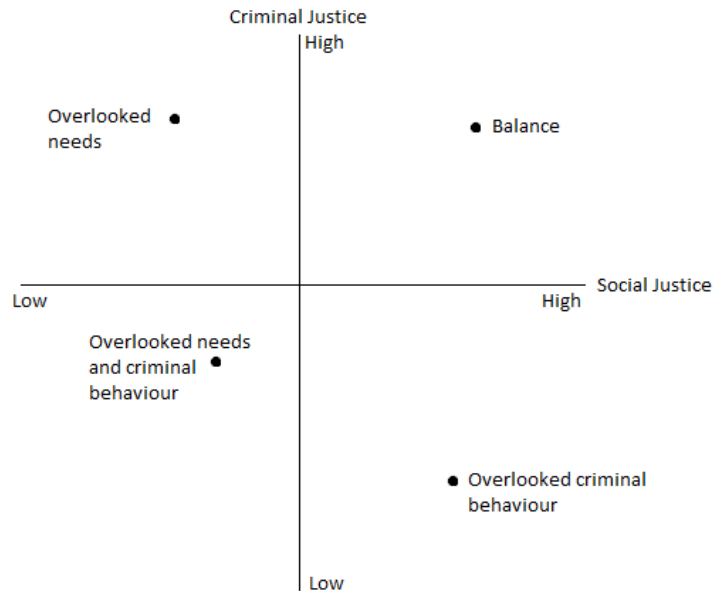


Diagram 1.1: Matrix of Social and Criminal Justice

It is likely that the structural and organisational issues within the YOS are contributing factors to its failure to meet the needs of young people. As changes to the YOS have focused upon practice (Archer, 2013; Blyth, 2005; Newnham and Page, 2010), and not elicited the desired change, this suggests that practice itself is unlikely to be the cause of the problems, but that the underlying structures may be. The philosophical basis of the YOS is a combination of social and criminal justice, however, the relationship between the two has not been clarified, or made explicit. Having a clear philosophical basis for work is necessary as it creates guiding principles for practice, allowing decisions made within an organisation to be consistent, working towards the same aim and bounded by the same philosophical constraints. Because the relationship between social and criminal justice has not been clarified within the context of the YOS, practitioners do not have a unified approach, meaning that tensions between the two approaches have arisen. Multi-agency practice makes these underlying tensions explicit, and the decision to ensure all YOTs provide for mental health care has made the issues that arise from these tensions more prominent in practice. This makes it necessary for research and work discussing youth crime to consider the underlying reasons for problems and how these might relate to the

structure of the YOS itself. By doing so the solutions created may be more effective in helping the YOS achieve its aims. Whilst these solutions may be difficult to implement, and structural change on a large scale is always complex, it is clear that there needs to be a different approach within youth justice as the current service is struggling.

Finance is always a concern for an agency like the YOS and at present there are cuts occurring across the service (Commons Select Committee, 2013). This makes it a time when change is both desirable and possible due to restructuring occurring anyway, but also limited as resources levels are being lowered. One of the main problems with change within the YOS is that it is not working towards a clear goal in terms of practice. The present changes are occurring based purely upon cost-effectiveness, as can be seen in the move towards payment by results (Fox and Albertson, 2011; Yates, 2012). Changes within the YOS tend to be geared towards either short-term goals often in the form of set targets, or under defined long term goals such as improved efficiency. Whilst it may be currently unaffordable, having something concrete to aim towards as a service other than 'reduced youth crime' is useful as it gives a more coherent direction and purpose.

**Aim and Significance of the Research**

This research aims to investigate the relationship between social and criminal justice within the context of mental health work within the YOS. This will give a greater understanding of why mental health services provided within the YOS are not meeting the needs of young people. The relevance of this work is timely, as youth justice is currently facing a number of changes (Baker, 2014; Fox and Albertson, 2011). That mental health provision within the YOS is being criticised (Colombini et al., 2013; Harrington et al., 2005; Muncie, 1999) also means that there is a need for better understanding of what causes problems within practice. Framing this issue in terms of the structure of provision is useful because research has already considered that the problems are due to processes within youth justice (Crawford and Newburn, 2013; Crossley, 2012; Sutherland, 2009; Townsend et al., 2010), but change has not occurred. Therefore, considering the larger context of how provision is created and structured may find new information.

Previous work in this area identified six types of provision (Khan and Wilson, 2010), however, evaluation of their efficacy or applicability did not take place. Additionally, there has not been any investigation into how these types of provision have been affected by changes within the YOS, or if they are still present within practice. This work rectifies this, by trying to find these forms of provision in current practice, and evaluating them in terms of their ability to enable social justice to be balanced with criminal justice and achieve the aims of the YOS. The interpretation of social justice used within this work is that of John Rawls (Rawls and Freeman, 1999; Rawls and Kelly, 2001; Rawls, 1971, 2007). Whilst Rawls's work is highly influential, it has not been widely applied, largely due to other interpretations of social justice being seen as more practical (*See Literature Review for more detail*). This work argues that Rawls's theory of justice is applicable, specifically to the context of structuring institutions or organisations, creating a socially just base for practice.

## Structure of the Thesis

To ensure that the research is presented in a clear and understandable way, Soft Systems Thinking (SST) has been used to help structure the presentation of the thesis. SST is primarily used as a research approach, and has been used in the analysis of this work (*See Page 88*). SST approaches issues through a series of seven logical stages.

1. Identify a problem situation

2. Expand upon the problem situation to understand why it has occurred

3. Consider what actions the system is ultimately trying to achieve.

4. Create an idealised version of what the system would look like if this action were carried out.

5. Contrast the idealised system with reality.

6. Clarify what changes are required to bring the current system closer to this ideal.

7. Identify specific steps to enact these changes.

When taken as a research methodology, each stage of SST acts as an aspect of the research, ensuring there is a clear structure to the work, and that it considers theoretical aspects of the issue, but also creates practical solutions to the initial problem situation (Tsouvalis and Checkland, 1996). These stages also correspond to different sections of the written report of research, which is how they have been used in this work. SST utilises diagrams or 'rich pictures' (Checkland and Scholes, 1990) to convey the detail of a structure, and help clarify the overall SST process. A version of an SST 'rich picture'; Diagram 1.2, acts as a 'map' of the research, presenting a condensed version of each process that has occurred in the research, and acting as a guide to the chapters of the thesis text. Below, each chapter of the thesis is described, including which stages of the SST process and corresponding aspects of the map it relates to.

Diagram 1.2: Map of Research

**1** PROBLEM SITUATION
Young offenders mental health needs are not met by the YOS

WHY?

**2** VB YOT / CAMHS Where Young Minds Matter

Problem situation = Culture

Problem situation → Tasks and Issues

How can we fix it?

**3** PURPOSEFUL ACTIVITY
Practice strategies for the YOTs to meet young offenders needs with current resource levels and staff provision in order to reduce offending by helping young people

How would this look?

PRACTICE / THEORY

C: Young offenders and YOT staff
A: YOS staff and managers
T: Needs unmet —> Needs met
W: Meeting needs can reduce offending
O: Operational management,
E: Limited resources, constant change

12

**4** Level A: Youth justice workers

1) Appreciate resources and structures in the YOS
3) Decide on resources needed and how they fit into the system
5) Carry out mental health work
2) Describe the scope of mental health need
4) Create provision and guidelines for a multi-agency approach

6) Define outcomes
7) Monitor 1-5
8) Modify strategy and approach

Level B: Managers

Level C: YJB

9) Appreciate aims of system: is crime reduced?
10) Define performance measures
11) Monitor 1-8
12) Take control action

**5** Statutory Requirement for mental health

YOTs create provision within their teams.

Used CAMHS input to structure provision
- Low Resources: Virtual Locality Outreach Consultative
- High Resources: External One-Stop Health Shop

Didn't use CAMHS input to structure provision
- Low Resources: Lone Worker Feed-In Feed-Out
- High Resources: Health Team With In a YOT

MENTAL HEALTH WORK HAPPENS

Effective Working → Reflective process

Change

Issues arise
- Addressed → Solutions found and implemented
- Not Addressed → Offenders needs not met
- Solutions found but not implemented

Offenders Needs Met

Compare to real world

PRACTICE / THEORY

What changes are needed?

**6**
- Guiding principles based on social justice
- Need to balance social and criminal justice
- Improved accountability

How is this done?

STRATEGIES
- Training
- Working contracts
- Joint supervisions

**7** SUGGESTIONS
- Baseline provision
- Improved guidance
- Structure between agencies

*Chapter 1, Stage 1: Introduction, The Problem Situation*

The first section of the thesis introduces the problem situation that the research aims to address; that the mental health needs of young offenders are not met by the provision within the YOS. It also introduces the concept that this problem situation has arisen due to philosophical tensions between social and criminal justice, and undefined nature of the role of each within the practice of the YOS. This section also describes the structure of the work and gives readers an overview of the thesis as a whole.

*Chapter 2, Stage 2: Literature Review, The Problem Situation Expressed*

The literature review expresses the problem situation in detail, taking into account the context and systems in which the problem occurs, the actors in the situation, and what information needs to be gained to find a resolution to the problem situation. The literature review considers differing perspectives of social justice, and which is most appropriate to underpin social justice in the YOS. John Rawls's theory of justice as fairness (1971) is introduced here, which is a central text to this work. It also discusses the history of, and current practice within the YOS, establishing the tensions that have arisen in practice due to the lack of philosophical balance. As mental health work within the YOS is the specific example of these debates used within this research, the underlying approach of mental health is considered, in addition to how it has been adapted within the YOS. The second central text is introduced in the literature review, Khan and Wilson's (2010) investigation into the forms of mental health provision that occur within the YOS. The rationale discusses how these strands of literature clarify the problem situation, and how they are to be used within this work.

*Chapter 3, Stage 3; Method, Defining Purposeful Activity*

This section describes the approach of the research, explaining the reasons why a social constructionist case study approach has been chosen, and how data collection was carried out. This section also defines what purposeful activity would be regarding mental health work within the YOS. The importance of this is because the research was trying to find examples of this purposeful activity in practice, and to understand why it is not achieved universally. This section also discusses how the Equality and Need principles, which have been adapted from Rawls's for this work, exemplify the socially just practice the case study is trying to find.

*Chapter 4, Stages 4, 5, and 6; Findings, Conceptual Models, Contrasts, and Suggestions for Change*

The findings of the case study are presented in this chapter, and are broken down into a number of sections. Firstly evidence supporting the forms of provision theorised by Khan and Wilson (2010) is presented. As this is part of the philosophical framework of the research, establishing its continued relevance and applicability was essential. Secondly, the findings of the case study are presented, and the model of the YOS that they created. This model explains the problems facing the YOS at present, and how social and criminal justice occur within, and affect, practice. Thirdly, the conceptual model of the YOS is presented. This model was created based upon SST approaches, and the principles of social justice adapted from Rawls (1971). This acts as the idealised version of the YOS that is used as a contrast in the fourth part of the findings. Finally, based upon the comparison of the two models, and the findings from the case study, suggestions and strategies for practice are presented.

*Chapter 5, Stage 7; Discussion, Application of Changes*

This section of the thesis considers the findings and suggestions for change in terms of the overall context of the YOS, and if what has been found resolves the problem situation. This section also furthers the argument that the philosophical issues that underlie the YOS require consideration by those holding authority over the system as a whole. Here the usefulness of applying Rawls's philosophical approach to social justice to the YOS is also considered. As social and criminal justice need to be balanced within the YOS, Rawls's theory will only be acceptable in this situation if it achieves balance. Social justice should not be promoted at the expense of criminal justice within a criminal justice organisation. Khan and Wilson's forms of provision are also reconsidered, in light of the findings, recommendations can be made regarding which are most appropriate for practice, and if this is possible given the various constraints of the YOS.

*Chapter 6; Conclusion, Is the Problem Situation Resolved?*

Whilst this is not a formal stage of SST, the final aspect is to consider the solutions and actions that have resulted from the process, and if they resolve the problem situation. This is considered in the conclusion of the thesis, along with a discussion of how successful the research was in achieving its aims, what new information has been found, and how this contributes to broader knowledge.

**<u>Literature Review</u>**

## Overview

This chapter introduces the key pieces of literature that have informed the research, and also considers the wider literature on this subject. There are five sections within the literature review, four of which discuss literature on a particular theme. The first section discusses social justice. Considered here are historical perspectives on justice, and how they have informed contemporary thinkers, particularly John Rawls. Rawls's theory is discussed in detail, including criticisms and competing theories. The argument that this theory could be applied to specific institutions is introduced here. The second section discusses the history and practice of youth justice following the 1998 Crime and Disorder Act. Problems within youth justice are discussed, as are trends in practice, and the place of welfare within a criminal justice organisation. The third section discusses mental health wok within youth justice. This gives greater insight as to why difficulties exist between mental health workers and youth justice. This section also establishes the relationships between mental health practice and social justice. The fourth section looks specifically at the provision of mental health services within the YOS, and introduces the work of Khan and Wilson (2010). Khan and Wilson found six distinct forms of mental health provision within the YOS, which are outlined here. The fifth section, the rationale, brings the themes together and discusses how the literature has informed and shall be used in this research.

## Social Justice

"Sir, I say that justice is truth in action." Benjamin Disraeli (1882: 182)

Justice plays a large and vital role in our society, however, defining justice is difficult. Philosophers have considered the problem of justice since antiquity, and there is not a single, universally supported understanding of justice. Different forms of justice have been theorised, which has allowed more concrete understanding to occur. Criminal justice sanctions those who have broken the law, distributive justice creates systems for the sharing of resources. Some forms of justice are still contested and the subject of debate; social justice is one of these. Social justice relates to the wellbeing and equality of citizens; how the state should treat those who uphold the law. These various forms of justice are all interlinked, and together create an overall

'justice'. The relationships between the different forms of justice are not always clear though and require further exploration.

"A Theory of Justice" (Rawls 1999) revolutionised political philosophy and popular views about justice (Lovett, 2011). Until that point, utilitarianism, based on the achievement of the greatest happiness for the greatest number of people, had been the main theoretical perspective regarding justice. The idea of a new competing theory fuelled debate about what justice is, what place we want it to have within our society and what it should try to achieve. Whilst competing theories have gained in popularity such as libertarianism (which promotes individual freedoms), Rawls's theory; justice as fairness, is still relevant today. Rawls's version of social justice has shaped research, political approaches and the views of professional bodies (Kukathas and Pettit, 1990; Lovett, 2011). It is not without criticism, but this thesis proposes that it is currently the most appropriate philosophical view of justice to frame research and create strategies for progress.

John Rawls was heavily influenced by philosophers such as Kant (1785) and Rousseau (1762), which is evident in the egalitarian nature of his work. By focusing upon the rights of individuals, as opposed to a cost-benefit approach, Rawls immediately eschewed numerous aspects of utilitarianism (Rawls, 1971). An egalitarian, rights based framework is the core of Rawls's theory. To fully understand the work of Rawls, the historical works it draws upon must be considered along with understanding what justice is.

Justice is a multi-faceted concept, and highly dependent upon context. It has been discussed for centuries, with one of the earliest thinkers on the subject being Plato. In "Republic" Plato recounts Socrates's discussions with others about what is fair and just (Plato, 380AD). This included whether the aim of a society should be happiness or freedom, whether individuals are duty bound to help others, if punishment is acceptable, and what forms should it take. Plato decided that the aim of a society should be to promote happiness, whilst acknowledging that happiness is strongly linked to personal development. So the state should provide education, as this will improve people's minds and so make them happier. This view of the state also granted powers of punishment when an individual impedes upon the happiness of others.

It is evident from Plato and Socrates's discussions that justice impacts upon numerous aspects of society and takes different forms depending on context. Criminal justice treats people differently than other forms such as distributive justice or social justice. It is theorised that with higher levels of social and distributive justice, there will be less need for criminal justice; that punitive criminal justice systems overlook social injustices that may lead to crime (Plato, 380AD). There is a need to find a balance between the differing forms of justice that helps to achieve the aims of a society. This can be difficult though, as many aspects of justice are ill defined or contested. Social justice has been broadly described as everyone within a society enjoying the rights and duties of full citizenship (Cook, 2006). It has also been described as everyone having equal access to social opportunities (Commission for Social Justice, 1994). This is often criticised by those who favour a meritocratic approach, which suggests that equal access devalues the efforts of the individual to create opportunity for themselves (Nozick, 1993; Sandel, 2010).

Opposed to this, Rawls takes an egalitarian view, stating that justice is a complex of liberty, equality and reward for services contributing to the common good (Rawls, 1971). This means that in Rawls's view, for something to be declared just, it must not inhibit freedoms, not create inequality and only lead to reward if it is in the interest of the common good. This is quite a strict definition and sets a high standard for justice, which is a main criticism of Rawls's work; that it is too idealistic and inapplicable to the real world (Daniels, 1975; Kukathas and Pettit, 1990). Rawls created two principles of justice, the first being that individuals have a right to the most extensive freedom that is compatible with an equal freedom for all. The second principle is that inequality could affect any position, provided that position is accessible to everyone. These principles require a balance to be found between equality and individual freedom. The principles also require that any necessary inequalities do not always fall upon the same group, who then become underprivileged. These two ideas mean that in Rawls's definition social justice gives freedom from inequality as part of citizenship.

> "First: each person is to have an equal right to the most extensive scheme of equal basic liberties compatible with a similar scheme of liberties for others. Second: social and economic inequalities are to be arranged to that they are both (a) reasonably expected to be to everyone's advantage, and (b) attached to positions and offices open to all." – Rawls (1971: 53)

The rights and duties of citizens are sometimes made explicit through laws, but more often are implicit in the form of social norms. The idea of citizens having certain duties in exchange for certain rights from the state is contractarian. This means that it is based in the idea of a social contract. First suggested by Hobbes (1651), a social contract is an agreement between citizens and their leader (or the state) about what responsibilities each has to the other, so that the society can function and progress. This can be implicit or explicit. Hobbes believed that it was necessary to have a figurehead to act as a leader or representative of the state, so that citizens had an image of a powerful person to whom they owed a duty. Hobbes called this individual a leviathan, and believed that the particular social contract they should impose was a religious one (Hobhouse, 1922). The only way the leviathan could be removed was if they deviated from religious doctrine. In 1651 the church was immensely powerful and had strong ties to the state, so this was accepted. However, as society has progressed, certain thinkers became disillusioned with a religious view of justice. But the idea of a social contract remained and was expanded upon by Rousseau (1762). Rousseau wrote much more explicitly about social contracts than Hobbes, discussing how they could be used to ensure societies were fair, and that the state could be accountable to the people rather than God. Rousseau was dissatisfied with the way the state was run in his native France, considering it to serve the upper classes rather than the people as a whole. In his work, The Social Contract (1762), Rousseau discusses how an agreement between people and state as to what is expected of each, what rewards they may claim, what punishments may be used and when, could lead to a fairer, more equal society. This may not be an explicit contract, but could take the form of social norms and values for that particular culture. One particular aspect of Rousseau's work which was new and differed greatly from Hobbes, was discussion of what options were available to individuals who did not agree with the social contract. If this was the case an individual had two options, firstly, to try and persuade others of your viewpoint and incite change, leading to a new social contract. Or secondly, to leave and find somewhere more agreeable. This idea that the people could group together and create change was highly influential amongst many French people and Rousseau was cited as an influence during the revolution (Strathern, 2002).

Rousseau's version of the social contract influenced numerous philosophers and social theorists and most subsequent theories of justice have a contractarian aspect (Strathern, 2002). This is also true of Rawls's theory. Rawls thought that a social contract was useful in that it outlined what is expected of citizens and the state and that it gave citizens the opportunity to make clear what they wanted from the state. A social contract also makes clear what rights and

responsibilities a citizen has, and thus who is a citizen. Previous versions of the social contract had not considered in detail how these contracts are created, or who creates them. This is mostly due to many theories discussing the idea of a contract within an established society. Rawls looked at how a social contract could be created in a way that was fair from the initial formation of that society. By allowing a number of individuals from within the society to decide upon the conditions of the social contract, something could be created that would be fair. To ensure that those deciding do not act in a self-serving manner, but instead consider overall fairness, no one would be aware of what their place in society would be whilst they are deciding upon the social contract. This condition of unawareness was named the original position (Rawls, 1971). This is a hypothetical position, as it would be impossible for someone to be part of a society, but not aware of their position within it. Rawls has been widely criticised for the idea of the original position, due to its impossibility, its idealised approach and the assumption that people will choose fair principles simply due to unawareness of their place (Kukathas and Pettit, 1990). This has been a main criticism of justice as fairness and has led to discussions of the role of morality in decision making. Rawls thought that all people have some inherent morality, or sense of right and wrong, and that this would govern their approach whilst in the original position. A sense of morality is also necessary to judge behaviour as just or unjust. It is in Rawls's discussion of these ideas that the influence of Kant becomes clear.

Immanuel Kant created a moral philosophy that depicts a clear version of right and wrong, and a clear standard for judging the permissibility of actions (1785). Kant's theories are deontological, in that they are concerned with the action and the underlying intention, rather than the outcome. Having a staunch moral framework, Kant thought we should behave morally simply because it is the right thing to do rather than it leading to some kind of reward (Sandel, 2010). To understand if an action is morally permissible or not, Kant created the categorical imperative (Kant, 1785). This idea considers if an action could be used as a universal standard without any detrimental results. For example, telling a white lie may seem a relatively harm free action, but if everyone told white lies, the truth would be devalued as we would learn to expect to be lied to and people would no longer believe or trust each other (Kant, 1785). In addition to the action itself, intentions can be used as a standard of morality. An action is only truly moral if the actor's intention was to do the right thing. If a good thing is done for selfish reasons; according to Kant it is not truly good, regardless of the outcome. Kant was highly criticised for being unrealistic and rigid in his theories and for overlooking contextual factors (Sandel, 2010).

Despite this, the idea of actions being implicitly right or wrong was highly influential, and had a strong impact upon Rawls.

Rawls took ideas from Rousseau and Kant and used them to build a theory that could be an alternative view of social justice. The original position furthered the idea of the social contract, by considering how the contract could be drawn up by a group of individuals from within the society. Even though Rawls acknowledged that the original position is a thought experiment opposed to a realistic situation, the principles derived from it could be agreed upon by a population and put into practice (Rawls, 1971). In the consideration of how the principles would be arrived at, and if they would be agreeable, Rawls utilised the Kantian approach to morality (Lovett, 2011). It was theorised that the original position would not result in a utilitarian approach; as some of the possible outcomes of utilitarianism are instinctively wrong as they cause unnecessary harm to others (Kukathas and Pettit, 1990). Rawls felt that intuition and instinct alone could not be used as the basis of the creation of guiding principles or structures for a society. There must be some form of rational or logical thought when approaching the original position. This also conforms to Rawls's view that individuals are worthy of respect in and of themselves; assuming that all individuals are capable of decision making is a mark of respect of individual ability (Sandel, 2010). The consideration of what logical choices individuals would make in the original position is dependent upon the view of what a society is. Rawls viewed a society as a "system of co-operation" (Rawls, 1971), in that individuals within a society want to achieve some aim for themselves (e.g. progress, increased wealth etc.) but will have better success at this if they work with others. Co-operation leads to individual aims being met on a collective scale. This creates tension within the society, as individuals want the best possible outcome for themselves, but to achieve this they have to co-operate with others who may have conflicting aims. The idea of using co-operation to achieve aims led Rawls to consider individuals as having a rational self-interest (Lovett, 2011). This means understanding that helping others is the best way to help oneself. From this it is possible to have a better understanding of what principles for society would come from the original position. Specific approaches would differ based on the aims of the particular society or institution, but Rawls theorised that two principles would arise regardless of aims from a position of rational self-interest. Firstly, that there are inviolable equal and universal rights for individuals and secondly, that inequality is only tolerated if it benefits those worst off (Rawls, 1971). These two principles would create the structure for a socially just society. Creating an appropriate structure is not sufficient. Structural principles must be public. If the underlying principles and aims of a

society are hidden or unclear, it is likely that they are not aligned with the principles of equality that Rawls theorised would emerge from the original position. Also, if the structure was not universally agreed upon, it is likely that it was created from a place of pure self-interest opposed to rational self-interest, or has diverged from principles of equality. A truly socially just basic structure for co-operation would be known and agreeable to all those affected by it (Lovett, 2011).

In later works, Rawls discussed the application of justice as fairness to institutions as well as societies (Rawls and Freeman, 1999; Rawls and Kelly, 2001). It became clear that whilst thought experiments like the original position or consideration of structures is unrealistic on a societal level, for individual institutions it is not only possible, but could be highly beneficial. Rawls discussed the application of justice as fairness to institutions, this was largely limited to economic concerns though. Rawls thought that once a socially just structure had been created for society, any institution within that society would follow the principles of justice and so would act fairly (Lovett, 2011; Rawls and Kelly, 2001; Rawls and Ward, 1985). This limited Rawls's further discussions of the application of justice to the political sphere and distributive contexts, as opposed to being applicable to individual behaviour or morality. Whilst this is useful and valid, Rawls's ideas can be taken further and applied to the conception and organisation of a specific institution. This also removes a number of criticisms of justice as fairness, such as idealism and impracticality. Whilst restructuring society is unlikely or the original position is inaccessible on a societal level, this is not the case at an institutional level. Individual institutions are created and restructured frequently, and often work towards a stated aim, meaning these theoretical ideas are applicable.

Rawls theorised four stages for implementing justice as fairness (Rawls, 1971). The first is the original position, the choosing of the principles of justice to govern the society. Following that is the creation of a constitution or social contract based upon the principles derived from the original position. Rawls expressed that by making this explicit and available to all citizens, those creating the constitution can be held accountable if it does not conform to the principles chosen. Third is the creation of a legislature, which expresses how the constitution is to be enacted and upheld. The final stage is creating a justice system to address the legislature and those who contravene it. Rawls does not dwell heavily on these stages or how they could be used to avoid being prescriptive and limiting. Whilst Rawls maintained that the same two

principles of justice would be chosen from the original position, he emphasized that there were numerous options of political views which could affect the creation of a constitution and the following stages, which would lead to different societies and allow political liberty (Lovett, 2011; Rawls and Ward, 1985). This does mean that the two principles could be chosen, the four stages followed and a structurally socially just society created, but institutions within it could still be socially unjust. A solution to this would be to use justice as fairness to create institutions. All institutions and organisations have an aim or serve a particular purpose. The original position could then be used as a thought experiment to create guiding principles to achieve that aim. Then the four stages could be used to structure the organisation and guide practice. This would be particularly useful for governmental agencies or departments and public bodies. If an institution is trying to achieve some public good or public protection, it is imperative that they do so in a just manner and that they are accountable to those they are trying to serve. If this is not the case then they are not acting in accordance with the two principles of justice, which may be indicative of problems in how the four stages of structuring society were carried out. By using justice as fairness in the creation and organisation of institutions, not only are those institutions themselves more just, but they can act as a marker for the state of justice in society as a whole.

A Theory of Justice (Rawls, 1971) became highly influential, affecting philosophy, economics and the social sciences dramatically (Daniels, 1975; Lovett, 2011). It created an alternative to utilitarianism as Rawls had hoped. It was not without critics though. Rawls's work is criticised for being too idealistic, almost creating a utopian ideal (Daniels, 1975; Kukathas and Pettit, 1990) and being impossible to implement. Idealism is not always a negative though and Rawls's theory creates an aim for society, which others do not. If a society has problems relating to justice, but there is no ideal for what a truly just society would look like, any changes may not be progress as there is no aim to work towards beyond the abstract 'better'. In addition to this, Rawls's work may be impossible to implement for a whole society, but could be applied to institutions, particularly at their point of conception. If social justice were considered in the construction of services or institutions (particularly those attached to the state), this would be a way of making progress towards Rawls's ideal, but without having to dismantle society as a whole. An example of this would be if social justice was used to underpin the YOS. Rawls wrote extensively upon social justice, refining his theory and addressing criticisms. One of the main and persistent criticisms was the certainty of the principles that would be chosen from the original position. Continually it was considered why people in the original position would not

gamble with universal rights in the hope that they would be in the fortunate majority, questioning Rawls's insistence that utilitarianism could not be the result of the original position (Sandel, 2010).

Utilitarianism was the main theory of justice prior to Rawls. Created by Jeremy Bentham, utilitarianism does not work on a rights based framework like Rawls's theory, but instead calls back to Plato's idea that society should aim to increase happiness (Plato, 380AD). By focusing upon general happiness, there is no need for a standard of morality to judge the worth of actions, with permissibility being based upon a simple cost-benefit analysis instead. Bentham's theory was based upon the happiness principle, that society should try to achieve the greatest happiness for the greatest number (Bentham, 1789). Whilst this seems like a reasonable approach, it led to problems. Bentham was highly influential in Britain at the time and so his ideas were implemented by the government. At the time there was severe poverty, which caused unhappiness amongst those suffering it, and those who had to observe it (Bentham, 1789). To combat this, workhouses were created, which were a combination of factory and homeless shelter. The poor could work in exchange for their room and board, thus giving them somewhere to live, a means of earning a living, and removing the streets of people offensive to the upper classes. Overall this should have increased happiness. However, this was not the case. Workhouses were generally run in extremely poor conditions, with many considering them akin to a death sentence. According to the happiness principle though, the workhouses could be beneficial, as long as the harm caused by the poor conditions did not outweigh the happiness of the upper classes of having to see fewer homeless people, and the happiness of the workhouse owners (Cook, 2006). This is one of the main issues with utilitarianism, that unhappiness and harm are permissible, as long as they happen to the minority (Talisse, 2001). Rawls was convinced that a utilitarian approach would never lead to an equal society because of this (Rawls, 1971), suggesting that egalitarian or rights based approaches were the only way to be fair. Utilitarianism has many proponents though, largely due to the work of John Stuart Mill (1863). Based upon the ideas of Bentham, Mill furthered utilitarianism to overcome some of its previous issues. One of the main changes Mill made was that some pleasures can be deemed more worthy than others. Again recalling the ideas of Plato and Aristotle, Mill stated that pleasures which improve a person's intellect or quality of life are more worthy than hedonistic pleasures. This differed from Bentham's view that all pleasures are equal. Mill couldn't overcome the issue of harm being acceptable against the minority though. Some actions, like slavery, were declared as being wholly unacceptable regardless of the happiness they caused to

some. This was because the harms these actions caused were so great and lasting that they could not be justified by any level of happiness in the short term (Mill, 1863). Harms against the minority on a small scale were allowable in Mill's utilitarianism. Actions like torture could be justified from a utilitarian perspective, or structural inequality could potentially be viewed as acceptable (Lovett, 2011).

As a society we do not generally approve of a utilitarian approach to justice, as we have certain universal protected rights. Perhaps if society were truly equal and it could be guaranteed that people wouldn't take actions that would infringe upon the rights of others a utilitarian approach would be useful, but this is not the case. One of the other main theories competing with egalitarian approaches is libertarianism. Having roots in works of John Locke, libertarianism has numerous branches and versions, the most widely held of which at present is espoused by Robert Nozick (1993). Based upon the idea of individual freedom and the right to ownership, libertarianism promotes individual rights over universal rights. The area this has the greatest affect upon is economics, with some libertarian thinkers decrying taxes as impinging upon person freedoms and the right to earnings, even if they are used to help victims of inequality. Libertarianism is somewhat controversial, as it covers a spectrum of ideas which at points become extreme or hyperbolic, for example that tax is equivalent to stealing (Rothbard, 1982). Libertarianism became the main theory in contrast with justice as fairness and both remain popular today. One of the main problems of libertarianism is that it assumes equality is already present. If this were true, it would be a reasonable approach; but we are not in a state of true equality. This inequality is largely due to structural issues within our society that allow some to progress more easily than others, thus limiting social mobility (Boudon, 1973). Libertarianism applied to an unequal society eventually leads to an increase in inequality as those who have resources also have the ability to acquire more, whereas those without privilege do not have the same ability. This can be seen in America at present, which was highly influenced by libertarian policies during the 1980's and has a large rich/poor divide (Van Soest, 1994). Versions of libertarianism have been highly influential in politics and economics and is the basis of neo-liberal approaches, which are currently widely used (Overbeck, 2002; Wacquant, 2001). During this period of neo-liberalism inequality has increased in Britain, suggesting that this approach is not currently achieving social justice (Williamson, 2013). This assumption of equality is a main flaw in libertarianism and one of the reasons why Rawls's work is more appropriate to use as the basis of societal structures and institutions.

Justice as fairness is at present the best approach to apply social justice to social institutions. This is because its' rights based approach means that no individual can be overlooked to the benefit of another, the contractarian aspects means that the state is accountable to the people and that people have responsibilities to the state, the original position ensures equality amongst citizens and the principles of justice Rawls sets out make it clear that inequality is only tolerable when it favours the underprivileged. This is an idealistic approach to creating a society, and unlikely to happen on such a large scale. Rawls also thought the theory could be applied to institutions and organisations which is a more practical use, particularly for organisations related to the state (Rawls and Freeman, 1999). One of the main advantages of this would be that Rawls's theory builds upon specific principles. This would give social institutions or organisations a clear foundation for practice, which would help clarify the purpose of the organisation, and ensure consistency in practice. This is a much more realistic application for Rawls's theory. If state organisations used justice as fairness during their initial conception or periods of re-organisation, they would be forced to consider what their aim is, how best to achieve that, who they are serving and how this could best be done. All those involved within the organisation would have a clearly demarcated role and the ability to call into question practices or procedures which went outside the original aims of the organisation. Also, it would allow for professionalization, which has been lost within many social services (Banks, 2003; Crossley, 2012), with all members of the organisation being of equal worth and having equal rights, professional opinions would have to be respected. If state organisations adopted a justice as fairness approach, there would likely be improvement.

## Youth Justice

This section focuses on the history and current organisation of youth justice. This includes discussion of the structure of the YOS, and how this emerged following the 1998 Crime and Disorder Act (Home Office). In this context the term 'structure' relates to the way in which resources are organised and managed on a micro level, and aspects of the organisation which are built into working and practice on a macro level. This means that the commissioning processes within the YOS are part of the structure, as are mandatory aspects of practice, such as Asset forms. The structure of youth justice has been created by the YJB and has largely been unchanged since its implementation.

Youth justice in Britain has a long and complex history, largely characterised by change (Burnett and Appleton, 2004). One of the most interesting periods for youth justice has been that following the 1998 Crime and Disorder Act (Goldson, 2000b). It was this act that led to the formation of Youth Offending Teams (YOTs) and the Youth Justice Board (YJB). Prior to this youth justice was highly welfare oriented, but fragmented and was not optimally successful in addressing offending (Cavadino and Dignan, 2006; Wigfall and Moss, 2001). As political rhetoric began to focus on identifying and acting upon the causes of crime, it became apparent that a new approach to youth justice was needed (Newnham and Page, 2010). This approach created a risk oriented focus for youth justice, where specific factors related to offending became a large aspect of youth justice work (Blyth et al., 2007; Kemshall, 2010; Phoenix, 2009). It was also clear to many youth justice workers that young offenders needed more specific help, which they may not be able to provide. This was largely focused upon welfare issues, such as physical health, education training and employment, housing and mental health (Anderson et al., 2004; Carswell et al., 2004; Patel et al., 2007; Stallard et al., 2003). In addition to this, there was a growing concern about young people amongst the general public. This has been considered a moral panic by many, particularly following the James Bulger murder (Hay, 1995). Due to this, youth justice became a key political issue, to the point where some consider views towards youth crime to be a litmus test of attitudes in wider society (Ellis and Boden, 2000; Hope, 2005). Political rhetoric emphasised the need for change in youth justice. The Crime and Disorder Act (Home Office, 1998) and the formation of the Youth Justice Board and Youth Offending Teams followed.

Youth Offending Teams were implemented to address the offending behaviour of children and young people aged 10-17 (inclusive). Following the publication of the 'No More Excuses' paper (Home Office, 1997) a new approach to youth justice was needed. The Crime and Disorder Act (Home Office, 1998) drew heavily upon this, instituting new structures and organisations for youth justice. The Youth Justice Board was created to oversee youth justice nationally, create new guidance and be accountable for youth justice. At the local level Youth Offending Teams were developed. By having local agencies acting largely autonomously, it was thought that provision could be tailored to the specific needs of each area (Sutherland, 2009). Additionally, to ensure accountability and a high standard of service, each YOT would be audited and appraised regularly by the YJB, who would set standards and create models of best practice for YOTs to use as guidance (Shaw, 2006). The aim of the Youth Justice Board is:

> "To oversee the youth justice system in England and Wales, to prevent offending and reoffending by children and young people under the age of 18 and to ensure that custody for them is safe, secure, and addresses the causes of their offending behaviour." (Youth Justice Board, 2011a)

There were five pilot teams before the approach was rolled out nationally. The pilots were created very quickly, with just three months available for planning, structuring services and creating practice guidelines (Holdaway et al., 2001). This new approach to youth justice was supposed to be highly invested in evidence based practice (Burnett and Roberts, 2004). In addition to using academic work to develop practice, youth justice workers and managers were expected to devise and implement evaluations so that practice could be improved and developed based upon what had been found to be useful (Holdaway et al., 2001). This philosophy of accountability and rigour did not extend to policy makers regarding youth justice. Youth Offending Teams were set up nationally before the evaluation of the pilot schemes had been completed and before issues found within the pilots could be overcome (Holdaway et al., 2001).

Hope (2005) has discussed the incompatibility of evidence-based practice and the outcome driven attitude of politicians towards youth justice. The need for positive outcomes in short time frames has been a consistent issue within youth justice and adds to tensions within the service (Myers & Goddard, 2012). Some were concerned that increased focus upon accountability and outcomes would remove the welfare oriented focus from youth justice (Blyth, 2005). These concerns have proved justified as youth justice has become more focused upon managing risk (Blyth et al., 2007; Jones and Baker, 2009; Maurutto and Hannah-Moffat, 2007). At the

institution of the YOS it was made clear that there was a need for the involvement of various agencies. Previous youth justice work had been highly welfare oriented and worked with other agencies, but not in a formalised manner (Smith, 2007). The exact provisions were decided upon locally, with statutory requirements for certain agencies to be involved in youth justice in some capacity (Holdaway et al., 2001). Due to the speed at which YOTs were created, there was little time for planning how these agencies would work together, which led to confusion over accountability of staff, reporting practices and confidentiality. There were also issues around funding, which were exacerbated by continually changing national standards (Burnett and Appleton, 2004). These issues within youth justice were not directly addressed and so have remained, in some cases leading to tensions between management, youth justice workers, and other organisations working with the YOS (Fergusson, 2007; Goldson, 2000a; Smith, 2005). The concern that evidence would "get in the way of a good policy" (Hope, 2005) meant that the YOS did not conform to the evidence based approach outlined in the Crime and Disorder Act (Home Office, 1998), instead preferring speed in decision making and action, rather than the support of a large evidence base (Holdaway et al., 2001; Hope, 2005). This meant that the intended philosophical basis for youth justice was not consistent within YOTs.

The implementation or promotion of "evidence-based" approaches within youth justice is highly contested (Bateman, 2014; Burnett and Roberts, 2004; Yates, 2012). These debates centre around how "evidence" is defined, and how the aims of youth justice are to be interpreted. Prior to the 1998 Crime and Disorder Act, youth justice had been heavily welfare oriented (Smith, 2007), and helping young people access welfare services was perceived as beneficial in reducing future offending and supporting young people to understand the ramifications of their offending behaviour (Bradt and Bouverne-De Bie, 2009; Downes and Hansen, 2006). During this time a wide range of information was considered as informative and useful for practice. This included both quantitative and qualitative research, and also the views of practitioners and service users (Prior and Mason, 2010; Smith, 2007). In addition to allowing information from practice to then help inform future practice, this approach showed respect for professional judgement and allowed practitioners within youth justice to have a sense of agency over the processes they carried out (Canton and Eadie, 2008; Smith, 2007). Whilst this period within youth justice was not problem-free, it is generally considered in a positive way within the literature (Goldson, 2000b; Muncie, 1999; Smith, 2007), a view which is supported by a decline in the number of young people who entered youth justice services (Youth Justice Board, 2011a, 2013b, 2014e). However, there were concerns that the highly welfare oriented approach to

youth justice was overlooking the necessary repercussions of offending behaviour, and that youth justice was lacking a punitive aspect (Duncan Smith, 2007).

The divide between welfare and justice is a central debate within youth justice, as there is a requirement to provide both aspects. The extent to which each should hold priority or be an active pursuit of youth justice practitioners is an ongoing question, and this work hopes to further this discussion. Following the Crime and Disorder Act (Home Office, 1998), debates of 'welfare vs. justice' were renewed due to the political rhetoric of being 'tough on the causes of crime' (Duncan Smith, 2007) and an expanding body of research suggesting greater access to welfare services was needed (Allen et al., 2012; Jud et al., 2012; Léveillé and Chamberland, 2010; Mallett, 2009). One of the main aspects of the welfare vs justice debate consists of how these broad philosophical issues should be approached within practice (Barry, 2000; Bradt and Bouverne-De Bie, 2009; McGhee and Waterhouse, 2007; Smith, 2005). This often takes the form of questions of priority and what is 'right' in a given situation. Young offenders are often young people with highly complex needs who have had little or no opportunity to access welfare services previously (Stallard et al., 2003; Street, 2005; Walsh et al., 2011). If this lack of opportunity is due to societal structures, as many consider it to be (Barry, 2000; Boudon, 1973; Myers and Farrell, 2008), this raises the question of if the state has a right to hold these young people responsible for their actions against the social contract, as the state has not upheld their side of the contract, by creating (or allowing) structures that foster inequality and limit the opportunity of these young people. This view creates a very strong argument for youth justice services to provide for and possibly prioritise the welfare needs of young people. However, the other side of this argument purports that by commit crime or behaving in a way that constitutes 'offending' these young people have broken the social contract and are no longer deserving of welfare support from the state (Bailey, 1996; Goldson, 2000a). This view can acknowledge that societal issues may contribute to a young persons' offending behaviour, but argues that providing welfare after an offence has been committed is not an effective way to prevent first time offending (Duncan Smith, 2007). Youth justice services are unable to create the level of societal change that would be required to remove the inequalities or societal structures that contribute to young people committing offending behaviours. This means that it is limited to providing welfare care reactively, to prevent re-offending. The welfare vs. justice debate has not yet found a solution to the issue of priority, however this work aims to show that through applying general principles to guide practice overall, parity between the two aspects can be

achieved, allowing young people access to services where needed, and for cases to be considered on an individual basis within that overall framework.

One of the main calls from research into youth crime has been that societal and welfare factors around each young person should be considered with their offending (Jones and Baker, 2009; Jud et al., 2012; McLaughlin and Muncie, 2000; Smith, 2005). Youth justice approaches elsewhere that focus on young people holistically or use 'child first' approaches are considered to be successful and held as a standard for youth justice (Case, 2014; Haines et al., 2013; Lowell et al.). If youth justice systems considered crime alone and acted entirely punitively, the reasons why the crime occurred could be overlooked. This would mean that the opportunity to prevent further crime, by dealing with these factors, could be missed. Since the formation of YOTs and the YJB youth justice has created specific structures that consider welfare and contextual factors surrounding young people, and promote work with specialist agencies. Multi-agency approaches are positive and should be encouraged in youth justice (Burnett and Appleton, 2004; Robinson and Cottrell, 2005; Wigfall and Moss, 2001). By having the input of various professionals and catering to the disparate needs of young offenders there is a higher chance of reducing re-offending, which is a main aim of youth justice (Maschi et al., 2008). However, the variety of approaches were not always considered and organised on a national scale, which has led to both confusion about how joined up working is to occur, and tensions between services and issues within practice. The impact of this is that both the welfare and criminogenic needs of young people are not always being met (Anderson et al., 2004; Smith, 2005; Walsh et al., 2011). Attempts to work in a joined up manner and cater to the welfare needs of young people are also occurring at a time when the rhetoric surrounding young people is largely negative (Smith, 2011) particularly following the riots in August 2011 (Roberts and Hough, 2013). Youth justice has been perceived as becoming managerialised and more punitive (Muncie, 2008; Pitts, 2001), which further increases the tensions between agencies. Overall it has been said that youth justice is not working, and a new approach needs to be considered (The Howard League for Penal Reform, 2011a).

At present YOTs are in a somewhat precarious state. With funding cuts across all services taking place and the uncertain stability of the YJB (Fox and Albertson, 2011; Puffett, 2013) the future for youth justice is unclear. This is also worsened by claims that youth justice is not working (The Howard League for Penal Reform, 2011a). Change is a common feature of youth

justice, with new initiatives, approaches and standards appearing almost continuously (Burnett and Appleton, 2004; Cavadino and Dignan, 2006). Although changes in policy and guidelines are not necessarily reflected in daily practice (Littell and Shlonsky, 2010). The YOS is often characterised by tensions between welfare and justice (Smith 2005, Goldson 2000a) and finding a balance between these two factors is difficult. There are parallels between these problems and the tensions between social and criminal justice. As welfare approaches often have links to social justice, this is understandable. It is possible that the promotion of multi-agency approaches has made the issues between social and criminal justice in the YOS explicit. The YOS has a duty to deliver criminal justice as it is specifically set up to deal with offending. At the same time, as it deals with young people, the YOS also has a duty to cater to welfare needs (Home Office, 2004). These two duties can cause conflict, generally around which takes precedence, or to what extent criminal justice should be mitigated by welfare issues (Smith 2010). This is indicative of the need to balance social and criminal justice, if one cannot truly occur without the other (Cook, 2006), how they are both to underpin practice within the YOS successfully must be considered. Considering these issues on a larger scale often raises questions of structural inequality and rights as it highlights that these problems are not isolated incidents, but trends across the whole of the organisation. (Goldson, 2013; Hine, 2004; Smith, 2010; Such and Walker, 2005). Young people who present the highest risk of offending or re-offending are those who are in the most disadvantaged and powerless situations (Yates, 2012). When social factors like poverty, race, educational attainment and class are being highlighted as factors linked to offending (Centre For Social Justice, 2011), it lends credence to arguments that treating offending as an issue based upon individuals being 'bad' is unhelpful (Ginwright and James, 2002; Goldson, 2013). Addressing social problems and inequalities may be a better approach towards reducing offending, rather than overlooking these factors and holding individuals solely responsible for their actions.

In the past twenty years there has been increasing rhetoric in the political sphere about responsibilisation of offenders and focus upon individual actions and consequences without considering the larger, societal context (Smith, 2011; Yates, 2012). The idea of individuals being solely responsible for their actions goes hand in hand with the idea of a 'punitive turn' in youth justice (Bateman, 2011; Muncie, 2008). The promotion of responsibilisation lessens the responsibility of government to addressing the larger structural issues that contribute to the problem of offending, as the issue is framed as individuals being inherently bad, opposed to contextual or situational factors contributing to offending behaviour (Yates, 2012). Whilst the

idea of a punitive turn is contested, there is evidence for it. Standards and guidance for youth justice are suggestive of more punitive measures and a move away from welfarist approaches (Bateman, 2011; Muncie, 2008; Waid-lindberg et al., 2011). Examples of this are an increasing number of timescales or targets for practitioners to adhere to, changes in sentencing trends, and higher levels of young people in custody (Bateman, 2011; Roberts and Hough, 2013; Smyth, 2010). These cultural changes are not necessarily reflected by changes in practice though (Pitts, 2003). This could be due to the attitudes and approaches of youth justice workers. This contrast is exemplary of the tensions in youth justice between managerialism and professional identity and also between social and criminal justice (Fergusson, 2007; Jones et al., 2004; McLaughlin and Muncie, 2000; Whitehead, 2011). As this is occurring on a broad scale, this is reflective of a general trend within youth justice opposed to isolated incidents.

If political trends alter criminal justice so that the actions of an individual are framed as solely their responsibility, this raises questions of citizenship and the rights and responsibilities of citizens. If a person is being held to the responsibilities of citizenship (i.e. being accountable under law), it is just that they receive the rights it brings also (Such and Walker, 2005). This is outlined in social contract theories, if individuals do not receive the rights of citizenship, they are not technically citizens and so it is unjust to punish them for not obeying the standards of that society or fulfilling the responsibilities of citizenship (Muncie, 2006a; Rousseau, 1762). Young people in Britain at present do not have the full rights of citizenship. A young person can be held criminally responsible for their actions and be recipient to the full range of disposals; but they cannot vote, cannot drive, cannot purchase alcohol or cigarettes, have limited control over their educational choices (which is set to decrease further in coming years), cannot give consent, and so on. This disparity between the rights and responsibilities of young people is a cause for concern for many and has led to calls for a change in the age of criminal responsibility in Britain (Goldson, 2013). This is also supported by the United Nations, who have called into question the maintenance of such a young age at which children can be criminalised (Committee on the Rights of the Child, 2002).

The idea of responsibilisation also affects how welfare is dealt with within the YOS. If offending is framed as the actions of an individual, separate from a larger societal context, it casts young offenders as fully rational, aware of their actions and their consequences. This view of young offenders is similar to that of the poor that were impacted by Bentham's utilitarianism

(Bentham, 1789; Muncie, 1999), where access to help or services is linked to perceptions of what is deserved. This strongly impacts on what is considered as a worthy need and how young offenders should be treated. The image of a fully aware young person with a clear understanding of the impact of their offending does not reconcile well with the image of a young person (potentially as young as ten) with mental health needs and low educational attainment (which is typical of offenders) (Gharabaghi, 2012; Marshall et al., 2011). Many of these factors also apply to adult offenders and it has been argued that the adult justice service should offer more in terms of welfare (Easley, 2011). There is greater need in the youth justice system though as there is an emphasis on prevention in the aims of the service, which is more likely to be effective at a young age (Case, 2006; Loeber et al., 2003; McAra and McVie, 2007). Additionally, the range of issues that affect young offenders generally worsen if unchecked, which could cause greater levels of need in later life, or possibly lead to more criminal behaviour (Patel et al., 2007). Whilst increased welfare services are necessary in both adult and youth justice, it is imperative that they are improved in the YOS. Responsibilisation furthers the tensions between welfare and justice (Goldson, 2013), which hinders the YOS overall as its aims involve both of these factors, so framing them as opposing or competing is not helpful.

Change is a main characteristic of youth justice. Due to continual efforts to improve standards, organisational structures, and guidance, there is little stability within youth justice (Prior and Mason, 2010). This is true of the YOS at present. There is discussion of implementing payment by results (Yates, 2012), new assessment criteria being piloted in the form of Asset Plus (Baker, 2014; Youth Justice Board, 2014a) and Common Assessment Frameworks (CAF), and liaison and diversion schemes being considered also (Haines et al., 2012; Khan, 2010a). Whilst changes are generally implemented in trying to improve practice, the consistent changes in youth justice create uncertainty and confusion. The main result of this is that front line workers have more standards to meet with fewer resources (Myers and Goddard, 2012) and aside from reduction of time and increased paperwork, these procedural changes do not have a corresponding impact upon how daily practice or work with young people happens (Littell and Shlonsky, 2010), suggesting that policy changes are not having the desired impact. Continual change also means that new initiatives do not have time to stabilise and be judged based upon their effectiveness. This is counter to the evidence-based practice movement, which is highly popular among commissioning bodies and policy makers (Pitts, 2003). Often initiatives are brought in or rolled out across the service before an evidence base is completed (Burnett and Appleton, 2004; Myers and Goddard, 2012) and certain types of evidence are not considered as they do not conform to

a particular standard or approach (Littell and Shlonsky, 2010; Prior and Mason, 2010). This has been occurring consistently within youth justice since the implementation of the Crime and Disorder Act (Home Office, 1998), with YOTs themselves being rolled out country wide before data of the pilot scheme had been collected (Holdaway et al., 2001). This means that initiatives purported to use evidence based approaches in youth justice are not truly evidence based, which may explain why many YOS policies are not working as was predicted (The Howard League for Penal Reform, 2011a). This also shows the inconsistency of the application of the underlying principles of the YOS. It was originally aimed that evidence based practice would be central to practice (Holdaway et al., 2001). That it can be overlooked calls into question other aspects of the philosophical base of the YOS.

Concerns about the balance between welfare and justice have been present within youth justice since its conception (Goldson, 2000a; Smith, 2005; Smith, 2010) That they have not been overcome by altering practice and implementing new standards and approaches implies that the issues are structural in their nature. The structure of the YOS has remained largely unaltered, despite numerous changes to other areas of the service. Many of the criticisms of the YOS have been about the structure and increasing levels of managerialisation (Holland, 2000; Jones, Ferguson, Lavalette, & Penketh, 2004; McLaughlin & Muncie, 2000), but this has not been addressed by the YJB, who have focused on trying to find solutions that are supplementary to the existing organisational structure (Myers & Goddard, 2012). Currently the YOS uses a top down approach, being overseen by the YJB on a national level, with standards, practice pathways and best practice guidelines being released from this level. These apply to each individual YOT. The YJB also has some control over funding, with contracts being organised for specific projects, pilots and so on. On a local level YOTs are accountable to the local authority; this is generally in terms of funding rather than practice though. Each YOT has a head of service who oversees the structure and workings of their YOT and also liaises with the local authority and YJB with regards to operations and commissioning. Below that there are managers for various aspects within the YOT who deal with everyday practice and procedures, staff supervision and issues. In addition to having managers to oversee practice, there are guidelines from the YJB to help staff. These are generally known under the name of 'best practice' and are considered to be prescriptive (Newnham and Page, 2010). The guidelines cover most aspects of practice, setting time constraints and standards for youth justice workers. This has been perceived as a way of removing the agency and expertise of professionals (Pitts, 2001). An argument which is supported by the relatively recent practice of hiring unqualified

youth justice workers (Pitts, 2003). Whilst unqualified workers are not expected to do the same work as qualified professionals, the working culture in the YOS often means staff are homogenised, regardless of background or qualifications and are expected to carry out the same work as other staff (Burnett and Appleton, 2004; Pitts, 2003). In practice this means that unqualified staff often do the same work as qualified staff. This is negative because it minimises the qualifications of youth justice workers, places high expectations on these unqualified persons, and means that young people may not all receive an equal service.

De-professionalization is considered problematic in a number of social professions and has negative effects upon practice. Issues of homogenisation of professionals can be exacerbated or lessened depending upon the working culture of the YOT (Artaraz, 2006; Ellis and Boden, 2000). This is largely dependent upon management strategies and the top down effects that follow (Myers and Farrell, 2008). The attitude and approach of higher level management has a strong effect on culture and motivation in a number of social agencies (Rutherford, 1994). The ability of management figures to understand and adopt the values and approaches of the team they work with is linked to positive outcomes and strong professional identities within teams, particularly in multi-agency working and clinical approaches (Haslam, 2014; Holland, 2000; Newnham & Page, 2010). In the YOS varied management attitudes could result in highly welfare oriented teams that place an emphasis on social as well as criminal justice, or at the other end of the spectrum, teams that are more punitive and see welfare factors as the domain of other agencies. This then effects decision making and how young people are perceived (Spratt, 2000) and the consistency of the service. This highlights the importance of the approach and attitude of those at all levels of the YOS and how these issues can have a real impact upon the young people they work with.

In addition to issues around management and organisational structures there are also practical problems in aspects of everyday YOS practice, particularly in a multi-agency setting (Fergusson, 2007; Sutherland, 2009; Wigfall and Moss, 2001). These are somewhat tied in with the larger issues, but impact most upon those with the least capacity to initiate change in the organisation, the front line workers. These problems are generally due to unclear guidelines or required tools being inadequate. Examples of this are the YOS assessments, referral pathways and ability to provide or access interventions. Assessments within the YOS start with the Asset. This is a general assessment tool that covers various aspects of a young person's life and their

offending behaviour. It has specific sections regarding problems such as mental health or self-harm. Despite being created specifically for use within youth justice, the Asset has been criticised as being simplistic and impractical (Baker, 2005; Wilson, 2011). The Asset often reduces large issues into short groups of questions that will be unlikely to express the extent of an issue. An example of this is the mental health section of Asset, which is comprised of four questions which are shown in Table 2.1 below (The section can be seen in full in Appendix 8.7). From these questions a rating from one to four must be given about the likelihood of mental health causing further offending.

|   | Question |
|---|---|
| 1 | Is the young person's daily functioning significantly affected by emotions or thoughts |
| a | Coming to terms with significant past event/s |
| b | Current circumstances |
| c | Concerns about the future |
| 2 | Has there been any formal diagnosis of mental illness? |
| 3 | Any other contact with, or referrals to, mental health services? |
| 4 | Are there indications that any of the following apply to the young person? |
| a | S/he is affected by other emotional or psychological difficulties |
| b | S/he has deliberately harmed her/himself |
| c | S/he has previously attempted suicide |

Table 2.1: Asset questions regarding mental health (Youth Justice Board, 2006)

These questions are quite vague and in some cases pre-suppose a relationship between the young person and youth justice worker that allows discussion of suicide or self-harm. This means there is a strong reliance on the youth justice workers having knowledge and understanding of mental health and being able to recognise issues or causes for concern in order to liaise with specialist workers. In contrast to this, the Asset guidelines are also highly prescriptive (Baker, 2005). A young person's issues are only to be considered or acted upon if

they are explicitly linked to their offending behaviour. By solely focusing upon the offending and factors that can be evidenced as related to the offending, professional judgement is limited. This aspect of de-professionalization is becoming more prevalent throughout the YOS and is largely linked to increasing managerialisation and restrictive guidelines (Holland, 2000; Jones et al., 2004). This also means that newly accredited youth justice professionals will have fewer opportunities to expand their skill set and learn to recognise and understand the diverse problems of young offenders to be able to seek specialist help when necessary.

Multi-agency approaches are currently being promoted for most social agencies, including youth justice (Burnett and Appleton, 2004; Sutherland, 2009; Wigfall and Moss, 2001). Whilst utilising the skills and knowledge of a variety of professionals should be beneficial for young offenders, it needs to be carefully planned and organised to work successfully from an organisational standpoint (Wigfall and Moss, 2001). This is particularly true when the organisations have differing philosophical standpoints which require balance. This has not necessarily been the case with the YOS approach to multi-agency working. The YJB had been devolving the responsibility of numerous aspects of youth justice to local YOTs, whilst retaining the ability to issue standards and targets (Sutherland, 2009). This has led to YOTs being informed they need to use multi-agency approaches, with little guidance as to how or what this comprises of. Some YOTs felt that they were already using a multi-agency approach as the team was comprised of professionals from different backgrounds and agencies working together, whereas others felt it necessary to have seconded specialists from different agencies for specific tasks (Holdaway et al., 2001). This implies that the YJB guidelines were not specific enough, as not only are there very different approaches to practice across the country, but there is also a general consensus that services are not sufficient (Foley and Platzer, 2007; Hoare and Wilson, 2010). Whilst non-specific guidelines allow for local agency, they assume understanding of multi-agency issues and practice on the part of those working within local authorities which is not always the case amongst YOT managers, which has led to the disparity of approaches to mental health. This highlights the interplay between organisational accountability and professional discretion. Individuals should be able to used their professional judgement in practice, however, this should be done in a way that is commensurate with the overall approaches, aims, and principles of the organisation. It is the role of managers to ensure that professionals have the capacity to use their judgement, but in a way that is accountable (Humphrey et al., 1993). Accountability doesn't necessarily limit professional discretion, but ensures that it is used in a way that is legitimate (Canton and Eadie, 2008). Creating the

appropriate balance between discretion and accountability is difficult, and requires consideration at all levels of an organisation to occur successfully (Checkland, 2000b).

A distinction must also be made between multi-agency working and inter-agency working. Multi-agency working is where members of different services collaborate to achieve a specific aim or goal, whilst retaining their separate specialisms and identities. The seconded approach, where a specialist from CAMHS is brought into the YOT, would be an example of this. Inter-agency working is where different professionals come together in the same agency to fulfil the same role, each bringing their specific knowledge (Wigfall and Moss, 2001). This is how youth justice operated prior to the 1998 Crime and Disorder Act (Home Office, 1998). The issue with inter-agency working is that there is a high chance of specialisms being lost and a homogenisation of staff occurring (Fournier, 2002). It has been argued that establishing boundaries is an important part of professional work, protecting the founding principles and ethics of the discipline, and preventing market interests from changing the work or removing the focus from the public good (Fournier, 2002). Boundaries and professional identity is already a problem in YOS working cultures (Fournier, 2002; Holdaway et al., 2001), so it is necessary for the YJB to be clear in their guidelines to avoid this occurring.

The aims of the YOS involve aspects of both welfare and criminal justice, but it has never been clear if one has priority over the other. Debates around the punitive nature of the YOS and the level of welfare help it provides are pertinent because they highlight a central tension in the YOS that requires resolution. The debate between welfare and justice is largely concerned with what the limits of YOS practice are and what approach it should take. If the YOS is solely a criminal justice organisation, there is less need to provide welfare help beyond referring to appropriate specialist agencies. This is complicated by the people the YOS deals with. Agencies and bodies that work with young people have a different set of standards and guidelines to those that work with adults. Including the Children Act (Home Office, 2004) and Every Child Matters (Department of Education, 2003) legislation and guidelines for working with children have different priorities than those for working with adults. These emphasise safeguarding and ensuring the welfare of young people (Jones and Baker, 2009). In most cases this is relatively simple; in the YOS it requires balancing criminal and social justice. Whilst this is possible, it requires consideration and an awareness of the differences between these two approaches. The application of what justice is within the YOS and how it is applied should happen on an

organisational and structural level, meaning it is the domain of the YJB. It is more often the case that the results of these issues occur in practice and so are dealt with by low level workers and management. By enforcing a localist approach to multi-agency practice the YJB has moved the consideration of these larger philosophical issues onto individuals within local teams who must deal with them on a practical level. Seconded workers from agencies such as CAMHS will have a dramatically different approach to youth justice workers. Those from social welfare organisations will approach young people with more concerns around accessibility and social justice than criminal justice considerations. The opposite of this is true for those from criminal justice organisations. Neither approach is 'right' or 'better' than the other; both aspects should be considered when dealing with young offenders, and both are necessary to achieve true justice. The practical aspects of this are difficult and the structure of the YOS does not give consideration to these issues and has been becoming increasingly punitive (Bateman, 2011). This has led to questions of if the YOS should deal with welfare issues such as mental health at all.

**Mental Health of Young Offenders**

Mental health issues can have a profound effect upon an individual's life and affects up to one in four people in the UK (Meltzer et al., 2007). It is hoped that with greater awareness of mental health there will be greater understanding and reduced stigma towards people with mental health needs (Abdullah and Brown, 2011; Pinto-foltz et al., 2011). There are differing interpretations of what mental health is. In some cases, mental health issues are restricted to diagnosable disorders, in others the term is used more broadly to cover general mental distress. This has led to confusion and debate about how terminology is used and what is applicable (Janca and Sartorius, 1995; Salvador-Carulla and Aguilera, 2010). Historically, mental health has been perceived to be a medical issue and the domain of medical practitioners. In the last hundred years this has been challenged by psychological and sociological approaches (Bolton, 2009). The term 'mental disorders' has been broadly defined as disturbances of higher mental functioning (Fulford, 2012). Whilst this is quite a general definition, mental health work covers so many varied aspects that a specific definition is difficult to achieve without excluding any of the numerous approaches and views of mental health. There is debate as to whether a physical aspect needs to be present to qualify as a mental disorder. Medical approaches would suggest that some physical symptoms will occur if the disorder is not psychosomatic (e.g. chemical imbalances or altered neurological function), whereas other approaches do not agree (Bolton, 2009). As many mental disorders or mental health problems only present through behaviours, beliefs and thoughts, there are many subjective moral value judgements involved in diagnosis (Fulford, 2012). It has been argued that due to this, the concept of 'mental disorder' has been applied as a form of social control to maintain or enforce cultural norms (Bolton, 2009; Bracken and Thomas, 2001). The increasing number of classified psychological disorders has been cited as evidence for this argument, with there being claims that normal states are becoming pathologised (Bolton, 2009; Timimi, 2014; Wessely, 2008). These debates are ongoing, but some standardisation of terminology is necessary for practical reasons (Salvador-Carulla and Aguilera, 2010).

In this work the phrase mental health problem or mental health issue is used as a general term for mental disorders, mental distress, diagnosable conditions etc. This is due to the great variance of terms, as each has contextual meaning and associated inferences, they cannot be used interchangeably (Janca and Sartorius, 1995; Salvador-Carulla and Aguilera, 2010). A 'catch-all' term is more practical in this context, as this work is focusing on the provision of

services rather than specific mental health needs. Additionally, there have been user-led movements in recent years that have argued psychological issues should be discussed in terms of mental health opposed to mental ill-health as this pre-supposes an ideal or normal psychological state (Speed, 2006).

Some of the most common mental health issues relate to mood or anxiety. More severe mental health problems such as psychosis and schizophrenia are relatively rare (Meltzer et al., 2007; Wong et al., 2013). As with physical health conditions, there are differing degrees of severity regarding mental health. Often mental health issues can be managed through self-awareness and self-care techniques and do not have a pervasive impact on the lives of individuals (Burnett-Zeigler et al., 2012; Mitchell et al., 2011). More serious conditions are difficult to cope with individually though and require specialist help or care. In the UK at present mental health treatment is primarily initiated through general practitioners (GPs) as this is often individuals main health care provider. There are care pathways involving community mental health teams (CMHTs), assertive outreach groups, community care services or private practitioners. There are also specialist services for children and young people available through the NHS (CAMHS). Mental health problems are considered to be more serious in children and young people as they are more likely to affect development and worsen in later life than in adults (Aggleton et al., 2000; Williams et al., 2010), thus warranting a specialised service. Additionally there are differences in how disorders may be expressed and experienced in young people than adults which need to be addressed in a different way (Aggleton et al., 2000). The main differences between the various mental health services are the views of and approaches to mental health care. GPs take a medical view, meaning their primary approach is often to prescribe medication. CMHTs and CAMHS also utilise the medical approach, but there is more awareness of the variety of approaches to mental health and the debates about the need for the presence of physical symptoms. CAMHS utilises what has been called a "fact-plus-value" approach (Fulford, 2012), where both physical and psychological aspects are considered during diagnosis. Community services and private practitioners can vary greatly in terms of the approach they take. These services are more able to specialise and so vary, including psychodynamic, behaviourist, cognitive traditions, and more. When utilising private services, individuals have more choice about their treatment, in most cases the individual has input into decisions around the treatment and what they feel might work best for them. However, seeking private treatment can exclude those in poverty or with restricted finances, which may cause those most in need of mental health services to be unable to access these private services (Aggleton et al., 2000). In

NHS services (GPs, CMHTs, CAMHS) there is not always the same level of choice available, as these services have to maintain a more general level of provision and are less able to specialise. There is some consideration of individual's views and needs though (Fallon et al., 2012). The exception to this is when there is serious risk of harm to either the individual themselves or others. In this case the Mental Health Act (Department of Health, 2007) states that an individual can be placed into a secure setting to receive treatment until this risk is reduced. The secure setting is normally a hospital. Recently it has been found that police stations have been used to detain young people with mental health issues (Care Quality Commission, 2014). This has caused particular problems as this setting is not equipped to deliver care to vulnerable young people. Issues surrounding safeguarding contribute to the need for children and young people to have specialised mental health services.

Child and Adolescent Mental Health Services (CAMHS) is a division of the NHS that works specifically with the mental health needs of children and young people. In addition to the Mental Health Act, CAMHS must also abide by the Children Act (Home Office, 2004). The Children Act has a strong concern towards welfare and protection, which generally fits well with legislation dealing with health matters. There are some contrasting points between the Mental Health Act and the Children Act, generally around risk of harm (Almond, 2012). The Children Act specifies that custodial measures should only be used as a last resort, including sectioning (Home Office, 2004; Moon, 2000). This is not always carried out in practice though, and young people are sectioned at a high level which has drawn criticism (Care Quality Commission, 2014). Exact levels of young people being detained under the Mental Health Act are unclear as sectioning data is not published regarding age. Broader statistics show overall rates of detention are increasing compared to previous years (Care Quality Commission, 2014) which includes children and young people, and some local police forces have given exact figures for their area; Devon and Cornwall police detained 32 young people for mental health reasons in 2014 (Hayes, 2014). Children with one mental health diagnosis are more likely than adults to also have another condition (Callaghan, Pace, et al., 2003), this higher level of co-morbidity means that young people's mental health needs are often more complex. Additionally, young people with mental health needs are more likely to be in another vulnerable group also, such as young offenders (Stallard et al., 2003). Young offenders also are more likely to be sectioned than others with mental health needs (Redlich, 2007). There is a need for clarity as to why this occurs though. It could be that there is increased need in this population, warranting higher levels of detainment due to the Mental Health Act. However, it could also be

due to the stigma attached to both mental health need and youth offending leads to harsher measures being applied than is necessary (Moon, 2000). This 'double discrimination' (Redlich, 2007) can make the process of receiving mental health treatment highly traumatic and may possibly exacerbate an existing issue or trigger a new mental health condition (Harrington et al., 2005).

Mental health professionals who work with children and young people require specific training and accreditation and there are differing standards of expertise. Within CAMHS there are four levels. Tier 1 of CAMHS is based on receiving referrals from other agencies or sources. This includes social services, schools, GPs etc. Where professionals believe there may be a need for CAMHS intervention, primary mental health workers will consult and refer if necessary. Referrals lead to tier 2, which is comprised of specialist input from primary mental health workers, psychologists or CPNs. This is the main level of CAMHS work, comprising of assessment and intervention. Interventions available at this level include anger management and Cognitive Behavioural Therapy (CBT). If needs cannot be met at this level a referral is made to tier 3. Tier 3 is comprised of intensive specialist services and is above the level of primary mental health workers. Tier 3 staff are generally qualified psychologists or equivalent. Specialist therapeutic work occurs at tier 3, such as family interventions or play therapy. Beyond this is tier 4, which is inpatient care. This is in place for specialist therapeutic care for the most severe problems (Callaghan, Pace, et al., 2003). A variety of treatments are available through CAMHS, including medication, CBT, and person-centred therapy (Aggleton et al., 2000; Callaghan, Pace, et al., 2003). The approach chosen depends on the needs of the young person and the training and knowledge of the practitioner. Generally CAMHS is based upon a medical model, but it is recognised that other approaches are valid and useful (Colombini et al., 2013). This means that medication is the most common treatment within CAMHS (Colombini et al., 2013), but other approaches such as CBT or discussion based therapeutic work are not excluded.

Recently CAMHS has become involved in multi-agency approaches. As mental health is a factor in numerous other aspects of life, working with other agencies will allow young people better access to CAMH services. CAMHS works with the YOS in particular as young offenders have a high level of mental health need, but are difficult to engage with services (Bevington et al., 2013; Suthers, 2011). By working with the YOS, CAMHS has access to young people it may not otherwise. Other multi-agency approaches are generally not statutory; the link between

mental health and offending is sufficiently supported that this was deemed necessary by the YJB (Anderson et al., 2004; Harrington et al., 2005; Youth Justice Board, 2011b). Within youth justice, the term mental health is used quite broadly, covering a range of problems. Substance abuse and learning difficulties are sometimes considered to be within the remit of mental health services, but the YOS considers these as separate issues to mental health, requiring their own professionals. As such, within this research, substance abuse is not considered within the remit of mental health work.

The YOS is a criminal justice organisation. Not only is this evident in the work that it does, but this is supported by the recent change from its governing body; the YJB, being an independent QUANGO to becoming part of the Ministry of Justice (Puffett, 2013). As it is specifically aimed at working with children and young people, the YOS must also abide by the Children Act (Almond, 2012; Home Office, 2004). This means that the YOS cannot solely consider justice and public protection as stated in its aims, but must also account for the welfare of young people. This has caused some debate within youth justice around how aspects of criminal justice work are to be balanced with the safeguarding of young offenders (Jones and Baker, 2009). It centres largely on issues of priority, whether justice takes precedence over the welfare of a child, or vice versa. Whilst this debate is largely ideological and philosophical in nature, those within the YOT have to meet both standards to some level. To this end, YOTs have a requirement to have some form of mental health provision. Young offenders have a high level of mental health need (Anderson et al., 2004; Williams et al., 2010; Wilson, 2011), which justifies the choice of this specific aspect of welfare needs as a focus of practice. To better understand the causes of offending, research has tried to find associated factors. This has led to a long list of factors that are predictive of offending and re-offending. These range from education, familial history of offending, race, poverty, social support to health needs (Burnett-Zeigler et al., 2012). One of the most prominent of these factors though, is mental health (Carswell et al., 2004; Marshall et al., 2011; Pettitt et al., 2013; Short et al., 2012). This suggests that meeting the mental health needs of young offenders may be a way for the YOS to achieve its aims.

The high levels of mental health problems within the YOS are a point of interest for many researchers. It is important to avoid causal statements in this area, as both mental health and youth offending are subject to stigma (Anderson et al., 2004), suggesting a causal link between

the two will likely increase this and could potentially lead to mental health issues in young people being criminalised. It is evident though that there is a link of some form between the two (Anderson et al., 2004; Townsend et al., 2010; Williams et al., 2010; Young and Thome, 2011). Young people with mental health problems are more likely to offend and young offenders with mental health problems are more likely to re-offend (Wilson, 2011). There is a need for care not only when researching this area, but also when applying the findings. The YJB have been increasingly favouring evidence based practice (Newnham and Page, 2010), meaning that YOS work, where possible, should be based in or supported by some form of evidence. Often this refers to research and is attempting to make practice more accountable (Archer, 2013). Whilst it has been established that there are higher levels of mental health need amongst young offenders (Anderson et al., 2004; Leon, 2002; Nicol et al., 2000; Townsend et al., 2007), there is no clear reason at present as to why this is. Without further understanding of these issues, application to practice will not be as effective as it could. Finding factors relating to offending has contributed to the risk culture within youth justice (Blyth et al., 2007; Moon, 2000; Pettitt et al., 2013). Risk based approaches have been criticised as being reductionist; viewing complex issues outside of their context, and as a task to be completed, opposed to an issue affecting a young person's life (Blyth et al., 2007; Jones and Baker, 2009; Pettitt et al., 2013). It is difficult to find the correct balance as at present there is not full understanding of how these factors are linked, but it is clear that there is need, leaving the YJB to decide upon how to fulfil need without all the necessary facts regarding how the two factors interrelate. The YJB has a duty to do this as they are required to tend to the welfare of young people, in addition to preventing offending and re-offending.

By including a preventative aspect in their aims the YOS should address factors that are linked to offending, including mental health. The YOS does this for numerous factors, with many YOTs having dedicated substance abuse specialists and education workers. With mental health there are different types of provision that have developed within YOTs depending upon local levels of need and resources (Khan and Wilson, 2010). A key aspect of this is funding; some YOTs will have better ability to cater to mental health than others. Two thirds of YOT funding comes from local authorities and supporting agencies, the final third comes from government (Commons Select Committee, 2013). There have been significant funding cuts since 2010 which have impacted the YOT greatly. From 2013 some YOTs will have their funding controlled by Police and Crime Commissioners (PCCs); this is a cause of concern for some as not all PCCs are in favour of diversionary work (Commons Select Committee, 2013). The

differences in funding means that provision is greater or lesser in some areas of the country (Foley and Platzer, 2007). The service young people receive then varies depending upon where they live, which can be perceived as unjust (Lambert et al., 2005).

With a strong correlation between offending behaviour and mental health it would be expected that there would be a high level of mental health need amongst young offenders. This is supported by research, but the exact level of need varies depending on the assessment tools used. Amongst the general youth population, mental health need is approximately 12% (Marshall et al., 2011). Mental health need for young offenders ranges from the level of the general population, through to 90% with numerous estimates between these two extremes. (Anderson et al., 2004; Centre For Social Justice, 2011; Marshall et al., 2011; Rawal et al., 2004; Townsend et al., 2007; Vostanis, 2007). This variation is largely due to using different mental health assessments or looking at specific subgroups within the offending population. The Asset, SIFA and SQIFA are the assessments used by the YOT for mental health; these have been described as limited and inadequate (Almond, 2012). Research uses a variety of other assessments including the Strength and Difficulties Questionnaire (SDQ), Centre for Epidemiological Studies Depression Scale, the Warwick Child Health and Morbidity Profile, The Health of The Nation Outcome Scale for Children and Adolescents (HoNOSCA), the Beck Hopelessness Scale, the Schedule for Affective Disorders and Schizophrenia or School-Age Children- Epidemiologic version (K-SADS-E) and others (Almond, 2012; Anderson et al., 2004; Liebenberg and Ungar, 2014; Marshall et al., 2011; Nicol et al., 2000; Stallard et al., 2003; Townsend et al., 2007). This variety of tools gives a high variance of levels of mental health need. The SDQ seems to be a more commonly used tool, finding between 35% (Marshall et al., 2011) and 44% (Anderson et al., 2004) of young offenders having a mental health need that warrants intervention. The HoNOSCA looks at different aspects of mental health in detail opposed to giving an overall score, and reports 42% of young offenders have symptoms of an affective disorder and 8% have symptoms of a psychotic disorder (Anderson et al., 2004). One of the advantages of the HoNOSCA is that it looks for symptoms opposed to an overall diagnosis. This means that contextual factors can be taken into account by the person administering the assessment. When using the K-SADS-E extremely high levels of need, over 75%, were found; this also included young people in custody opposed to only those in the community which may have skewed the data (Nicol et al., 2000). There have been questions about this research, with calls for randomised control trials to be carried out on mental health assessments to gain a clear comparison, but the same work found that numerous mental health

assessments show high validity (Townsend et al., 2010). This makes it difficult to say how accurate these estimates are. The YOS does not require the use of these assessment tools, instead using specifically developed tools for youth justice. The use of tools conceived from a youth justice perspective rather than a mental health perspective may contribute to the underestimation of mental health need within the service (Baker, 2005; Wilson, 2011).

Mental health need is more prevalent amongst those in custody than in the community (Harrington et al., 2005; Mitchell et al., 2011), higher needs are found amongst those from minority ethnic groups (Rawal et al., 2004), those with familial history of offending (Centre For Social Justice, 2011; Sawyer et al., 2010), or lower socio-economic status (Callan et al., 2011). These are complex issues and often young people will fall into a number of these categories which may affect the results of this research. The complexity of young offenders needs makes research in this area difficult and this should be considered when trying to apply the findings. There are differences across broader factors also, for example gender (Moloney and Moller, 2009). Many of these estimates may not be accurate though, as not all young people within the YOS are assessed for mental health need. An assessment only takes place if a youth justice worker feels it may be necessary. In addition to this the primary assessment tools within the YOS have been criticised as inadequate (Almond, 2012), so even if an assessment does take place, needs may still be unaddressed. Additionally, if mental health need is identified, intervention is voluntary on the part of the young person. This means that the attitudes of young people towards mental health are an area of interest (Yap et al., 2012). Stigma around mental health is a particular problem within the YOS, often young people will not engage with mental health services because of it (Crossley, 2012). This means problems go untreated, increasing the chance that individuals will self-medicate with drugs or alcohol (Stallard et al., 2003), increasing the risk of re-offending. Stigma surrounding mental health also varies across culture, with certain groups being less likely to use mental health services (Myers and Goddard, 2012). This poses problems for YOTs where there are higher levels of these groups in the local population. As race is a predictor of entering the youth justice system (Mallett, Stoddard-Dare, & Seck, 2011) and also a number of factors predictive of mental health issues correlate with racial differences (Rawal et al., 2004), it is important that stigma is overcome so that young offenders needs are addressed.

The voices of young people are not a prominent feature of the YOS. Whilst this is improving due to groups like the Howard League's U R Boss campaign (The Howard League for Penal Reform, 2011b) and research by Young Minds (Campbell and Abbott, 2013) which prioritise and promote young people's views, more could be done. When research has looked specifically at the views of young people regarding mental health within the YOS, it has been found that efforts within the YOS and YJB to consider young people's views have been lacking (Suthers, 2011). This is particularly problematic when addressing mental health. Mental health problems are highly personal and often subject to stigma (Abdullah and Brown, 2011; Anderson et al., 2004). For interventions to be successful and the service to meet its aims, it is required that young offenders feel comfortable disclosing mental health needs within the YOS. If a person-centred approach is being used this is essential (Bracken and Thomas, 2001; Newnham and Page, 2010; Sawyer et al., 2010). It is also necessary that youth justice workers are aware of how these disclosures should be dealt with. There are a wide range of mental health issues that affect young people, some of which are difficult to diagnose or identify (Jensen et al., 1999; Nicol et al., 2000). Amongst young offenders there are higher levels of need, particularly regarding certain disorders. Common problems amongst offenders are conduct disorder, ADHD, affective disorders and substance misuse (Leon, 2002). There are also high levels of learning disabilities (Harrington et al., 2005). Exact statistics are not necessarily useful though, as there are high levels of underreporting of mental health problems, and internal disorders like depression are often unnoticed as there are few outward symptoms (Leon, 2002). That measures of prevalence of this problem are variable shows the difficulty of assessing and understanding mental health. The YOS is frequently criticised for not meeting the needs of young offenders (Harrington et al., 2005; Leon, 2002; Patel et al., 2007) and a lack of understanding of mental health could be part of the problem. That mental health needs have been linked to higher mortality rates amongst young offenders (Marshall et al., 2011) stresses the need for this issue to be addressed in detail.

It is clear that there are high levels of need amongst young offenders. How need should be assessed is a point of discussion. There are multiple possible mental health assessments, ranging from general or global scales, like the SDQ, to those looking for specific conditions, such as depression inventories. Those looking for indicators of a specific condition are likely to be more accurate than assessments looking to highlight general mental distress (Corcoran, 2005). This is because mental health issues are highly diverse and can take very specific forms meaning that general assessments have to be extremely broad to cover everything, which also means that

there is the possibility of overlooking or oversimplifying the issues (Corcoran, 2005; Wilson, 2011). There is also the possibility of overestimation if the assessment is broad in scope. There is a need for general assessments within the YOS though. Youth justice workers are not necessarily trained in mental health and so may not know which specific assessment tool would be appropriate. A general assessment is necessary to help youth justice workers identify when they should refer to a specialist. At present the YOS uses Asset for primary general assessment. This includes a section on mental health (See Appendix 8.7), but this has been criticised as being simplistic (Almond, 2012). If need is identified through the Asset, the SQIFA (Screening Questionnaire Interview for Adolescents) is used for a more detailed mental health assessment, then a referral is made to a mental health worker, who uses the SIFA (Screening Interview for Adolescents) to further define need. These tools were chosen by the YJB rather than CAMHS or other mental health organisations. The Asset, SQUIFA and SIFA are not rated as being highly reliable in assessing mental health and are considered to underestimate levels of need (Baker, 2005; Wilson, 2011). Estimates from other assessment tools like the SDQ give higher estimates (Liebenberg and Ungar, 2014). Whilst all of the assessments show higher need amongst young offenders than the general youth population, there is a need for accuracy to ensure that need is not being overlooked or missed. The YOS is required to address welfare and has specifically set out to provide for mental health (McClelland and Cavanagh, 2009). Also, one of the aims of the YOS is to prevent offending and re-offending and one of the key factors linked to this is mental health. In addition to making mental health provision a statutory requirement of YOTs, catering to mental health needs will help the YOS achieve its aims. Ensuring that the assessments used to highlight need are accurate and not overlooking particular groups is imperative.

Once a referral has been made to a mental health specialist, more specific assessment tools may be used to identify issues. These vary depending on the knowledge and approach of mental health professionals. Those from a medical background may refer to the DSM IV (Diagnostic Statistical Manual, a list of recognised mental disorders and their symptoms), those taking a cognitive-behavioural standpoint may use Beck's depression inventory, and those preferring person-centred approaches might use an in-depth interview. The differences in approach by professionals affect what problems they are more likely to diagnose and treat successfully (Doughty, 2006; Duggan et al., 2002; Timimi, 2014). Using specific assessments has also shown which disorders or issues are more prevalent amongst young offenders. The most common mental health problems for young offenders are depression, conduct disorder, ADHD and learning difficulties (Leon, 2002). Conduct disorder and ADHD are particular points of

interest because a person with one of these disorders is more likely to engage in behaviour that could be perceived as criminal (Leon, 2002; Redlich, 2007). There are additional concerns around conduct disorder and ADHD as they are both considered to be over diagnosed (Jensen et al., 1999). This highlights discussions of accountability for young offenders' behaviour and links into the "mad or bad" debate (Verdun-Jones, 1989). This debate centres on the cause of undesirable behaviour, if it is due to a mental health problem ('mad'), or the person's personality ('bad'). The problem with these discussions is that they simplify the issue and try to isolate complex factors. This also ties into the arguments that mental health classification is a form of social control (Bolton, 2009; Timimi, 2014; Wacquant, 2010). This has been argued particularly regarding ADHD in young people and the pathologising of behaviour (Jensen et al., 1999; Wessely, 2008).

In adult services different agencies address mental health and criminal justice. There is some overlap of the agencies and information sharing, but it is rare that one agency would provide both of these services in the way that the YOS does. The YOS provides both criminal justice and mental health care. This can lead to conflicts of interest within the organisation and questions of priority (Mallett, 2009). It has also been perceived that by delivering mental health interventions within a criminal justice setting, the two constructs are being linked, leaving a possible interpretation that mental health is being criminalised (Pettitt et al., 2013). This is particularly relevant for young people whose behaviour is resultant of their mental health (e.g. conduct disorder). As practice in youth justice is becoming more oriented towards risk assessment, there are increasing trends towards categorisation of factors. Giving either welfare or justice priority over the other risks categorising young offenders as either 'mad' or 'bad' (Verdun-Jones, 1989). The effects of labelling individuals can be dramatic and long lasting and should be avoided where possible (Aggleton et al., 2000). A balance must be struck between the two concepts so that mental health can function within youth justice. The problem with treating mental health as part of the criminal justice process is that mental health treatment is largely voluntary, whereas criminal justice is not. Magistrates cannot require mental health treatment as part of a sentence as this would be making treatment involuntary. Treatment is only compulsory when a person is deemed to be at serious risk of harm to themselves or others (Department of Health, 2007). This is something that the majority of those within the criminal justice system are not qualified to assess and so must refer to mental health professionals. Once a referral has been made and treatment offered, it is not clear if it is presented as a voluntary service to young people. Low levels of service engagement (Donoghue, 2011; Khan, 2010b; Suthers, 2011;

Townsend et al., 2007) could be due to young people attending services as they feel obliged to, rather than choosing to. More research is needed into this area. If mental health intervention and treatment can be perceived as being linked to criminal justice, this may also make it less likely that young people will engage with the service, and thus less likely that the intervention will be successful (Barrett et al., 2006). Engagement is already a problem within youth justice (Liebenberg and Ungar, 2014) with many young people being unwilling to co-operate with a system that they perceive to be punishing or persecuting them. It is also most often those with the most complex needs that are hardest to engage (Bevington et al., 2013). So allowing mental health services to be accessible by those within youth justice while the services are able to operate in a predominantly independent manner is important.

Whilst the need for mental health services to retain their approach has been stressed by research, recent trends within youth justice suggest that this may not be implemented. The perceived punitive turn (Muncie, 2008), managerialisation (Holland, 2000), and responsibilisation (Such and Walker, 2005) all impact upon youth justice practice and culture. The main outcome of this is the perception and treatment of young offenders. Factors that previously would have been considered to be mitigating are more likely to be categorised as risk factors by the YOS (Jones & Baker, 2009). Whilst youth justice workers may not hold these views personally, the structure of the YOS is becoming more geared towards these practices making it difficult for differing approaches, such as welfare, to be considered (Blyth et al., 2007). The idea that individuals are solely responsible for their behaviour is a political one and has been promoted through neo-liberal ideologies which are becoming more prevalent in British politics (Hall, 2011). This move towards neo-liberal ideologies makes multi-agency working more difficult as it means there is an even greater difference between approaches of agencies.

Mental health as a professional area has a strong ethical basis and this creates a specific approach and culture amongst professionals. One of the key trends in mental health at present is person-centred approaches (Bevington et al., 2013). This generally consists of working in tandem with individuals seeking help and giving them control of their treatment, based upon the work of Carl Rogers (British Association for the Person Centred Approach, 2013). This has been promoted by patient advocacy groups and greater awareness of service users' views (Colombini et al., 2013; Freake et al., 2007; Suthers, 2011). Mental health interventions are more successful if they are supported by the individual (Paul, 2004). This is mainly because

mental health professionals guide individuals through treatment, the individual themselves has to commit to the treatment. This is particularly true of cognitive-behavioural therapy (CBT) which is one of the more popular approaches to mental health treatment at present (Patel et al., 2007). Numerous mental health treatments also require time. There is no set length of time that a specific treatment will take, it is highly dependent up on the individual and their specific issues. Another key aspect of mental health practice is the relationship between the professional and individual. There must be trust in this relationship and stability for the individual to feel secure. This highlights why mental health treatment is voluntary, the necessary relationship cannot occur if an individual has been coerced or forced to seek treatment. Professional ethics are an important aspect of gaining and maintaining this trust. Confidentiality is of high importance within mental health work and can only be broken if it is deemed that there is serious risk of harm to others (Ivankovic, 2010). These ethical views and approaches are strongly linked to the profession and are unlikely to change. This causes problems when adopting multi-agency approaches. The YOSs ethical views occur from a different set of standards and approaches to those of mental health and so do not necessarily agree on how issues should be treated. This has been a particular issue between the YOS and CAMHS and contributed to the tensions between the services (Sutherland, 2009).

The differences between the YOS and CAMHS are not just on a practical level though. The overall differences in approach and philosophy are what led to the issues within practice between the two organisations. CAMHS is a highly value-based organisation, taking a specific stand and viewpoint with a socially just approach (Nilsson et al., 2011). The YOS is a criminal justice organisation, and whilst welfare is a concern, it is not the main priority of the organisation, as their aim is to prevent and reduce offending (Jones and Baker, 2009). To achieve this aim, the values of the YOS differ from those of CAMHS. This is understandable for each organisation, but when attempting multi-agency working these differences must be considered to attempt to avoid tensions between the two cultures and issues within practice. This is not to imply that multi-agency approaches are unworkable. It is both possible and desirable to have social, criminal and welfare organisations working together. To achieve this though, the differences in approach must be considered and strategies created to overcome the practical problems this creates. This is particularly necessary when working with vulnerable groups, like young offenders with mental health needs. Approaches to practice are also strongly impacted by the culture of the workplace and structure of services (Artaraz, 2006). Provision of mental health services is particularly an issue in the YOS, as there is no standardisation across

the service as a whole. This then impacts the ability of the YOS to meet its aims and deliver justice.

**Forms of Mental Health Provision**

Due to the high levels of mental health need amongst young offenders, it is required that YOTs provide mental health care. There is no set standard of provision for this, allowing local services to assess needs and provide services tailored to the area (Khan and Wilson, 2010). This assumes both understanding and knowledge of mental health needs and services on the part of strategic and operational managers within the YOS. As those within youth justice are not necessarily trained in mental health this knowledge is not always present. Varying forms of mental health provision have arisen within YOTs across England and Wales, meaning that the level of service a young person receives is dependent upon where they live. This may be perceived as unjust as it means there is not equal opportunity of access to services (Myers & Goddard, 2012).

Provision of services is affected by numerous factors, the most prominent being the availability resources. If there is little funding available for mental health provision within a YOT, or there is a shortage of mental health workers within the local area provision will be limited by these practical constraints. In addition to being able to access resources, there is a need to understand what appropriate provision would consist of. Mental health needs are complex and young offenders have been found to have extremely high levels of need (Anderson et al., 2004; Callaghan, Pace, et al., 2003; Corcoran, 2005; Kessler, 2002; Marshall et al., 2011). To address these needs, commissioners must understand not only the extent of the need within the area, but also how this should be approached. Many of the managerial staff within the YOS who commission services have not been trained in mental health and so may not have the necessary level of understanding to know what services are needed to address young offenders mental health needs (Currie et al., 2011). In some areas the management had a personal interest in mental health, which helped in the commissioning of services (Holdaway et al., 2001). However the assumption of knowledge on the part of the YJB was unjustified and clearer, more structured guidance should have been given regarding commissioning mental health provision. Another factor that may have played into commissioning decisions is attitudes towards mental health. Mental health problems are highly stigmatised (Abdullah and Brown, 2011; Timimi, 2014), as are young offenders. When working with such a vulnerable group it is imperative that professional judgement is not compromised by stigma. This is not always the case though, it has been found that personal values and judgements impact upon youth justice work at various levels throughout the YOS including magistrates (Phoenix, 2010), managers and youth justice

workers (Baker, 2005). The effect of this upon practice may be that young offenders will not be referred to appropriate services, service provision within the YOT may not be adequate or mental health status may not be considered during sentencing. The attitudes of managers are of particular importance as it has been found that managerial attitudes have a strong impact upon the views and working practices of others and working culture (Haslam, 2014). As the culture within the YOS has been described as 'fractured' (Wigfall and Moss, 2001) and tensions are prevalent, the impact of managerial views should not be overlooked. This affects provision of mental health services as managers are often involved in commissioning services and structuring YOTs (Holdaway et al., 2001).

The variety of mental health provision within the YOS was unclear until a study by Khan and Wilson (2010). Surveying every YOT in England and Wales with regards to mental health provision, Khan and Wilson found six main forms of provision. The majority of YOTs conformed to one of these six types. It is interesting that despite having little formal guidance as to the structure of mental health provision, six distinct approaches have occurred. It is prudent to consider the approaches found by Khan and Wilson as "ideal types" (Bancroft and Rogers, 2010) opposed to strict categories though. This is because their work is representative of mental health provision in 2010, whilst this is quite recent, the YOS is continually changing (Myers & Farrell, 2008) and so provision may have been affected. As ideals or archetypes of provision they are appropriate and can be used to gain greater understanding of how mental health practice occurs within the YOS.

Khan and Wilson surveyed 33 YOTs in England and Wales with regard to mental health provision. These teams were spread across the country and included both rural and urban areas. Information was collected via semi-structured interviews, postal surveys and telephone interviews. Best practice guidelines and inspection reports were also considered. It was felt necessary to have a wide-scale investigation of available mental health provision within YOTs, because since its implementation in 2002 mental health workers within YOTs were deemed to have 'drifted' into different roles (Healthcare Commission and Her Majesty's Inspectorate of Probation, 2009). The aim of the work was to create guidelines for commissioning of services to help cater to needs. Forms of provision were found and briefly assessed in terms of their ability to meet young people's needs. There was no detailed evaluation of provision as this was beyond the scope of the work. The majority of YOTs had seconded registered mental health nurses from

CAMHS, but there were a variety of specialist roles including clinical psychologists, art therapists and community psychiatric nurses. From their data six main types of provision were outlined, each of which is described below.

*Lone Worker*

This is the simplest of the six types, comprised of a single mental health professional, based within the YOT full time. Often they may be seconded to the team through another organisation like CAMHS. Khan and Wilson generally found these workers to be energetic and creative in their practice, but risked being isolated from the wider mental health community and possibly having their specialisation taken for granted within the YOT, by being asked to take on regular caseloads. This was the most concerning approach in Khan and Wilson's opinion as not only were the workers being placed under stress and overwork, but the young people in an area with this type of provision were not receiving the necessary help due to lack of resources. There was also a risk of 'drifting' into YOT work with this approach, meaning that the role of a mental health worker was either not clearly defined or the boundaries of the role were not enforced.

*Foot-in-foot- out*

The "Foot In Foot Out" approach may also be based upon a single practitioner, but in this case the worker does not spend their time solely within the YOT. The foot-in-foot-out type involves a worker who is also linked to a local mental health service or CAMHS and spends equal amounts of their time within each team. This may also take place with two workers in the form of a job share or similar schemes. This creates a better understanding of improvements and trends in clinical practice, which can be used to improve working within the YOT. In addition to this, the dual roles mean that the worker has the opportunity to have a break from the stresses of YOT work, thus lessening the risk of burnout. However, as this is often limited to a single worker still, practice is limited by the knowledge and experience of this individual, and would benefit from having more support and greater resources. There is also the risk of the worker being given the stress of two jobs, there must be communication between the two services for this model to work appropriately.

*Health Team Within a YOT*

This approach involves having a number of specialised workers within a YOT full time specifically for mental health. This overcomes the problems of the lone practitioner and foot-in-foot-out formats by having greater support and resources. It also means there is more chance for informal discussions between mental health staff and youth justice workers, or for assessments to be conducted jointly rather than by the youth justice worker alone. This means that there is a greater opportunity for young people to receive the help they may need. As there is less linkage to clinical practice there is a danger of losing sight of current clinical improvements or trends. As all the interventions are done 'in house' there is less use of community based interventions. Interventions are also limited by the knowledge and training of mental health workers, which may not be furthered without interaction with CAMHS or other sources of professional development. A young person receiving mental health services through this approach would have to attend the YOT for this also, which may solidify any identity as an offender which could be counter to the aims of the treatment. This is an imperfect form of provision for that reason. It does mean though, that there are always mental health staff available for youth justice workers to liaise with, and there is less risk of burnout or 'drifting' roles, as there is the support of other mental health workers.

*Outreach Consultative*

Youth Offending Teams cover specific geographical areas, some of which are limited to a centralised area; others cover larger more rural areas. For these rural areas it is often problematic for young people involved with the YOS to get to offices in specific places for meetings, interventions and appointments etc. This has led to the "Outreach Consultative" form of provision. This allows a specific team to deal with the mental health referrals for a specific area, finding services that are more local to individuals rather than providing services themselves. This often means there are clear pathways and a good knowledge of local services within the team. It also means that young people are more likely to get services that are more appropriate and accessible to them. Usually this approach runs with a number of mental health workers, each assigned to a specific area. As there is work done with a larger number of services across an area than with other types of provision, there is less demand upon one service from the YOT and referrals are much less likely to be refused and more likely to be dealt with

quickly. This approach is strongly dependent upon local services having the funding to continue running though, and being able to deal with the needs of young offenders. The positives of this approach are great, but as it is tailored to a specific type of area it could not be applied in a more widespread fashion.

*Virtual Locality*

Overall Khan and Wilson suggest that the "Virtual-Locality" form of provision is the most effective for delivering mental health support to young offenders. This approach allows workers to be strongly involved with Youth Offending Team staff, often having a constant physical presence within the team, whilst also being strongly linked to specialised mental health organisations such as CAMHS and other community based initiatives. Having this set-up allows mental health workers to retain clinical links and awareness of current trends and advances in practice, whilst being aware of how best to work within youth justice to achieve the best outcomes for the young people involved. Having a physical presence within the YOT also allows for informal discussions to take place with Youth Justice Workers, assessments to take place quickly without the need for waiting lists, and referrals to be made together, so that the appropriate criteria for CAMHS or other agencies are met and appropriate information is shared where necessary. This approach was also favoured by staff, who found they had appropriate levels of support, were supervised by both clinical and youth offending staff, and that they were more effective in their post as they had better knowledge of local services and what pathways were available. The main disadvantage of this type of provision is that to be truly effective service commissioners need to work with staff when deciding where funding is most necessary or useful. This ensures that valuable services are able to continue running.

*External One Stop Health Shop*

Another form of provision that has been found in a specific area is the "External YOT Health One-Stop-Shop". This is based upon a specific health team working for not just the YOT, but the primary care trust, local authority and other local services such as drug action teams. By

providing help to young people from varied agencies with differing needs and backgrounds, there is a great capacity for understanding complex and multiple needs. Also as this type of provision is linked to the YOT but not specifically part of the YOT, young people are not stigmatised or labelled as offenders in relation to their health needs, which is positive. There is less risk of burnout within this approach as there is a large team of mental health workers, and there is also little chance of drifting roles as the "One-Stop-Health-Shop" is set up as being external to the YOT. Whilst being able to look at the needs of a young person in this way fosters social justice, not having a presence within the YOT means there are still issues surrounding assessment and referrals which is where some of the larger issues are within youth justice mental health services.

The main impact of the different types of provision is the accessibility of mental health services. This is linked to resources levels, one person will not be able to do the same amount of work at as two or more people. Young offenders who live in an area that uses the lone worker form of provision are less likely to receive the same level and standard or care as those who live in an area with greater provision. This disparity in service is a social justice issue, as institutions should attempt to remove differences based on factors such as area (Lambert et al., 2005). Khan and Wilson noted the problem of accessibility inherent in differing forms of provision, the types of provision were not evaluated further though. The study aimed to make clear what mental health provision existed within the YOS rather than to evaluate it. Aside from accessibility, one of the issues mentioned by Khan and Wilson was that of stress placed upon mental health workers. They discuss the possibility of burnout and dropping standards and the risk of mental health workers being asked to do YOT work that is beyond the remit of their role. Problems within mental health provision in the YOS have been raised by other researchers also (Artaraz, 2006; Doughty, 2006; Gharabaghi, 2012; Myers & Farrell, 2008), meaning that this is a significant issue that warrants further research.

**Rationale- The Problem Situation Expressed**

Considering all of these strands of literature together raises a number of questions about the provision of mental health services within the YOS. Research looking at practice within the YOS surrounding welfare needs has found that the mental health needs of young offenders are often unmet (Anderson et al., 2004; Leon, 2002; Nicol et al., 2000; Patel et al., 2007; Stallard et al., 2003; Townsend et al., 2007, 2010; Vostanis, 2007). There has only been one large scale investigation in to the structure of mental health provision within British youth justice, which found six distinctive types (Khan and Wilson, 2010). Youth justice as a whole has also been found wanting by research in terms of satisfying both social and criminal justice (Bradt and Bouverne-De Bie, 2009; Goldson, 2000b; Muncie, 1999, 2008; Myers and Farrell, 2008; Pitts, 2001; Smith, 2010; Yates, 2012). These issues have been present throughout the history of the YOS, implying that change or different approaches are required. That concerns that the YOS is not meeting its core aims persist suggests that previous strategies for improvement have not been successful. The majority of the changes implemented by the YJB to create improvement have impacted on practice level, but not above this. That these practice level interventions have not created the aimed for changes suggests that structural change may be more beneficial for the service (Goldson, 2011). There are also concerns about the underlying approach of youth justice and the risk of overlooking social justice (Goldson, 2000a; McLaughlin and Muncie, 2000; Muncie, 2008). From this, there is a need to understand what underpinning theory or standpoint would allow structural reform within the YOS to better meet the aims the aims of the service, allow mental health work to meet the needs of young people, and to create better provision for mental health services.

The problem situation that is central to this work is that mental health provision within the YOS is not meeting the needs of young people. This specific situation is linked to a number of larger issues within the YOS, and is particularly exemplary of the tensions between social and criminal justice (Bradt and Bouverne-De Bie, 2009; Cook, 2006; Smith, 2005). Mental health work within this context is a good example of this because the placing of a voluntary, welfare oriented service within a mandatory, criminal justice context makes the tensions between the two approaches explicit. Additionally, the issues between welfare and justice in practice are reflective of the larger philosophical issues between social and criminal justice. Previously the YJB has attempted to improve practice by implementing changes at this level, such as renewed

guidance and practice standards (Youth Justice Board, 2004, 2013a, 2014b, 2014c). These standards and guidance often relate to the time scales in which certain aspects of practice should occur, or what tools or approaches should be used within practice. Making changes to practice in this way, whilst not reforming the management level of the YOS has been perceived as evidence of managerialism in the YOT, and lessening professional judgement of youth justice workers (Baker, 2005; Barry, 2000; McLaughlin and Muncie, 2000). These changes have not brought about the improvements sought by the YJB, so considering this problem situation in terms of the philosophical underpinnings and larger structures of the YOS may provide greater insight. To understand (and hopefully resolve) the problem situation of young offenders mental health needs going unmet on this scale, the structure of the YOS and how these issues arise within it need to be considered and expressed. In this case the term 'structure' relates to both the organisation of the YOS, and also the culture which has helped shape the organisation. The organisational structure of the YOS is clear, the relationship between the YJB and individual YOTs is explicit, as is the relationships between staff within them. The working culture within the YOS is implicit though, and whilst some research has looked into the culture within the YOS (Ellis and Boden, 2000), the way in which this impacts upon practice and the organisational aspects requires further investigation.

Underpinned by the literature, the organisational and cultural aspects of the YOS that forms the structure are broadly expressed by Diagram 2.2. This diagram expresses the problem situation, and is the second stage of the SST process, as can be seen in the 'map' of the research (*See Page 12*). In terms of the research, this diagram shows the main points from the literature that relate to the culture of the YOS, and what has contributed to the problem situation. Diagram 2.2 also shows what is not known from the literature, which this research will address.
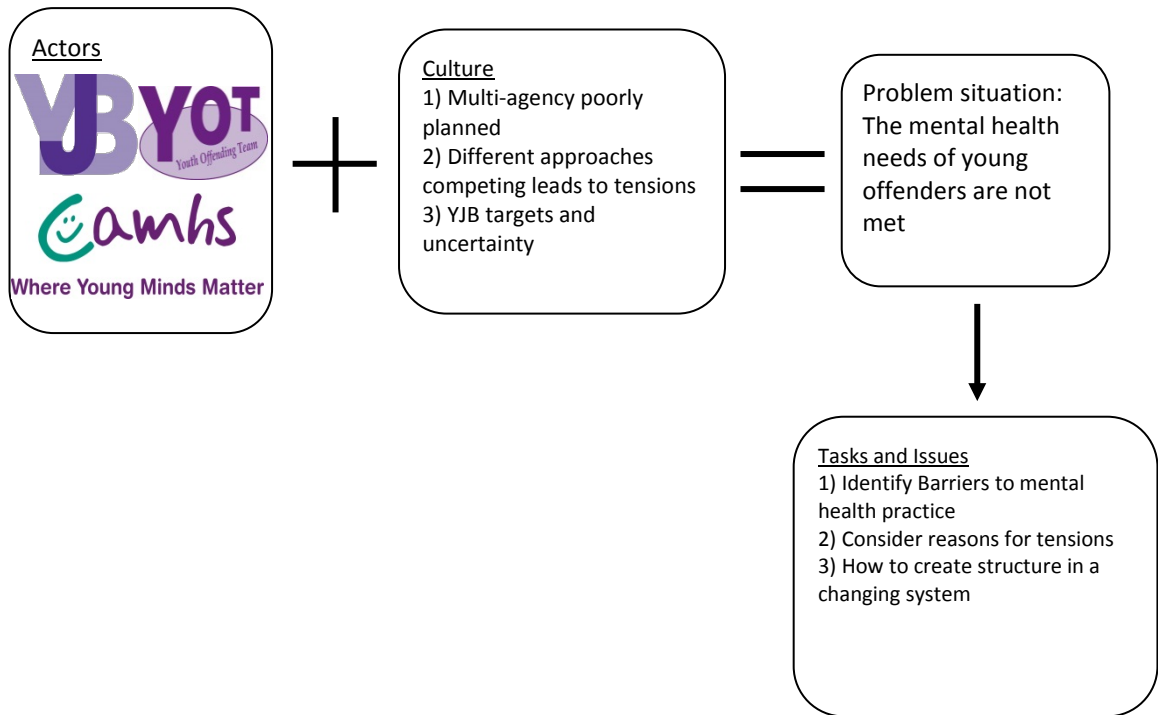
Diagram 2.2: Expression of the Problem Situation

Expressing the problem situation by using current knowledge and understanding is useful as it allows us to see gaps in current knowledge, and clarifies what is most relevant to the problem situation. Regarding the mental health needs of young offenders not being met by the services within the YOS, young people themselves are not an actor in this situation. This is because they do not hold any power within the system as a whole, and do not have the ability to create change. Young people are the beneficiaries of any change that is created though, which is important in understanding what should be the underlying ethos of the system. Ideally, any actions of the system should aim to benefit young people. Whilst promoting the agency of young people within the YOS is a worthy discussion, this exercise is trying to understand the impact of philosophical perspectives on service provision, and so the actors in this situation are limited to the YJB, YOTs, and CAMHS.

To understand the relationship between mental health practice and social justice within the YOS three main tasks (as can be seen in Diagram 2.2) need to occur. Firstly it needs to be established what barriers within the YOS prevent mental health practice from meeting the needs of young people. The reason for focusing upon barriers rather than enabling actions is because it is clear from the literature that barriers within practice exist on a large scale (Anderson et al., 2004; Leon, 2002; Nicol et al., 2000; Patel et al., 2007; Stallard et al., 2003; Townsend et al., 2007,

2010; Vostanis, 2007). As this is not an issue confined to individual YOTs but rather appears across the YOS as a whole suggests that it may be linked to the philosophical principles that underpin practice. It needs to be established what these barriers are not only from a practical perspective to improve practice, but also to show how the philosophical differences between social and criminal justice relate to those barriers. Secondly, the reasons for the tensions between the two perspectives need to be considered. By identifying reasons for tensions between social and criminal justice, strategies for reducing or removing them may be found. Creating balance between these two philosophical standpoints would be beneficial, as the aims of both views could be satisfied, thus achieving 'justice' on a broader scale. Thirdly, it needs to be considered how this can be applied practically within the YOS. Certain aspects of the YOS continually reoccur, one of these being change. The YJB makes frequent changes to practice guidance and standards, and the level of service expected of the YOS is continually altered (Archer, 2013; Baker, 2014; Youth Justice Board, 2004). This practicality must be respected within this research; social and criminal justice need to be balanced within an inconstant system.

The context of the research and tasks involved in the research present terms which require clarification. From the literature it is clear that there are numerous interpretations of the culture and approach within youth justice, what mental health is and how it should be approached, and what social justice is and the role it should play in society. The literature has informed the way in which these terms and concepts are presented and used within this work. By choosing specific pieces of literature to act as a theoretical framework for the research, it is ensured that there is a grounding in current knowledge, and that any findings will build upon or further this knowledge. The two key sources for this work are Rawls's (1971) theory of justice as fairness and Khan and Wilson's (2010) study of the forms of mental health provision within youth justice. These two texts became central to the work because of their subject matter and contributions, and also because of the way in which they complement each other. Rawls's work is philosophical, and often criticised for lacking practicality (Kukathas and Pettit, 1990; Lovett, 2011). Khan and Wilson's work is entirely practical, having identified the different forms of provision, the work focuses on aspects of practice, there is little theoretical discussion. In this respect the two texts work together, with Rawls providing the philosophical framework, and Khan and Wilson providing the practical context. In addition to these two key texts, broader literature (as discussed in the previous sections) has informed this work about the context and history of youth justice, and the variety and background of mental health practice. Having this contextual knowledge is necessary to ensure that this research is not repeating what has gone

before; whilst finding support for existing work is necessary, the primary purpose of this research is to add to current knowledge.

Rawls's approach to social justice has been criticised for being complex and impractical (Daniels, 1975; Kukathas and Pettit, 1990; Sandel, 2010; Talisse, 2001), however, it can be summed up by the two principles of social justice that are central to Rawls's theory.

> "First: each person is to have an equal right to the most extensive scheme of equal basic liberties compatible with a similar scheme of liberties for others.

> Second: social and economic inequalities are to be arranged so that they are both (a) reasonable expected to be to everyone's advantage, and (b) attached to positions and offices open to all" (Rawls, 1971: 53)

The remaining aspects of Rawls's theory discuss and relate to how to apply these principles within a society or institution. This specific interpretation of social justice has been chosen as the basis of this work because of its applicability to the subject of mental health, and also because of the specific way in which Rawls outlined that it could be applied. By creating set principles which define and determine social justice, and having a strategic method to apply those principles, how to achieve social justice, and what applied social justice would look like becomes much more definite. Other approaches to social justice are more abstract, and rely on subjective principles such as happiness (Bentham, 1789; Mill, 1863) or merit (Nozick, 1993). Rawls's principles are centred on equality, which is more concrete than these other approaches. Whilst there are subtleties regarding what constitutes equality, or how equality should be granted (e.g. affirmative action), fundamentally, it can be easily seen if two things are equal or not. This makes Rawls's more applicable than other interpretations of social justice. Additionally, by beginning with principles of equality, Rawls's theory cannot inadvertently accept or create inequality or harm. Other popular theories of social justice, such as utilitarianism and libertarianism are problematic in this regard. Utilitarianism will tolerate both inequality and harm if it does not outweigh the happiness of the majority (Reiman, 1990; Sandel, 2010). Libertarianism does not recognise structural inequality, positing that if individuals apply effort, they can improve their situation. This can allow the state to absolve itself of harms it may have caused, such as poverty (Machan, 1985; Reiman, 1990). By making equality a central principle, Rawls's work avoids these issues, and adheres to Kantian ideas of

respecting all individuals as an end within themselves, and thus worthy of respect and fair treatment (Kant, 1785).

The two principles of social justice in the format that Rawls conceived them relate to society as a whole. Rawls did discuss how justice as fairness could be applied to individual institutions also (1985; 1971). Rawls's work on the application to institutions focused upon economies, and the distribution of wealth and resources. This was not viewed positively though as it was counter to free-market theories which were highly popular at the time, and did not recognise individual merit as a reason to allow some people to have advantages over others (Kukathas and Pettit, 1990; Talisse, 2001). The two principles may not apply in their original form to specific institutions or organisations, as not all institutions can guarantee schemes of liberties. This is true of the YOS, and mental health provision within the YOS. To be applied to specific institutions, the two principles of social justice would need to be adapted, so that they were relevant to the stated purpose or aim of that organisation, whilst still maintaining the ethos of equality. As social justice is being used as an evaluative standard for the for the forms of mental health provision, creating principles specifically for the context of mental health work within the YOS would be useful. By using clear principles, the evaluation would gain transparency, and the findings would be more applicable. The following principles were developed specifically for this research, to act as defining markers of social justice within mental health practice in the YOS.

**Equality Principle**: All young offenders have an equal right to access mental health services.

**The Need Principle**: Disparity of access to mental health services should only occur when there is greater need.

These two principles are central to this work, as they are how social justice is to be defined within this context, and the standard against which provision of services is to be evaluated. There is further discussion of how these principles were created on Page 65. Creating adapted principles for a specific context is a novel use of Rawls's theory, and refutes criticisms that justice as fairness is not applicable to 'real world' situations and contexts (Kukathas and Pettit,

1990; Sandel, 2010; Talisse, 2001). Rawls discussed a number of steps and processes for how his principles of social justice could be applied within the construction of a society, ensuring that the society as a whole was socially just. These processes could be applied to institutions, such as the YOS, to ensure that they deliver social justice for young people.

Khan and Wilson's (2010) study of mental health provision within the YOS is central to this work because to date it is the only comprehensive study of the variety of mental health provision within youth justice. Understanding what provision exists is useful as it creates an understanding of how access to mental health services for young people is negotiated, and thus if that process is able to meet need. Khan and Wilson found six distinct types of provision that reoccurred across the YOS as a whole, despite individual YOTs having the freedom to create provision as their saw fit within their area. The lone worker, foot-in-foot-out, health team within a YOT, virtual locality, outreach consultative, and external one-stop-health-shop were the names given to the six types they found. Khan and Wilson did not set out to evaluate the differing forms of provision, their work was exploratory and aimed to establish how mental health provision for young offenders was delivered. Khan and Wilson did raise concerns with some of the different forms though, particularly the lone worker. Whilst this was not a formal evaluation, Khan and Wilson noticed that the lone worker form of provision created,

"high professional and cultural isolation; either a narrow focus, limited by the practitioner's professional training, or a tendency to 'run ragged' trying to meet all the needs of the young people referred to them." (Khan and Wilson, 2010: 25)

Since Khan and Wilson's 2010 study, there have not been similarly in-depth discussions of mental health provision within the YOS. The forms of provision outlined by Khan and Wilson have not been evaluated, and no work (at the time of writing) has been conducted to see if these types of provision are still present in the YOS. As the YOS regularly goes through change, it is needed to see if Khan and Wilson's theory is still applicable. This is one of the reasons why it is being used as a foundation of this research.

If Khan and Wilson's theorised forms of provision are to be evaluated, it is necessary to decide what principles or standards they will be evaluated against. In this work principles of social justice are being used as evaluative standards. There are a number of reasons for this. Outcomes, which are the usual standard of evaluation in youth justice, are subjective within mental health. It is difficult to say when a person's mental health issues are better, particularly as some may

never be resolved, and will have to be managed over the life time, similarly to chronic physical conditions (Anderson et al., 2004; Rogers and Pilgrim, 2010). Without being able to define a suitable outcome, this cannot be used as an evaluative standard. Similarly, meeting objective targets or practice standards would not be useful for evaluative purposes. As the purpose of mental health is to provide support and help to individuals, any evaluation which did not take into consideration the beneficiaries of mental health work in any aspect would be ineffective. The underlying principles of mental health practice can be interpreted as working in a socially just manner. The principles guiding mental health practice vary across approaches and schools of thought, however, there are large similarities in that they all prescribe an ethical approach for practice; to prevent harm, and suggest that practice should be equal and unbiased (Banks, 2003; British Psychological Society, 2009; Fulford, 2012). These principles feed into the way individuals are treated by mental health professionals, promoting the agency of service users. These underlying principles mean that mental health practice is fundamentally aligned with John Rawls's theory of justice as fairness.

Khan and Wilson's (2010) forms of mental health provision within the YOS and Rawls's theory of justice as fairness act as the theoretical and philosophical framework of this research. This alone does not give the required information to guide the research though. There is a need to ensure that the work is also informed by the wider literature regarding the practices and cultures within youth justice and mental health practice, as this is the context of the research. The historical background of youth justice is highly informative about how the current culture and working practices arose, and the reasons behind practices and structures within the YOS. This information is necessary to inform this research, ensuring it builds upon and adds to existing knowledge, and can be applied to improve practice and structures within the YOS. This is particularly important as the tensions between criminal and social justice which are central to this work have been evident within youth justice for a long time (Muncie, 1999; Smith, 2011; Whitehead, 2011). One of the main outcomes of these tensions is questions of which approach should take priority within practice, and if a criminal justice organisation is obliged to achieve social justice also (Maschi et al., 2008; Smith, 2005). Previously these tensions have been exemplified in debates between welfare and justice, however, from the literature it seems that they have a larger impact upon practice within the YOS (Bradt and Bouverne-De Bie, 2009; Jones and Baker, 2009; Smith, 2005). As these tensions between philosophical positions are central to problems within practice, it is necessary to understand how to achieve balance between them.

The YOS originally was created with a balance between criminal and social justice as an intentional component (Fergusson, 2007; Holdaway et al., 2001; Shaw, 2006). However, this was quickly lost following the national implementation of YOTs following the pilot schemes (Holdaway et al., 2001). The issues raised by Holdaway et al., (2001) still remain in the YOS, and their presence is indicative of a number of structural issues within the services as a whole. Youth justice has always been a highly political issue, however, in the period prior to, and immediately following the 1998 Crime and Disorder Act political interest in this area became heightened (Goldson, 2013; Muncie, 1999). Furthering the politicisation of youth justice meant that the newly created YJB were under intense pressure to deliver results quickly (Pitts, 2001). Additionally, changing political views and governmental approaches meant that the what results were expected of the YJB were frequently altered. This meant that the YJB were attempting to solve a highly complex social problem quickly, and with ever diminishing resources. This combination of factors has been perceived to create a culture of managerialism within the YOS, meaning that practice has been considered in terms of efficiency and outcomes, opposed to the impact upon individual young people with complex needs (Holland, 2000; Jones et al., 2004; McLaughlin and Muncie, 2000). The political desire for speed in decisions and actions also affected practice. Often pilot schemes within youth justice do not report conclusions before national implementation is decided upon, and changes to practice are not often considered thoroughly before being expected of practitioners (Crawford and Newburn, 2013; Haines and Case, 2012; Holdaway et al., 2001). This increases pressure upon those working within youth justice, who adapt their practice to meet these standards and targets, but do not largely change their approach to working with young people (Haight et al., 2014; Smith, 2007). This is evidential of the changes made to practice by the YJB being ineffective, and that this hasn't been noticed or acted upon is indicative of structural issues within the YOS as a whole.

Multi-agency practice has been a consistent aspect of youth justice. Young offenders have complex needs, requiring the input of a variety of professionals and specialists (Bevington et al., 2013; Vandenbroeck et al., 2014). As mental health is a frequent need of young offenders (Leon, 2002; Liebenberg and Ungar, 2014; Stallard et al., 2003; Williams et al., 2010), YOTs are required to provide specialised mental health care. This is the only form of multi-agency working within the YOS that is a requirement opposed to a choice made based upon what provision is needed within that area. Localism has been a strong agenda within youth justice,

with the YJB citing it as the reasoning behind guidelines for structuring and commissioning services which others have considered to be vague (Baker, 2005; Phoenix, 2009). This created tensions surrounding the implementation of mental health services within YOTs, local commissioners were being told which services to commission, whilst simultaneously being told that they were best placed to choose which services were appropriate or necessary for young people in their area. This dichotomy meant that many mental health services within YOTs were not planned in detail, and partnerships were not truly formed in some areas, as the provision was mandatory opposed to occurring based upon perceptions of need within the area, and links between the agencies (Gilling, 2009; Robinson and Cottrell, 2005; Sutherland, 2009). These problems are reflective of broader issues within the YOS also, making this an important area for research.

Combining these aspects of the literature reveals a gap in current knowledge. There a large body of evidence showing that the mental health needs of young offenders are not met by the YOS (Anderson et al., 2004; Callaghan, Pace, et al., 2003; Kessler, 2002; Leon, 2002; Townsend et al., 2007, 2010; Vostanis, 2007; Williams et al., 2010). Khan and Wilson (2010) found that there are a limited number of forms of mental health provision within the YOS, some of which may be problematic. There is also work linking issues within practice to structural tensions between welfare and justice (Haight et al., 2014; Muncie, 2010; Nicol et al., 2000; Smith, 2005). The debate between welfare and justice is reflective of debates between social and criminal justice, particularly regarding issues of access and equality. John Rawls's theory of justice as fairness discusses how to create institutions based upon principles of social justice, to promote equality of access and opportunity for individuals (1971).

**<u>Research Question, Aims and Objectives</u>**

**Research Question**

- What is the impact of the relationship between social and criminal justice on mental health provision and practice within the YOS?

**Sub Questions**

- Is the current understanding if mental health provision within the YOS still correct?

- How do social and criminal justice relate to mental health practice within the YOS?

- What are the larger implications of the relationship between social and criminal justice on mental health provision in the YOS?

**Aims**

- To see if Khan and Wilson's (2010) theory of mental health provision in the YOS is still applicable.

- To understand how and why differences between types of provision occur in relation to socially just practice.

- To understand how issues linked to social justice affect mental health workers in the YOS.

- To understand how mental health workers address social justice issues within practice.

**Objectives**

- Compare existing mental health provision against the forms theorised by Khan and Wilson (2010) to see if they are still applicable

- Contrast different types of provision in terms of specific issues that are related to balancing social and criminal justice

- Discover how social justice issues impact mental health workers practice

- Identify solutions used by mental health worker to balance social and criminal justice within practice.

## Summary

This chapter has looked at the various strands of literature relating to the topic area discussed in the introduction. From this literature it is evident that social and criminal justice are not balanced within the structure of the YOS, and this causes problems in practice. These philosophical problems have a large impact on mental health practice within the YOS. The approach to mental health work in this context is not standardised, and six different forms of mental health provision have emerged. The problems and differences in practice mean that young people are not receiving an equal service, which is unjust.

There are a variety of theories of social justice and that of John Rawls is most appropriate to apply to this context. Rawls discussed how his theory of justice as fairness could be applied to social institutions, however, this has not been carried out. It may be beneficial to apply this equality focused approach to the YOS, to help resolve the philosophical imbalance that is impacting upon practice.

The literature has led to the research question, which is to investigate how the relationship between social and criminal justice impacts upon mental health practice and provision within the YOS.

## Methodology and Methods

### Overview

The need for the YOS to improve mental health provision is a key area of research and has drawn much attention (Goldson, 2000a; Grisso, 2008; Léveillé and Chamberland, 2010; Nissimov-Nahum, 2008; Smith, 2010). The majority of previous research has looked at the issues of mental health within youth justice in terms of assessing needs and understanding where there is room for improvement within the service but not necessarily offering solutions that have been taken on by the YOS (Goldson, 2011). By adopting a theoretical framework of previously conceived forms of provision and evaluating them in terms of their ability to balance social and criminal justice, this research looks at these issues in a new light and creates practical suggestions for improvement. Having created a clear theoretical framework and philosophical position it is hoped that it is clear how this research builds upon the existing literature.

To answer the research question, interviews with mental health workers and YOT managers were used to construct a case study, which exemplified mental health provision within the YOS. Selecting YOTs based upon Khan and Wilson's forms of provision (2010) ensured the case study was reflective of the variety of mental health provision within the YOS. This selection process also supplied support for Khan and Wilson's theory, satisfying one of the aims of the research. The interviews addressed another of the aims through discussion of the issues within mental health work in the YOS and how these were overcome. The interviews also discussed social justice within the YOS, with further consideration of the role of social justice occurring in the analysis.

The case study was built as a representation of how mental health work occurs in the YOS, showing the effect of differing forms of provision upon social justice within the service as a whole.

### Philosophical Standpoint

Social Justice, mental health and youth justice are the key themes of this research and as such how they are considered and discussed was taken into account when choosing a research strategy and methodological approach. Whilst debates and discussions around these topics come from varied perspectives, one of the more enduring of these views is that of social constructivism. Initially evolving from psychological theories of cognitive development

(Montangero and Maurice-Naville, 1997), social constructivism's ideas of multiple interpretations of reality, subjectivism and individualism were soon adopted by other disciplines such as sociology, social work and political philosophy. Outside of psychology the theory varies and is referred to as constructionism (Ackermann, 2001). Its influence has had a lasting effect upon the social sciences, and has been linked to a paradigm shift away from positivist approaches to more interpretivist views, which may be more appropriate in more social areas of research (Dyson and Brown, 2006; Sarbin and Kitsuse, 1993).

Social constructivism is based upon the work of Piaget (Ackermann, 2001; Ault, 1977). Whilst studying childhood cognitive development, Piaget created a theory of knowledge acquisition which has subsequently gone on to be expanded into social constructivism and constructionism. Piaget theorised that children do not have innate knowledge of the world around them, nor do they simply absorb information as was purported by leading theories at the time (Ault, 1977). Piaget noticed children learn through experience, but also that their learning and knowledge adapts to new ideas and concepts being understood (Ault, 1977). Knowledge acquisition is not a passive process, but an active one, where new ideas are tested against current knowledge, and incorporated if they fit with the current system of thinking. If a new idea does not, it is either discarded as false, or the existing knowledge has to be reconsidered against this new idea and reconstructed to fit around it (Montangero and Maurice-Naville, 1997). This process of testing ideas and knowledge against what is currently known led Piaget to say children were "little scientists" (Ault, 1977). Whilst these ideas have had their most prominent and lasting effect in the field of education and childhood cognitive development, Piaget's ideas were quickly adopted by the members of the scientific community as a way of approaching their research (Montangero and Maurice-Naville, 1997).

Constructs can be broadly described as created ideas or thoughts about a particular subject, institution, group etc. Constructs are affected by the context in which they were created and the information used to create them. Constructs are generally abstract and thus need to be operationalised in some way to be the subject of research, this is usually done through surveying attitudes and opinions (Dyson and Brown, 2006). Constructs are specific to individuals, as they are affected by previous experience and knowledge. When the constructions of a group of individuals about a specific subject are very similar, this is a shared construction (Sarbin and Kitsuse, 1993). An example of this is that when a group of persons see a rose, common responses are that it represents romance (Dyson and Brown, 2006). Shared constructions occur based upon collective agreement, but this does not mean that the constructions are identical across individuals. Individual's constructions are shaped by experiences; shared constructions

are exemplary of agreement opposed to uniformity. The idea that individuals create their own views based upon experiences and understanding implies that humans cannot access an objective truth (Slife and Richardson, 2011). It also implies that interpretations by each individual are equally valid, linking social constructionism with ideas of pluralism (Sarbin and Kitsuse, 1993). Constructionism does not necessarily subscribe to the idea that there is one discoverable objective truth, but that all our understanding is shaped by constructions of reality, which in turn affect the world around us through our actions. Constructionist research attempts to understand the processes involved in this and how constructions shape the world around us (Dyson and Brown, 2006).

Piaget's ideas were expanded upon by researchers and theorists from other areas of social sciences. Constructivism has a focus upon cognition and how ideas are formed. Those using the idea of constructs and applying them to the social world focused on interactions between individuals and the context in which this takes place. To differentiate this from Piaget's constructivism, the term constructionism is used (Ackermann, 2001). This different terminology was pioneered by Papert (Ackermann, 2001). One of the key aspects of constructionism is that it attends to context and is not highly concerned with abstract thinking (Sarbin and Kitsuse, 1993). Constructionism looks at exchange of information and how constructions are affected by interaction with others. These interactions are concrete and heavily contextual; to abstract the interaction of its context would remove much of its meaning and change the interpretation drastically. Some research using constructionism focuses heavily upon the context, leading to interesting findings that would not have occurred otherwise (Peterson, 2012). An example of this is feminist research. This research places strong emphasis on the validity of individual accounts and experiences, placing it firmly within the constructionist tradition. This approach allowed researchers to build rapport with participants, which has become a central aspect of the standpoint as it allows for frank and honest discussions to occur (Oakley, 1984; Orme, 2003). Constructionism's focus upon interaction and contexts creates certain suppositions. The idea that an interaction can alter the constructions of an individual as they interpret new information implies that constructions cannot be given in a complete form, as there is an active element of thought and understanding on the part of individuals (Huang, 2009). Additionally, as constructions are cognitive, they are essentially private, so to understand the constructions of others, research should look at language and dialogue as this is how constructs are expressed (Pierce et al., 2014). However, this assumes that people are honest in expressing their thoughts and opinions (which are representative of constructions). This problem exists in all social research, and it is part of the research process to create an atmosphere in which individuals feel able to be honest (Denscombe, 2010).

The idea that knowledge is constructed and that every individual has their own constructions of reality was embraced by qualitative researchers in particular, as it emphasized the subjective nature of our world and the need for this to be reflected in research (Dyson and Brown, 2006; Sarbin and Kitsuse, 1993). However, this led to questions of relativism and the usefulness of constructionist research in applied fields (Slife and Richardson, 2011). This has become a large and ongoing debate, with no definitive answers. But whilst constructionist research does tend towards relativist ideas this does not mean that its findings are without value. Constructionism is not entirely relativist. Many versions of social constructivism recognise that there is a real world in which interactions take place and in which the repercussions of constructions take place as a reality. Attitudes, bias and prejudice are all examples of this, as they are constructs that have an impact upon behaviour, how others are treated, and the interactions that follow (Bragues, 2006; Montangero and Maurice-Naville, 1997; Peterson, 2012; Pierce et al., 2014; Slife and Richardson, 2011). As many aspects of our society are constructed, looking at how these constructions are created, who holds them and how they interact with the constructions of others to create shared meaning, is of interest to researchers. Findings about constructions can also be used to help reorganise constructed systems so that they are more effective. Also, social constructionism recognises the subjective nature of research (Dyson and Brown, 2006; Silverman, 2010). By accepting that the ideas of individuals shape their worldview, we recognise that the researcher can never be truly objective (Checkland, 2000a; Peterson, 2012). As we view data through the prism of our own thoughts, ideas and experiences, it will undoubtedly be affected. By recognising this, constructivist researchers are better placed to notice when their views are placing an unfair skew upon the data and account for this by means of counter examples or moderation (Denscombe, 2010; Silverman, 2010). Whilst there are issues inherent in using a relativist, constructionist approach, their subjective nature allows us to see and account for them, thus making the research more transparent.

Social constructivism has been applied to various aspects of social life, including social justice, mental health and youth justice. This makes it an appropriate approach for this research. Whilst there is not unanimous agreement for the social construction of these ideas there is support and evidence for it. The idea that justice is constructed can be traced back to Hobbes and the social contract (Hobbes, 1651). That an agreement can be created to regulate society and governance is a clear example of a construction. A shared definition of "fairness" must be agreed upon by all parties, then this must be enacted to a set of principles in the form of a contract (Bragues, 2006). Whilst the discussions leading to the contract may not be explicit, the social context, culture and societal norms all play a role in shaping the agreement, which all impact upon how individuals construct their ideas (Degoey, 2000; Pierce et al., 2014). Other theories of social justice also

rely heavily upon ideas of construction, particularly that of Rawls. Justice as fairness (Rawls, 1971) is not only based upon the idea of a constructed contract, but that a society itself could be entirely constructed based upon derived principles of fairness (Lovett, 2011). The original position shows how constructions affect our judgement and the need to overcome or remove these to create fair principles that can act as the basis of our reality (Rawls, 1971). That Rawls discusses the need to be objective and free from constructions in the original position highlights his acceptance of social construction. Many constructionists agree that there is a "real world" in which we exist, which in itself is not constructed. However, human perception is biased by constructions and so our actions and their impact upon this real world are the results of social construction (Slife and Richardson, 2011). The implication of this for research is that we are not necessarily able to find an objective truth, but should aim to create the greatest amount of knowledge and understanding of constructions as possible, as this will help us understand human behaviour and interaction (Checkland, 2000a). Similarly, constructionist approaches to social justice recognise that we cannot create a true justice, as there are no perfect or true constructions, but we can attempt to create the fairest shared construction of justice possible to govern our society (Bragues, 2006; Degoey, 2000).

Criminal justice is more clearly constructed, as it is the enforcement of a given perception of "right" and "wrong" (Henry, 2009). This is evidenced by changes in views on what behaviours are considered criminal. An example of this is homosexuality; until 1967, homosexuality was deemed criminal behaviour in the UK. Due to changing understanding and constructions of homosexuality and the impact of this change upon cultural norms, it was no longer deemed criminal behaviour, which was legislated through the Sexual Offences Act (Connor-Greene, 2006). Constructions of crime and punishment are strongly impacted by culture, ideas of desert, and moral judgements. What is promoted and held as a good within a society is protected by criminal justice (Chevingy, 2001). This then impacts upon how individuals are perceived and treated. For example consumerist societies prize ownership of property and goods and stealing is treated as a relatively serious offence (Sarbin and Kitsuse, 1993). This is in contrast to non-consumerist societies where stealing is perceived to be an expression of need (Chevingy, 2001). There have also been arguments that criminal justice has been used as a form of social control (Bragues, 2006; Henry, 2009; Pierce et al., 2014; Wacquant, 2010). This implies that those with power may promote a particular construction of what is appropriate or inappropriate behaviour through criminal justice by declaring their view of inappropriate as not just undesirable, but criminal. This application of social constructivism may be perceived as relativist, but has a real and lasting impact upon society. Individuals may be imprisoned or labelled as criminal due to a social construction. This means policy makers must take care when creating criminal justice

legislation, as this can be shaped by constructions. This legislation then goes on to shape the constructions of others, affecting perceptions of public opinion and what society and government should try to achieve, leading to a cyclic process (Pierce et al., 2014).

Much discussion of the application of social constructivism to a social area has occurred in the study of mental health. There have been arguments that mental health problems are solely physical in nature (Bolton, 2009) or to the other extreme that "mental health" has been created as a social control mechanism to problematize undesirable behaviour (Connor-Greene, 2006; Timimi, 2014). This debate between naturalist and relativist approaches is a larger issue within psychology (Salvador-Carulla and Aguilera, 2010). However it is clear that mental health problems impact upon people's lived experiences regardless of their provenance. This impact in turn affects their approach to the world around them. It is not necessary to understand if the cause of hallucinations is physical or psychological to understand that they cause high levels of distress and have severe effects for those experiencing them. The way in which mental health problems are categorised and addressed has been influenced by social construction, with the formulation of new categories of "illness" being a particular point of interest (Connor-Greene, 2006; Rogers and Pilgrim, 2010). The categorisation of mental illnesses is linked to cultural norms and acceptable standards of the time (Rogers and Pilgrim, 2010). Homosexuality is again an example of this as it was classified in the DSM (Diagnostic Statistical Manual) until the third edition was released in 1980. This change of viewing homosexuality as a disorder to it being perceived as normal behaviour was influenced by cultural and attitudinal shifts in wider society and by research highlighting the lack of differences between homosexual and heterosexual persons (Connor-Greene, 2006). Not all mental health problems are constructions based upon social norms and cultural standards. Physical symptoms such as chemical imbalances and neurological problems underlie many disorders. The link between the physical and psychological aspects is an ongoing point of interest within psychological research (Timimi, 2014). It seems that mental health problems do exist, but how we understand and categorise them is a construction.

Due to the strong links to the topic of research and the applicability to the research question, social constructionism is the most appropriate philosophical view for this work. It is also favoured by the researcher and so has coloured the choice of topic, which may be a reason for its applicability. The effect of using a social constructionist perspective is that any methods chosen must be able to accommodate and represent multiple understandings of the YOS and the

perceptions of social justice within the YOS. The acceptance of multiple versions of reality may create some ontological concerns, meaning it must be made clear that this work is not attempting to find a "truth" about youth justice or any definitive stance about social justice's impact within the YOS. This work is trying to understand how differing forms of mental health provision impacts upon the experiences of those within the YOS and their perceptions of social justice. It is acknowledged that there is a real world in which the YOS acts; however this is affected by the differing constructions of social justice, which in turn may be affected by the (real world) provision of mental health services. This interaction between real and relative and how an abstract construct such as social justice can impact upon the realities of the YOS is what is being studied. It is important that this epistemological view is considered throughout the research, to ensure that the work is consistent and does not move away from the state of understanding in which the research question was created and the research structured.

## Research Strategy

The research aims to understand how mental health provision is delivered within the YOS, what issues occur in this situation and how this affects social justice within youth justice as a whole. To study all mental health provision within the YOS is beyond the scale of this work, so a case study was created to exemplify this situation. Utilising a case study approach not only allowed for an in-depth understanding of mental health provision but also the processes and relationships that affect it. A case study approach is appropriate given the philosophical underpinnings of the research as a case is explicitly constructed by the researcher (Thomas, 2011). Due to the constructed nature of a case study, it must be made clear what the case is being used to achieve and where its boundaries begin and end (Stake, 1995). In this work the case study is instrumental in nature. Instrumental cases use a case study as a tool to create theory that addresses questions. Whilst the case may not be directly addressing the research question in full, a theory built from it through the analysis can (Thomas, 2011). The case study being constructed will create an understanding of how mental health provision occurs within the YOS and the factors that affect it. This will then be used in the analysis to understand the impact of provision on social justice, thus satisfying the research question.

To create the case it needed to be decided what would exemplify mental health provision within the YOS. A single case of one YOT would not be appropriate as this would limit the case to one

form of provision when there is evidence for six (Khan and Wilson, 2010). To ensure that the case was an accurate representation of mental health provision within the YOS these six forms of provision all needed to be considered. Yin's embedded case studies (Yin, 1993) served as an example of how a case study could contain distinct subunits. An embedded case study (also known as a nested case study) recognises that a case may not be completely homogenous and that certain factors (such as individual decision making) may impact upon a case in different ways that merit recognition (Thomas, 2011; Yin, 1993). To this end, within an embedded case study there are subunits. Each subunit is a different example of the larger case, however, if they were to be considered separately from the larger case much of the context necessary to create understanding would be lost (Yin, 2003). Where there is more than one subunit within a case, the similarities and differences between subunits are considered in terms of how this impacts upon the case as a whole. The affect that differing factors have across the case is also of interest when using this approach, as embedded case studies focus upon how subunits connect with the whole (Thomas, 2011).

In this research mental health provision within the YOS forms the case. Within this, there are six subunits, one representing each of Khan and Wilson's (2010) forms of provision. By constructing a subunit for each of Khan and Wilson's theorised forms, comparisons can be made between them on issues of social justice. From this, wider conclusions can be drawn about mental health work in the YOS as a whole. The six forms of provision were found through exploratory research, so looking at each type in more depth will also add to the literature. Using an embedded case study means that contextual factors such as the larger structures of the YOS can be taken into account when making comparisons between different forms of provision. Retaining context is of importance because Khan and Wilson's forms of provision may not be truly reflective of current practice, and so must be considered as ideal types (Weber and Turner, 1991). By allowing for some differences or variations within the case from the forms of provision found by Khan and Wilson, it is expected that the terms they created (lone practitioner, outreach consultative etc.) will be applicable to the majority of YOTs. However, if there are large differences or incompatibilities with any of Khan and Wilson's theorised forms, that YOT will be taken as a separate subunit, leading to further questions about forms of provision and the suitability of Khan and Wilson's work.

An embedded case study was chosen over a comparative case study as each form of provision is working under the same guidelines and within the same system towards the same aim. There are many unifying factors across the forms of provision. One of the main reasons for why differing forms of provision have occurred seems to be due to resources (Barrett et al., 2006), as opposed to resulting from a free choice. These factors imply that whilst there may be differences in provision these are indicative of the larger structures of the YOS. To take each form of provision as a separate case would remove much of this context and thus weaken the research. The choice of an embedded case study not only retains the context of mental health provision, whilst recognising the differences, but also allows the relationship between subsets to be visible and the effect this has upon the case as a whole. An embedded case also allows for detail outside of the established theoretical framework to emerge and be included in the overall case, whereas a comparative approach would not allow for this.

An important aspect of a case study approach is establishing boundaries around what the case covers and is expected to achieve. In this research there must be boundaries for the case as a whole and also the subunits of the case. The reason for delimiting cases is to lessen ambiguity and increase the transparency of the research (Stake, 1995). By identifying boundaries for the case and its subunits, it becomes clear what is needed in participating YOTs and what kinds of data should be collected from them. The case study investigates mental health provision within the YOS, thus limiting the case to YOTs that provide mental health care. Providing mental health care pertains to having some form of in-house mental health specialist or referring to a specialised service (as in the external one-stop-shop model). YOTs that have no mental health provision or refer to a mental health service that is not specifically for young offenders would not be included in this case. Within the case, there are certain boundaries for each subunit. By adopting Khan and Wilson's (2010) forms of provision as the basis for the subunits, there are certain factors and criteria that can easily be operationalised to become defining factors. For example, for the Foot-in-Foot-Out subunit, a defining factor is practitioners having a role in both the YOT and CAMHS. If a YOTs provision does not do this, it cannot contribute to that particular subunit.

**Research Method**

When using a socially constructionist approach to create a case study around issues of social justice, in-depth semi-structured interviews are the most appropriate choice of data collection methods. This is because by allowing participants to move the discussion to areas they feel are interesting or relevant, it is their narratives that are being constructed and forming the case study, with as little imposition on the part of the researcher as possible (Thomas, 2011). There was a large amount of flexibility in how the interviews could take place with participants having the option of being interviewed individually or in groups and telephone interviews were also offered as an option, depending on what was most convenient for the participants. Time constraints were cited by many teams when declining to participate, meaning that flexibility in this manner is of importance when conducting research involving YOTs. Of the eight teams involved overall, three preferred group interviews, with the remainder of participants opting to be interviewed individually. Whilst similar topics occurred in the interviews regardless, group and individual interviews have different dynamics which was important to consider during the analysis. Individual interviews allowed for different perspectives to occur from within a single team, meaning the views of managers and supervisors were represented without their views affecting the discussions with other mental health workers. The majority participants were interviewed more than once, to allow for further depth to be gained into issues and to unpack the concepts of social justice.

By using interviews, issues can be discussed in depth and viewpoints fully explored (Denscombe, 2010). By documenting the experiences and narratives put forward by mental health workers within youth justice, their view of the ability of current forms of provision to foster socially just practices can be seen and assessed, helping to answer the research question. In addition to finding appropriate data, interviews also fit well within a constructionist case study approach (Thomas, 2011). Whilst interviews are constructed situations, by having mental health workers offices and places of work being the setting, the context of their experience within the YOT is gained, allowing the researcher to observe the setting in which a particular form of provision takes place. It is also a familiar place to the participant which will hopefully allow them to feel at ease within the discussion.

There were two rounds of interviews, with the first being more general, to gain an understanding of provision in each area and the issues within practice beyond those found in the literature. The second round of interviews allowed for these discussions to be furthered and greater understanding gained on points discussed in the initial interviews. The research question

is asking how social justice is affected by differing forms of mental health provision within the YOS. To operationalise this, the initial interviews used issues of assessment, referral and intervention to stimulate discussion. The reason these factors were chosen is because the literature identifies them as being problems within the YOS and also they directly impact upon issues of social justice (Allen et al., 2012; Baker, 2005; Hopman et al., 2013; Jud et al., 2012; Townsend et al., 2010; Wilson, 2011). If the differences within provision lead to differing issues within practice and affect the ability to create solutions to these issues, this directly affects practice and the service that young people are receiving. The interviews were used to create detailed understanding of each form of provision, and thus construct the case study.

Leading from the issue based approach suggested by various proponents of case study methodologies (Eisenhardt, 1989; Gillham, 2000; Stake, 1995; Thomas, 2011; Yin, 2003), some preliminary questions and prompts based around issues from the literature were created to help facilitate discussions and stimulate conversation. However, this was more of a guide for the researcher opposed to a formal interview schedule. During the interviews participants were able to discuss topics that they felt were relevant to the research area with the researcher playing a minimal role in the discussions. This allowed the narratives of mental health workers to be the focus. However, these were not unstructured interviews, as there was a concern that discussions may move to topics that were not relevant to the research question. By using semi-structured interviews, there was some initial discussion of the research question and the topics of research. This approach allowed the participants to discuss issues they felt were relevant within this framework and also recognises the constructed nature of research interviews. Question prompts were created before the interviews so that discussions could be guided if necessary. Some examples of questions used in the interviews are shown in Table 3.1. A full list of questions from the interviews can be found in Appendix 8.4.

| What do you think is successful about the provision within this area? |
| --- |
| YJB guidelines attempts for standardisation within YOS teams, do you think that approach works? |
| How do you view yourself and your role? Would you say you identify as a YOS worker or a health worker? |
| Do you feel there are clear boundaries to your work? Do you often have people asking what you do? |

| Do you get any kind of feedback from co-workers or the young people you work with? How do you rate what you're doing? |
| --- |

Table 3.1: Examples of questions used in the interviews

By discussing the research aims and purpose, interviewees could also discuss their interpretation of social justice in relation to their work, thus helping to satisfy the research question. However, it is taken into consideration that the information discussed in the interviews is not necessarily a true picture of mental health work within the YOS, but an interpretation of the experience of working within the YOT by the mental health workers interviewed. These interpretations and experiences can then be used to build a case study of mental health work within the YOS. Whilst this means the research is not trying to find an objective truth, but rather looking at the way these issues are discussed and approached, it is felt that conclusions can be made from this about how the work is done.

## Participant Recruitment and Access

When the project was in its initial stages, it was necessary to understand what gatekeeper permissions were needed to gain access to YOTs. The research division of the YJB was contacted regarding this. The YJB do not have specific ethical clearance or procedures for approving research within YOTs as decisions regarding permissions reside with the Head of Service for each team. Heads of Service may consult the YJB when making these decisions and to facilitate this a research proposal and details of ethical clearance were sent to the YJB research team for their perusal.

Following from this, once University ethical approval had been given, participant recruitment began. Contact details for YOTs were taken from the YJB website, including email and postal addresses. A total of 37 teams were contacted initially by email regarding the research. This was largely focused upon the midlands, for logistic reasons; however at least two teams from each of the government's regions for development agencies were contacted to ensure the case study included a variety of YOTs. Regions for development agencies is the way in which the YJB presents information based upon location and so was deemed to be appropriate. Not all YOTs had provided current contact information for the YJB website, which led to a number of emails being unsuccessful.

Follow up letters were sent to thirty YOTs two weeks after initial contact via email. These letters included further information about the research than the previous emails and participant information sheets (See Appendix 8.1 and 8.2). After the letters another round of emails were sent to twenty-one YOTs who had not responded to ensure all those who were interested were able to take part. From these communications, seven YOTs expressed interest in the research and requested further information. This allowed for some scoping to occur as to the level of mental health provision within these teams. This led to one team being deemed unsuitable for the research as they had recently changed from being a full YOT to a specialist drug and alcohol service. Of the six remaining interested teams, four were willing to take part in the project. The reason for the reduction from interested teams is due to concerns about the amount of time participating in the research would take. The number of responses was surprisingly small, and would not have yielded enough data to satisfy the research question, so the call for participants was restated. A further ten teams were contacted via email, with more information being gained about the provision within the area where possible beforehand, to ensure only appropriate teams were contacted. Of this second set of requests, a further four teams were interested and willing to take part. Eight YOTs in total were involved in the research.

Many YOTs did not respond at all to any contact, which made finding participants difficult. Some teams expressed their disinterest in taking part, others said they were already involved in other research projects and did not feel that there was available time to participate in another.

Through discussions with YOT staff during the recruitment and data collection process it became apparent that many YOTs decline research requests as standard, regardless of institution, purpose or availability. This is problematic on the whole for youth justice research as there is little guarantee of gaining information from YOTs, even with YJB backing. Of those who took part in this study, several mentioned having participated in previous research studies, which means that researchers may be only speaking to a small group within the YOS and so not finding representative views. As this research is using a social constructivist perspective, it must be considered that the willingness of those involved in the study may set them apart from other YOS workers in some way and may affect the results. However, this is an unavoidable problem, so whilst it is taken into account in the analysis, that is the most that can be done.

**Sample and Participants**

As Khan and Wilson's (2010) forms of provision are being used as the basis for case studies, main selection criteria for the sample was the level and form of mental health provision within YOTs. The initial aim was to gain the participation of a minimum of six youth offending teams, with each representing a different form of provision. However, there was awareness that flexibility may be necessary in classifying particular forms of provision, as Khan and Wilson's descriptions may be considered as "ideal types" (Weber and Turner, 1991) and may not be reflected exactly in practice. In applying labels of the forms of provision, there was consideration of the number of mental health personnel within a YOT, if their position was full or part time, if they were based within the YOT, CAMHS or another location, if they had an additional caseload with CAMHS and how mental health workers were supervised. These criteria were chosen as they are distinct characteristics within Khan and Wilson's forms of provision, are easily identifiable, and lacking ambiguity. In addition to this it was also taken into consideration the views of those interviewed. Some interviewees directly addressed their views of the provision within their team, which were used in classification.

It was hoped that more than six teams would be able to take part, with any teams working under the same form of provision simply further adding to the case based on that particular form. By using provision as selection criteria, information about each YOT approached had to be gathered before deciding if they were to be included in the study. This meant that some scoping work had to take place before selection of appropriate teams could occur.

Within the eight YOTs participating in the research were a total of twenty-eight mental health workers, four managers who dealt specifically with mental health and one external mental health worker who liaised with the YOT. In some cases, mental health workers were also managers within their teams, allowing for further perspectives on the issues of service provision and social justice. Geographically, all the teams were English, with the majority of teams being based in the midlands. Due to the variety of locations it is felt that the data is an accurate representation of mental health workers within the YOS. Within teams the number of mental health workers ranged from one to fifteen. This extremely high level of provision in one area was an exception, with the second highest number of mental health workers within a team being three. Of the twenty-eight persons across eight teams, fourteen were willing to be interviewed. Three teams chose to be interviewed in groups whereas others preferred individual interviews. Once gatekeeper permission was received teams were contacted for details of their mental health provision (this generally occurred during phone or email conversations) and to arrange

interviews. Where possible multiple interviews took place so that points could be expanded upon and more depth given. One team withdrew from the research after one interview. Demographics were not taken about the interviewees as it was felt that this information would not add to answering the research question. Some factors were noted as they may impact upon an individual's approach, but this was not a main focus of the interviews. There was an even distribution of gender amongst participants, but it was noted that the majority were white British. This was not included in the analysis, but taken into consideration in view of the social constructivist approach. It is also interesting in terms of social justice, particularly as the YOS has a high overrepresentation of young males from ethnic minority backgrounds (Mallett et al., 2011).

## Ethical Issues and Permissions

As this research deals with issues from the fields of social work and psychology, the ethical guidelines of the British Association of Social Workers and The British Psychological Society have been consulted (British Association of Social Work, 2002; British Psychological Society, 2009). This was to ensure that the ethical values of those who would be involved in the research would be represented and that there was maximum care to do no harm. Whilst the interviews were based around the professional work of those involved, there was still the possibility that they may find the discussions distressing or upsetting and so care was taken when composing interview schedules to be sensitive to this. In addition to consulting professional body guidelines, the research was approved by the De Montfort University ethics committee after consideration of a research proposal outlining possible causes for concern and how they could be overcome. The main areas for ethical consideration were anonymity, confidentiality, informed consent and data protection, each of which are outlined below.

For mental health workers to be able to discuss their work comfortably and freely, complete anonymity would be preferable. As the interviews often took place in person, and initial contact had to be mediated by the YOT manager (reasons for which are discussed below), this was not possible. However, all transcripts of interviews could be anonymised, with removal of names, places and case specific details, meaning that participants would not be identifiable. In addition to this voice recordings of interviews were inaccessible to others and deleted once the analysis was complete, allowing a level of anonymity.

Confidentiality was a more pressing issue in this research, as often the discussions involved discussion of cases, practice issues and details of work within the YOS which would not regularly be accessible. Whilst complete anonymity was not possible, confidentiality was. All recordings of interviews and transcripts were only accessible by the researcher or at the researcher's request (as transcripts were sent to some participants for their own records and interest). Participants were made aware that some sections of the anonymised transcripts would be used within the final thesis to exemplify points found in the analysis, but these would never include any identifying information, or relate to specific cases. Participants were also given the option to opt-out of being quoted within the thesis, however all participants gave their consent for anonymised quotes to be used.

Consent was gained both written and verbally upon initial participation in the research and regularly renewed verbally as the project continued (See Appendix 8.3). Participants were fully informed of the aims and purpose of the research, with no deception or coercion being necessary. Consent was also gained for use of a digital recorder to record interviews. Before giving consent participants were made fully aware of their rights within the research, including the right to withdraw at any point. It was also made clear that if they felt uncomfortable or unhappy with the research, they could contact the researcher's supervisors to discuss any issues. Contact information and details of how to withdraw were given in a debrief sheet (See Appendix 8.5).

Data Protection is a key concern as the use of portable data storage devices becomes more popular and increases the level of risk with regard to protecting data. To ensure that participant's data were secure, digital files were password protected and physical data was kept in a locked filing cabinet. Both of these were only accessible by the researcher. Upon completion of the analysis, any voice recordings of participants were deleted. Anonymised transcripts were kept in accordance with the University's data protection guidelines. The anonymised transcripts may also be the subject of further writings and all participants were informed of this.

**Analysis**

*Conceptual Framework for Analysis*

To structure and organise the analysis a framework that generates theory was needed, but it was also necessary to retain the importance and use of practical strategies for change. This is because the aims and objectives of the research specifically require theory generation and implementation in practical ways. Soft systems thinking (SST) links both theory and "real world" evidence to create strategies for problem solving. This made it an ideal choice to structure and guide the analysis. Other approaches were considered, but lacked the linkages between theory and practice, which is a central aspect of this work. Elements of grounded theory were used in understanding and organising the raw data, but this is not a grounded theory study. Aspects have been taken and used where appropriate in a 'toolbox' style, as discussed by Charmaz (2006). The use of SST was also appropriate as it recognises and actively is involved in the construction of systems. Based upon the epistemological approach of this work, this was an essential component needed in the analysis.

Devised by Checkland (Bausch, 2002; Checkland and Scholes, 1990) SST set out to create a structured approach to dealing with problem situations and creating practical and achievable solutions. Developing from the "hard" systems thinking of mathematics and computer science, SST took a logical approach to real world problems (particularly those involving management) and created steps to understand and address issues. The steps focus on understanding what the problem is, who is involved in it, what purposeful activity would create change, how this could theoretically be achieved, what is happening in actuality, what changes could be made to achieve the theoretical ideal, and how this could be practically achieved. SST has been applied to numerous areas of study over the past thirty years with success (Checkland and Scholes, 1990; Vandenbroeck et al., 2014; Wilson and Van Haperen, 2015). Particular areas of usefulness have been management and health care (Checkland and Scholes, 1990; Leischow and Milstein, 2006; Vandenbroeck et al., 2014). Understanding complex systems and creating practical strategies for change is a key aspect of SST, thus making it highly applicable within this research.

Developing from research into management, Checkland (2000) required an approach to research that was structured, focused upon problem solving, and accounted for the complexity of the social world. SST was the resulting epistemology. In this work SST is being used solely to structure the analysis. If it had been considered earlier in the project it is likely that it would have played a larger role in creating the methodological approach. It was felt that there was a

need to have some further guiding principles for the analysis to avoid issues that can occur when using thematic analysis. When constructing themes from the data the wider context can be lost as to how these themes relate to and impact upon the real world (Bazeley, 2009). Additionally, there have been discussions within the literature about the need for qualitative research to do more than 'identify themes' (Bazeley, 2009), so SST is being used to further the analysis and generate a useful theory. This also satisfies the objectives of the research better than thematic analysis alone would.

To solve problems SST considers how systems of activity can be made purposeful (Checkland and Tsouvalis, 1997). This means that the aims and objectives of the system as a whole need to be taken into account and how to practically achieve them considered. SST recognises that systems are complex and encompass numerous groups, approaches and views. Recognising that certain processes that occur within systems also impact upon the system exemplifies the cyclic aspects of SST (Checkland and Winter, 2005; Checkland, 2000b). The process of SST is generally presented in seven stages. These are shown in Diagram 3.3. Stage 1 is the awareness of a problem situation, this awareness may occur from reading the literature, personal experiences etc. Stage 2 expands upon this by expressing the problem situation in terms of who is involved (actors), what the context of the problem is (culture), and what needs to be done to understand the problem. Stage 3 then defines purposeful activity for that system. To create a definition of purposeful activity certain aspects must be considered. These aspects are outlined by the acronym CATWOE, each letter of which is outlined in Table 3.2. By considering each aspect of CATWOE, a definition of purposeful activity can be created that considers who is involved in the system, what it is trying to achieve, the context in which it takes place and factors that affect the system as a whole. This allows any purposeful activity definition to be applicable to the system and potentially achievable.

| C | Customers | The victims or beneficiaries of the transformation process |
|---|-----------|------------------------------------------------------------|
| A | Actors    | Those who would do the transformation process              |

| T | Transformation Process | Purposeful activity that gives a desired output |
|---|---|---|
| W | Weltanschauung | The worldview that makes the transformation process meaningful in this context |
| O | Owners | Those who could stop the transformation process |
| E | Environmental Constraints | Elements outside the system which are taken as a given |

Table 3.2: Definitions of CATWOE (Adapted from Checkland, 1999)

Once a purposeful activity definition has been created, stage 4 creates a conceptual model of how this could occur. This is an ideal version of the system and can be based upon theory, the literature, knowledge of the system and logic (Checkland and Tsouvalis, 1997; Checkland, 1999). This conceptual model is then contrasted with reality in stage 5. An understanding of the "real world" version of the system can again come from numerous sources, typically action research is used (Checkland, 2000b). This is not strict though and SST has been used with other methods, including case studies (Thomas, 2011). By comparing the conceptual version of the system with the actuality, it becomes clear where problems are occurring and what changes are necessary. Stage 6 outlines changes that are both desirable and feasible to elicit the transformation process. Stage 7 finally describes these changes in practical terms as specific actions to create improvement. This process can be seen in Diagram 3.3. It is important to note that the SST process is somewhat cyclic; once purposeful and achievable activities have been implemented the problem situation can be considered again to see if this was successful. The idea of having a continuous hermeneutic cycle in this way may be perceived as problematic, however, considering the social constructionist perspective and the continual changes within the YOS, it seems reasonable to be aware that there is not a static end point where the problem situation is solved permanently.
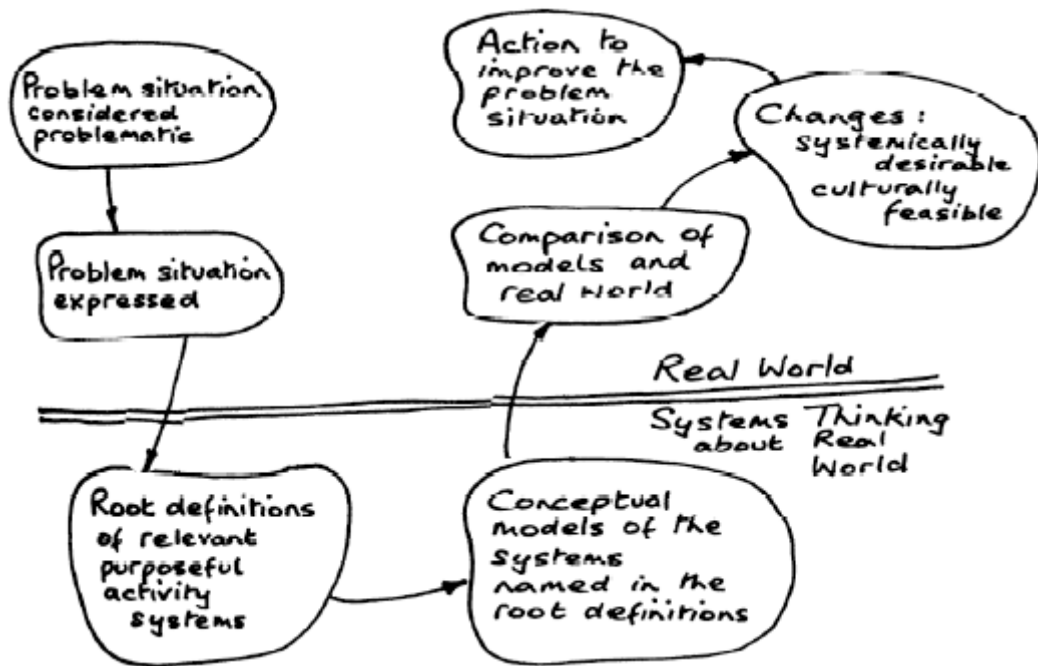
Diagram 3.3: Outline of SST (Taken from Checkland, 1999)

Using SST to structure the analysis is appropriate as it allows the case study to answer the research question by considering how social justice is affected by mental health provision. The process of SST leads to the creation of models of mental health provision within the YOS. By creating two models; one based in the experiences of mental health workers and the other a conceptual model based upon principles of social justice, and then comparing the two, the differences that are identified can be said to be due to the different levels of social justice within each model. This allows the impact of service provision upon social justice to be assessed, thus satisfying the research question. It must be noted that there are various definitions and conceptions of social justice, this research is using Rawls's justice as fairness (Rawls, 1971) when referring to social justice.

In addition to understanding the impact of service provision upon social justice, SST also can be used to suggest solutions for the problem situation, meaning there is a practical aspect to the work. SST is also applicable considering the methodological framework of the research. SST is strongly based in the social constructivist tradition (Checkland and Scholes, 1990), understanding that theory is a construction that can affect systems implementation in the real world and subsequent interactions. Traditionally SST has been used with action research (Checkland and Scholes, 1990), but it is not limited to this. SST has been used with varying

methods of data collection and in numerous fields, with particular success when looking at organisations (Checkland and Scholes, 1990; Vandenbroeck et al., 2014). It has also been used positively in case study research (Thomas, 2011). The blending of theory and practice that is part of SST is also useful in this area as there have been long running debates in social work and social science about the need for theory in practical applications (Gomory, 2001; Thyer, 2001). The way in which SST works satisfies both sides of the debate to an extent, by using theory to create suggestions for improvement practitioners themselves do not necessarily have to spend time learning and understanding the abstract theory to utilise its benefits.

In addition to being used to structure the analysis within this work, SST has also impacted upon the writing and presentation of the research. Stages 1, 2 and 3 of the SST approach have largely been covered by the literature review, in which the problem situation was identified, expressed and purposeful actions identified. By adapting the literature review to express a problem situation in this way, the relationship between how the literature shaped the research and impacts upon it is clarified. Stages 4, 5, 6 and 7 form the analysis of the data. The approach to constructing conceptual and "real-world" models of mental health provision in the YOS is discussed below. These two models were then compared to understand disparities, what moves towards purposeful action are necessary, and what actions could be practically implemented for improvement. This means that the suggestions for practice include both short term goals that can be applied practically by YOTs and longer term aims which are more theoretical in nature and may require restructuring of the YOS or further consideration before they can be successfully applied. This means that not only can improvements be made quickly, but there is an ideal to work towards as a goal or standard.

*Creation of Conceptual Model*

Stage four of SST involves using the root definitions created in the previous stage to create a conceptual version of the system being examined. This conceptual version is an ideal type, exemplifying the perfect system in which purposeful action would be maximised and the transformation process would occur successfully (Checkland and Scholes, 1990). Purposeful activity is simply activity that will lead to the aims of the system being met. For this research this model takes the form of a theoretical version of mental health provision and practice within youth justice. To create this it is necessary to have a clear definition of purposeful activity, who the actors involved are, and what values or contexts would affect this. The aspects of CATWOE that inform this can be seen in Table 3.4.

| | Definition | System Context |
|---|---|---|
| C | Customers | Young offenders and those working within the YOS |
| A | Actors | YOS staff, managers, the YJB |
| T | Transformation Process | Needs unmet → Needs met |
| W | Weltanschauung | Meeting mental health need will reduce offending |
| O | Owners | Operational level management, the YJB |
| E | Environmental constraints | Limited resources and funding, constant changes to YOS |

Table 3.4: Adapted Definitions of CATWOE

These aspects were created based upon knowledge of youth justice structures and practice gained from the literature. Whilst it is accepted that this information may be biased or not a true reflection of youth justice, it has been found through rigorous and defined practices, and can be considered as acceptable to gain an understanding of the elements necessary for CATWOE to be constructed. From these root definitions purposeful activity could be considered. Purposeful activity definitions can be broadly described as ways to carry out the transformation process. In this research, purposeful activity has been defined as:

Mental health and youth justice workers practicing strategies for YOTs to meet young offenders mental health needs with current resource levels and staff provision; in order to reduce offending by helping young people.

Whilst this may be perceived as somewhat vague, specific strategies are an aim of the research and a specific aspect of the later stages of SST. The use of a purposeful activity definition is that it can be used to understand what a system should be structured to accommodate, without being prescriptive to those working within the system. From this definition, certain inferences can be made about what a system would require to promote purposeful activity. From the above

definition; the system must be able to understand the scope of mental health needs, make clear what resources would be necessary to meet that need, reconcile this with the available levels of resources, and identify strategies that would meet need with this resource level. These are all achievable actions, and Checkland (Checkland and Scholes, 1990) discusses how a conceptual model can be created based upon identifying achievable actions in this way. This helps to ensure that the conceptual model does relate to purposeful activity, and could conceivably carry out purposeful activity if implemented.

One of the key aspects of the conceptual model in this work is that it represents not just purposeful activity, but a purposeful activity from a socially just value base. The reason for this is that the research question is specifically looking at the impact of mental health provision upon social justice. The above purposeful activity definition could occur from a number of philosophical standpoints or value bases. To ensure that the conceptual model fits the needs of the research question it must be given an explicit social justice basis. To achieve this, two principles of social justice were created to enhance the purposeful activity definition. As the use of social justice in this work is based upon Rawls's theory of justice as fairness (Rawls, 1971), the principles were created based upon this perspective. Rawls's work is applicable to institutions, but has not been applied specifically to the YOS before, or utilised within a SST approach as the basis for a conceptual model. Justice as fairness was primarily intended to be the basis for a society, and two principles were created specifically for this purpose. It is possible to apply these two principles in other situations, though some adaptions are necessary to ensure contextual consistency. The core aspects of Rawls's principles for social justice are liberty and equality. They have been modified to apply to the provision of mental health services for young offenders.

Two principles of social justice that underlie purposeful activity:

Equality Principle: All young offenders have an equal right to access mental health services.

Need Principle: Disparity of access to mental health services should only occur when there is greater need.

The impact of these two principles is that for mental health services within the YOS to be socially just, there needs to be equal access for all young offenders, and that priority should be given to those young people who have a greater need for accessing mental health services. The implications of these principles directly relate to practice and the structure of provision in certain ways. Having an equal right to access services could be understood in a variety of ways; that all young offenders should receive a mental health assessment or that young offenders should be able to self-refer to mental health specialists. This principle does not give any definitive description of what equal rights to access services should entail; this is appropriate as there are a number of ways to achieve this, with none being objectively right or wrong. Similarly with the second principle, 'greater need' is not strictly defined, as this is often impacted by context and professional judgement. 'Greater need' could take the form of more serious mental health problems, emergency situations, or even time limited situations such as requiring information for pre-sentence reports which require assessment. The variety of interpretations of these principles in relation to practice reflects the aspects which require consideration by YOTs when implementing mental health provision. In terms of the impact upon the conceptual model, the two principles impose certain criteria; for access to be equal, the ways in which services can be accessed and service pathways must be explicit. Additionally, it should be defined what 'need' consists of, specifically what constitutes a mental health problem within youth justice.

Having identified a definition of purposeful activity, and principles of social justice that underlie that definition, a structure could be created for the conceptual model. Certain aspects that were required for a socially just provision of mental health services had already been identified, such as understanding the scope of need and the requirement for clarity of service pathways. These criteria were considered in terms of the basic structure for a conceptual model outlined by Checkland, which can be seen in Diagram 3.5.
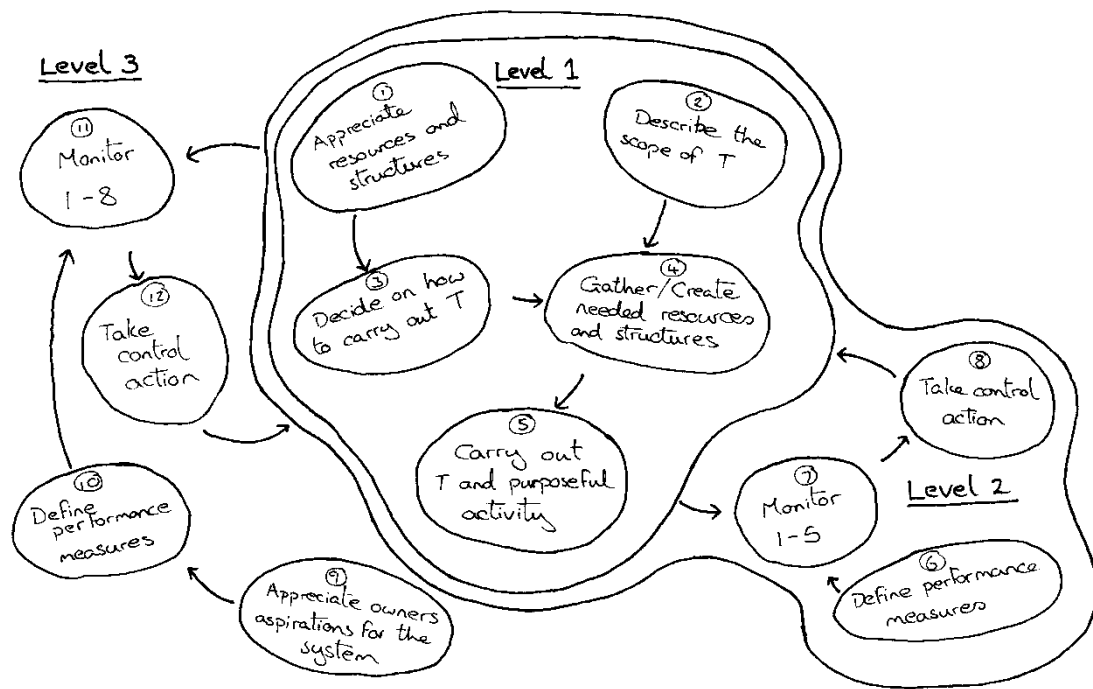
Diagram 3.5: Structure of conceptual model, adapted from Checkland (2000a)

The conceptual model suggests that there are three levels to an effective system, one in which activity to understand address the problem situation occurs, a second where this is managed and held accountable to given performance measures, and a third which has overall responsibility for ensuring the effectiveness of the system as a whole subject to the aims of the system. This basic structure is highly applicable for the conceptual model in this work, as the YOS is created of roughly three levels also, those who work directly with young people, managers, and the YJB. As the conceptual model is an idealised version of mental health provision, having built in accountability structures in the form of performance monitoring and control action would be appropriate. Additionally, certain aspects of Checkland's outline mirror some of the requirements identified by the purposeful activity definition and social justice principles. To create the model as a whole, this outline was used and each stage considered in terms of the purposeful activity definition and the social justice principles. This resulted in the conceptual model outlined in the findings.

*Creation of Real World Model (Thematic Analysis)*

The case study was used as the basis of the real world model. Case studies are often used as instruments to create a theory of how a system operates or a situation occurs (Stake, 1995). In this work the description resulting from the case study has been used within a SST model to

allow for comparison with the conceptual model and the suggestion of necessary and practical changes to the YOS.

Initially after an interview had taken place, it was transcribed verbatim by the researcher. Whilst this took a considerable amount of time, it was deemed necessary to gain familiarity with the data. This would not have been the same had the interviews been transcribed by someone else, or had notes been taken from the audio opposed to full transcripts. It also allowed participants to be given a copy, from which they could review the discussions and then in follow up discussions give comments expanding or clarifying what they had said.

Transcripts were verbatim, with certain aspects of speech recorded such as pauses (although these were not timed) and hesitations (e.g. "Erm"), but not intonation, vocal pitch, or sounds of understanding from the researcher (e.g. "Uh huh"). The reason for this was the focus upon what was said, rather than how it was said. By focusing on the content of interviews, there was less room for interpretation on the part of the researcher, ensuring it was the views of the participant that came across. The reason for taking care to ensure the interviewees views are not misinterpreted by the researcher is due to nature of social constructivism. By using this as a guiding principle, it ensures that there is consistency within the research and that decisions that are made regarding the intent of interviewees are based upon a logical framework and progression. As social constructivism argues for the validity of individuals interpretations of reality (Sarbin and Kitsuse, 1993), it is important that these interpretations are maintained intact as much as is possible. This means that verbatim transcripts are the best option to achieve this.

Once transcripts of interviews were completed, initial coding processes began. This was completed using NVivo 10 software, to manage the data and ensure that no codes were lost or overlooked. This was also viewed as a more secure format for confidential information from the interview transcripts than in a paper format, as the NVivo files could be password protected. Other forms of data such as reports or articles published by the YOTs were also included in the coding at this stage. Specifically this took the form of performance summaries from within YOTs, assessment documents or pro forma used with young people in practice and inspection reports from national bodies. Mostly these were given by the mental health workers interviewed, inspection reports were also found via the YJB website. These were used to create greater contextual understanding of the YOTs involved and the areas in which they operate. In addition to this, Khan and Wilson's (2010) paper that forms part of the research framework for this study was also imported into NVivo 10. The reason for this was to create codes for each form of provision, meaning that Khan and Wilson's (2010) definitions could be directly

compared to information given in the interviews about provision within each team. Again ensuring there was consistency within the analysis and lessening the chance of misinterpretation on the part of the researcher.

The initial coding process looked at transcripts and reports one sentence at a time, giving appropriate codes based upon the content. For example:

> "Yeah, my remit is to assess and provide intervention to young people in the criminal justice system with mental health problems." Taken from the first interview with Dan.

Was given the codes: Role, assessment and intervention.

In this case the code "Role" was used in references to the remit of a job, as it had been previously used in another transcript, and creating a second code for "Remit" seemed redundant as they would cover very similar things. This approach was used throughout all of the transcripts, articles and reports included in the case studies. When looking at articles and reports, the same approach was used, however when diagrams or numerical data (such as demographics) were present, this was left out of the analysis as it was felt to be divergent from the focus of the research.

This process resulted over 300 initial codes, some with numerous references, some with very few. From this point, the secondary stage of coding could occur. This involved grouping together codes that were thematically similar under one larger "parent code". For example, the codes: Assessment, ASSET, and Tools, were grouped together under the title "Assessment". This process was continued and repeated until overarching themes were created. Also during this process, codes with very few references or codes that heavily overlapped with others were removed or merged. The reason for working in this bottom-up process is so that the minutiae of the data are all considered and taken into account when creating broader ideas about its meaning. Throughout this process also, elements of the constant comparative method were also applied, such as comparing points within developing themes against each other to ensure that there is consistency in the way in which coding is occurring and that the themes were distinct. This was used particularly when prior assumptions of the researcher occurred. This was to ensure that there was consistency within the analysis and that bias was checked.

Once overall themes had been discovered, they were considered in terms of the systems in place within the YOS. Soft Systems Thinking looks at how smaller pieces of information fit into a larger system from which they came, which is useful in this case, as the findings should be relevant to youth justice practice. The themes were used to create a model of mental health

provision and practice within the YOS, reflecting reality. Checkland (Checkland and Winter, 2005) created a framework for doing this, however, the data itself was the main guide in this case. The model (see Diagram 4.2) shows the process of commissioning mental health services, how the different forms of provision may be arrived at, the impact this has upon practice, and the other factors that are also involved.

## Critique and Methodological Limitations

It is important to consider how successful the research has been in terms of answering the research question, fulfilling the aims and objectives, meeting standards of rigour and quality. By doing so it can be seen if the findings are accurate and if the implications and suggestions for practice are applicable. This process also shows if the methods and approaches chosen have been useful, appropriate, and worked as planned. Additionally this process of reflection is useful in determining what questions on the topic remain, and what work can continue to move the field forward.

As this research was qualitative in nature, certain considerations need to be made about the quality and rigour of the work. Standards for qualitative research have varied and been subject to question over time, but Lincoln and Guba's (1985) standards are generally considered to be useful and have become the main set of criteria used within qualitative work. Some efforts have been made to create new standards (Poortman & Schildkamp, 2012), but Lincoln and Guba's (1985) are used here as they are widely recognised and accepted. There are four aspects to this standard; credibility, transferability, dependability, and confirmability. Each is considered below with respect to this research.

Credibility is the level of 'truth' in the findings. It has already been established that this work is not attempting to find an objective truth, and is rooted in the social constructionist tradition. Therefore it needs to be established what kind of truth is being represented in this work. This work has attempted to illustrate the realities of mental health provision in the YOS and its impact upon social justice. In doing this it is presenting the thoughts and values of mental health workers and managers within the YOS as an accurate and truthful version of what occurs in that system. However, this version of the truth and its interpretation by the researcher cannot be

taken as accurate on face value. There are a number of ways in which credibility can be established (Poortman and Schildkamp, 2012). In this work negative case analysis and member checking were utilised to establish credibility. During the analysis process, counter-examples to themes were actively sought, to ensure researcher bias was minimised. This was also applied to the prior assumptions of the researcher, to ensure confirmation bias was not occurring. A particular example of this was the identity of mental health workers. It was presumed that all the mental health workers would identify with CAMHS, but this was not true of all the interviewees. Member checking occurred once the analysis has been completed. Participants were sent a dissemination report summarising the findings for their perusal. The majority of participants did not have any comment following this, and some sought further information about the suggestions for practice. There was no questioning of or disagreement with the findings though, suggesting that participants agree with the way their views were represented. Due to this it can be stated that there is a level of credibility within the findings, with the caveat that claims made by the research are limited to the sphere in which they were identified; as there are no claims being made to objectivity in this work.

Transferability is another standard of rigour in qualitative work, relating to how well findings apply to other contexts and situations. As this research took the form of a case study, the transferability is limited. However, this is an issue when researching any specific situation in detail. Certain aspects of the work may be transferred to other contexts, such as the identification of the forms of provision in individual YOTs, as this emerged from specific situations with clear criteria. The understanding of practice and its relation to social justice that this has given could be translated more broadly. The suggestions for practice are more easily transferrable across the YOS, as there was agreement across all the YOTs involved in the research about the problems that occurred in practice. Proof of transferability is generally given through thick descriptions, creating detailed understanding of a situation so it can be seen how it would apply in different contexts. It is hoped that this has occurred in the writing of this work, particularly in the discussion of the findings. The success of a thick description cannot be claimed without an audience to receive and critique the work. This partly relates to the member checking process, but also to the presentation of the work at conferences. Regarding this research other acceptable contexts would be limited to other YOTs; however it is noted that some of the issues identified through the research occur in other social agencies and in multi-agency working (Lincoln and Guba, 1985), and so there may be some scope for greater comparison.

Certain aspects of qualitative rigour cannot be confirmed by the researcher themselves, as it requires an outside perspective. Dependability and confirmability both share this aspect. Dependability, or whether the findings are consistent and replicable, can be confirmed through an inquiry audit. This is difficult for projects with one researcher. It is hoped that through the clear description of the methods and methodology, analysis, and results that some level of dependability can be seen. Whilst the interviews did not have identical question schedules, similar topics were discussed in all the interviews (See Appendix 8.4), as can be seen through the consistency within the themes. This clarity of description also aims to give a level of confirmability to the work. By ensuring transparency in the reporting of the research, any researcher bias is visible. Partially due to the philosophical standpoint of the work, there has been a strong awareness of the impact of bias throughout the research, and so certain reflexive measures were adopted to ensure researcher bias did not affect the findings where possible. This included discussions with supervisors about the findings and approach of the project. Understanding outside perspectives of the work was infinitely useful for the researcher and ensured that certain aspects were not overlooked.

Based upon these standards the research can be said to have some level of rigour. It is acknowledged though that the researcher alone cannot grant this distinction unquestioned. Certain aspects of rigour require outside audiences, stressing the importance of disseminating findings. Discussion allows some understanding of the utility of the findings, but it must be acknowledged that there are also limitations. It would be inappropriate to apply these findings beyond the context of mental health work within youth justice, but it may be possible that they apply across the entirety of that specific context. However, further work would be required to support this. In addition to the utility and limitations of the findings themselves, the process through which they were discovered also requires discussion regarding efficacy.

The theoretical framework for this research was based in social constructionism. Due to this there has been an emphasis throughout the research about the ways in which individual's views and ideas are created and that views of individuals all carry the same weight. This approach has been used successfully with the research methods and analysis, and some of the themes that emerged from the data are particularly linked to construction. The approach taken by mental

health workers being the most obvious example of this. By understanding that mental health workers are created, through training, experience, workplace environment and so on, we can begin to understand what approaches to this 'creation' are more appropriate in specific situations such as within the YOS, and thus impact upon selection processes. Additionally the process of analysis itself was heavily based within a social constructionist tradition. By utilising a SST approach, creating models became a central aspect of the analysis. These models were clearly constructed by the researcher, based upon either the interviews or a theoretical framework of social justice. It is likely that the conceptual model of the YOS is the aspect of the research most likely to cause contention or disagreement. The model that has been created for this research is not being presented as the only possible conceptual version of the YOS. Rather, it is the version that has been created based upon a specific set of principles, with the specific aim of understanding what the YOS would look like if mental health provision were approached in a socially just manner. The model was also created for the specific purpose of this research, as a tool to further the analysis. Whilst it is possible that this conceptual model could be of benefit if applied to the YOS, it is likely that a model created for the specific purpose of practical application would be more appropriate.

The use of SST to structure the research was a particularly positive aspect of the work, as it allowed the findings of the thematic analysis to be used in a way that attempted to solve problems within the YOS. This would likely not have happened without the use of SST. Thematic analysis alone has been discussed as lacking further insight (Bazeley, 2009). Whilst thematic analysis is extremely useful in helping us understand a situation or context in depth, that understanding is an end point. In areas of social research that are strongly applied, or relate to practice, understanding is not enough. Research must go further and attempt to improve problems or offer solutions. As SST specifically approaches research as a method of problem solving, it was a particularly useful tool. If SST had been encountered in the early stages of formulating this project, it would have been used to structure the research as a whole, and implemented into the methodology opposed to only the analysis. This would have allowed for explicit discussion of what a model of the YOS would look like in the interviews, which would have been interesting and possibly given details not found here.

Usually SST is an epistemological approach, whereas here it has been used as a guiding principle for part of the research. Before this decision was made it was considered fully whether

SST was compatible with the epistemological and methodological approach of this work. A case study approach was decided upon in the early stages of the research, as was the social constructionist standpoint. As SST developed from a background of action research and social interactionism, it was considered to be compatible with the existing epistemology of this work. Of particular interest and use was the construction of models, which is a key aspect of SST, and how this would complement the case study.

One of the main practical issues that emerged throughout the research was participant recruitment. The majority of YOTs contacted regarding the research did not respond at all. Whilst this is a common issue for any type of research, it should be given particular scrutiny in applied fields. Those who did participate in the research generally expressed that they had done so before. Researchers must be aware of this as it may be that the some YOTs participate in research frequently, whereas others do not at all, thus skewing findings and suggestions for practice and policy. Additionally, almost all of the YOTs involved in this research wanted to know about the possibility of using the findings for their own internal reports. This suggests a level of confidence in their methods and approaches, and so it may be that those YOTs that participate in research are those with reason to believe in their own efficacy. Of the YOTs in this research, one was being consulted for ways to improve practice by other teams, and another was going to be involved in the pilot scheme for payment-by-results. This suggests a level of success, so it must be considered that there may be bias in the sample.

With the possibility of bias, there needs to be discussion of how this could affect the sample and findings. As the YOTs in this sample generally have been part of research projects before, this suggests a level of reflexivity on their part. It is unclear if reflexivity is common in YOT practice, however, trends towards managerialisation suggest it is not (McLaughlin and Muncie, 2000; Muncie, 1999). Higher levels of reflexivity may impact how practice was discussed in interviews. Almost all the participants seemed aware of issues within their practice, even if they did not have the capacity to change them, and there was also clear delineation of identities. That these abstract issues were so clearly discussed suggests that they had been considered before, and in some YOTs reflection had been built into practice through supervision and working contracts. That these factors came through as themes is of interest, and there is a need to see if this also occurs in YOTs that do not normally participate in research. Achieving this is difficult

though, as those YOTs that do not participate in research are more likely to not participate in future research.

During the data collection process there were some problems in how to approach the interviews and what questions to ask. Generally, the interviews did not explicitly address social justice, as this would have involved a detailed discussion of what social justice is, and how it is perceived by each interviewee. Whilst these discussions would be interesting, they would not have advanced the research, which was specifically utilising John Rawls's version of social justice (1971). There was concern that without these discussions it could not be guaranteed that the collected interviews would be able to address social justice in the YOS. To overcome this problem, the research drew upon the work of Machan (1985), who discussed the abstract concept of justice as a lack of injustice, which becomes tangible in the form of problems or visible inequality. In the interviews, instead of framing the discussion around what social justice is, the questions directly asked if markers of injustice were present. For example, markers of injustice were inaccessibility of service, the criminalisation of mental health, and stigmatised views of mental health. This allowed the interviews to progress and maintain relevance to the research question. It is recognised that the issues used as marks of social injustice may not be considered in the same way by others. They were arrived at based upon the literature, and consideration of Rawls's view of social justice, so it is hoped that there is consistency with the researchers' approach, even if this approach would not be universally chosen.

There were also some issues during the analysis process. When initially analysing the data there were some problems in maintaining consistency in how each interview was coded. As themes or points of importance emerge, it is difficult to prevent these ideas from informing or affecting how subsequent material is coded, thus forming a funnel effect. Of course, some aspect of this is part of qualitative work and how themes emerge, there was some uncertainty about whether a theme truly was emerging or if confirmation bias had played a role. As with many of the issues related to subjectivity within research, having an awareness of this problem allowed for countermeasures to be taken. Countermeasures in this instance consisted of maintaining a research diary; so it could be seen and reviewed how ideas progressed, discussing the findings as they emerged with the supervision team; to allow for outside perspectives and the ideas to be challenged, and by actively seeking information in the data that is counter to the ideas that emerged to ensure that bias was not occurring. This process meant that some of the initial ideas

that emerged from the coding were modified, integrated with other ideas, or discarded altogether. Certain aspects of the data were interesting single points, but did not develop into themes. Maintaining an awareness that findings (particularly so in thematic analysis) are constructed helped to avoid these potential sources of bias as the way in which the construction itself occurred was questioned.

In terms of improving the research, there are a number of factors. Primarily, the sample size could have been larger, or more interviews done with the existing sample. The need for 'more data' can apply to any piece of research, but practical constraints often limit what is collected. It has already been mentioned that there was difficulty in finding YOTs willing to participate, which limited the sample size. Additionally, those who did participate in the research all had limited time. These are professionals with high workloads, and as such, whilst spending time in a research interview may be interesting or useful, there are limits to how often this can occur. One of the mental health workers participating mentioned that their manager wished to account for the time spent in the research interviews, and wanted to know the content of the interviews. Factors like this limited the ability of participants to commit to further interviews. The difficulty in recruiting participants was foreseen early in the research, and so contingency plans were developed. If enough data was not gathered from interviews alone, themes derived from the case study would have been used as the basis of a questionnaire, which would have been sent to a large number of YOTs across England and Wales, to discover if the themes were represented on a larger scale across the YOS. This was not necessary though, as a sufficient number of YOTs agreed to participate.

Whilst eight is a relatively small number, it was enough to establish whether or not support existed for Khan and Wilson's forms of provision, which was an aim of the research. With regards to understanding practice, eight YOTs was sufficient to create a detailed picture. This particularly became apparent after the first set of interviews had been completed, and there was congruence across all of the YOTs regarding the problems that occurred in practice. Whilst saturation on this subject is not being claimed, that all the YOTs involved had similar problems within practice suggests that the interviews were effective in uncovering information, and that further questioning upon these lines may not have found new details.

Additional changes would have been methodological. If the researcher had been aware of SST earlier in the project, this would likely have been used throughout the research as a whole opposed to only within the analysis and writing. The creation of the models could have been an interesting point within the interviews, and whilst the concept of an ideal YOS was touched upon in the interviews, this could have been a more detailed discussion and added to the creation of the conceptual model. The use of group interviews was a choice made due to practicality and the preferences of the YOTs participating. However, this was not an ideal choice methodologically. There were three group interviews throughout the course of the research and there were some marked differences between those and the individual interviews. The presence of managers in particular seemed to have an effect. The group interviews where managers were present contained more power dynamics than the other interviews, which were recorded in the field notes, and became apparent during the analysis. Managers maintained more of the discussion than the mental health workers and in one interview attempted to answer for the mental health worker on occasion. One of the group interviews was only with mental health workers and this did not have these features, leading to the conclusion that the presence of both mental health workers and managers in an interview affected the discussions to a certain extent. Although other group dynamics such as familiarity certainly played a part also. Individual interviews may have been preferable in these instances, as it would have allowed individuals to put across their views more freely, and without concerns about confidentiality.

An important aspect to consider when evaluating the methodology is what new knowledge has been created by this research, and how this builds upon existing knowledge. This is necessary because finding new knowledge and adding to the current knowledge base is an important aspect of the reasons for conducting research. In this work there are three main aspects that create new knowledge and build upon the literature. Firstly, the finding of support for Khan and Wilson's forms of provision (2010). Secondly, Rawls's theory of justice as fairness has been implemented in a novel way within this work, adding to the ways in which theory can interrelate with practice. Thirdly, suggestions for practice have been found. Whilst results should not be used to justify the methodology, that the methods have led to results which satisfy the research question and aims indicates that the approach used was appropriate. In addition to this the research met standards of rigour in qualitative research, which suggests that the methods used were appropriate for the research and were carried out effectively.

**Summary**

To satisfy the research question, and understand how the relationship between social and criminal justice impacts upon mental health practice and provision within the YOS, a case study was constructed based upon interviews with mental health workers within the YOS. These interviews were semi-structured, and focused on issues within practice as a way to understand how social and criminal justice are balanced within each YOT. To ensure that a the differing forms of provision were included in the case study, Khan and Wilson's descriptions of forms of provision were used in the sampling process. A total of eight YOTs participated in the research.

The interview transcripts were thematically analysed, and the resulting themes were used to create a model of mental health provision in youth justice. This model was then used within a SST framework, which unites theoretical and practical aspects of the research. This is central to the research question, and so was seen as a useful approach to the analysis.

## Findings

### Overview

To answer the aims and research question, the analysis had to account for a number of aspects. Firstly, if there was support for Khan and Wilson's (2010) forms of provision in practice, as this was a main aim of the work and part of the research framework. This work took place very early in the data collection process, because if this framework was not supported, the format of the case study would need to be reconsidered. Support for Khan and Wilson's work was found, which allowed data collection and analysis to continue and understand the relationship between provision and social justice. To do this, the case study was used to construct a model reflecting the realities of mental health provision within the YOS. How this was done was discussed in the previous chapter; the findings of the model are discussed below. This was contrasted with a conceptual model of the YOS, which represents an idealised version of mental health provision being based upon principles of social justice. The main difference between the two models is the use of social justice as an underlying principle. Therefore, it can be said that any differences between the two is due to the presence, or lack, of social justice. This approach of model creation and contrast is based upon the SST approach also described previously. The impact of provision and strategies for improvement can be identified through this process. These strategies take two forms. Firstly, short-term measures that can be implemented by YOTs to improve practice. Secondly, long-term strategies that are aimed at operational management and commissioning bodies.

### Participating Teams

A brief 'pen-picture' of each YOT that participated in the research is given here. Pseudonyms have been used for all individuals and locations. Information about each area was taken from YJB statistics (Youth Justice Board, 2013b) and reports by the Criminal Justice Joint Inspectorate (Healthcare Commission and Her Majesty's Inspectorate of Probation, 2009). Descriptions of the level of youth crime in an area take into account population size.

Brookshire YOT has one mental health worker, Sarah. Sarah is trained as a mental health nurse, and has a specialist qualification in EMDR therapy. Brookshire is a large, mostly rural county comprised of small towns. It is overall relatively affluent compared to the general population.

The level of youth crime in Brookshire is average in comparison to other areas when taking into account population size.

Northdale YOT also has one mental health worker, Liz. Liz is a trained mental health nurse. She regularly works with Amy, who is based within Northdale CAMHS, and is often involved in referrals between the two agencies. Liz's manager, Vicky, was also interviewed. Northdale is a mid-sized, affluent city, with an average level of youth crime.

Westley is a small metropolitan city with high levels of deprivation. Westley YOT has one mental health worker, Dan, a trained mental health nurse. Westley has a high level of youth crime. There is also a wide variety of ethnic groups living within Westley which the YOT takes into consideration in their practice.

Edgeham YOT has two mental health workers, Jane and David, both mental health nurses. Their manager, Luke, has a strong interest in mental health. Edgeham is a mid-sized city with an ethnically diverse population. There are areas of deprivation in Edgeham, but areas of affluence also. There is a high level of youth crime in Edgeham.

Stoneycombe is an average-sized county comprised of a central city and a number of smaller towns. Stoneycombe YOT has two mental health professionals, Claire, a trained psychologist, and Jill, an assistant psychologist. Claire and Jill's manger, Rebecca was interviewed, as was the head of service, Joanne. Stoneycombe is an affluent area, with lower levels of diversity. There is a lower than average level of youth crime here.

Newkirk YOT has three mental health workers, Mick, Annie, and Beth. Mick and Beth have a background in social work before training as mental health nurses and Annie is a mental health nurse also. Newkirk is a large metropolitan city with high levels of deprivation. The city is mostly urban, with few suburban areas. There are high levels of diversity in Newkirk, which impacts upon the YOT. Newkirk has a high level of youth crime.

Woodshire YOT has three mental health workers, William, who is a psychotherapist, Emma, who is a trained counsellor, and Phil, a mental health nurse. Woodshire is a large county with a number of mid-sized and small towns. There are areas of great affluence and some of deprivation across the county and low levels of diversity. There is a low level of youth crime in Woodshire.

In Midcaster there was a specialist service for young offenders with mental health needs which services both the county and city YOTs. This service was comprised of thirteen mental health workers of various backgrounds, and managed by Naomi, a mental health nurse who helped to create this provision. Midcaster city is large and urban has a high level of deprivation and also high levels of youth crime. Midcaster county is largely rural and has a low level of youth crime. Midcaster is highly diverse, which has impacted upon the practice of the mental health workers.

## Evidence for Forms of Provision

It was necessary to ensure that Khan and Wilson's (2010) forms of provision were supported before continuing with data collection. To gain this support, the given forms of provision needed to be reflected in reality. As the models were described based upon distinct features such as resource levels, structure, use of assessment tools etc., these were used as criteria for comparison. Some evidence for this was collected during participant recruitment and scoping discussions with YOTs, such as number of mental health workers and basic structures. Further information was collected during the initial interviews. Each of Khan and Wilson's theorised forms are considered individually in terms of how well it was reflected within the case study and how it impacted upon social justice within practice. The impact of social justice was identified through a number of factors. If mental health workers were able to use their professional judgement in relation to practice in an uninhibited manner, this was perceived as socially just. This is because it shows an acceptance of other approaches by the YOT and an understanding of the role of a specialist. Conversely, minimising professional judgement

through stringently enforcing certain standards within the YOT, or asking mental health workers to carry a YOT caseload was perceived as limiting social justice. Considering aspects of practice in terms of social justice not only creates an evaluation of the models, but also helps answer the research question by showing the impact provision has upon social justice.

*Lone Worker: Northdale and Brookshire*

This type of provision was described by Khan and Wilson (2010) as a single mental health professional seconded into a YOT full time. Lone workers were described as having low levels of resources, being limited by a lack of professional expertise in other areas, isolated from clinical work and having few links back to CAMHS. However, lone workers were also characterised as being energetic and enthusiastic, valuing the creativity and challenge of the role, but often having to negotiate barriers with managers or workers who may not have a detailed understanding of mental health. It was expected that this provision would not promote socially just practice.

There were two YOTs with lone workers involved in the course of the study, both mental health workers were interviewed (Liz and Sarah) as was the manager from Northdale (Vicky). Generally their descriptions of the provision they worked within were consistent with Khan and Wilson's theory. Both Northdale and Brookshire each has one mental health worker as the entirety of their health provision. Both were registered mental health nurses, without specialisms. Sarah had undertaken and EMDR course, but this was a singular event and it was unlikely that there would be the opportunity for further training in this area. Both Liz and Sarah were seconded from CAMHS, and worked in the YOT full time.

Lone workers were described by Khan and Wilson as "terrier like" (2010) in their enthusiasm and drive to meet the needs of young people in their area. Both lone workers interviewed were very passionate about their work and stressed the importance of meeting needs. However, there was also an awareness that the lack of resources meant that this might not always happen. The two workers reacted to this differently, with one attempting to do as much as possible, and the other taking what may be a more pragmatic approach and raising thresholds.

"I'm less keen to routinely health assess [pause] every young person." – Liz, Northdale

This difference was reflective of other aspects of Liz's approach, and view of working, which was much more in line with that of the YOS rather than CAMHS. This may be because of the cultures within the YOT and levels of support. Sarah felt isolated and lonely, in a way similar to Khan and Wilson's characterisation. Whereas Liz felt very much part of the YOT and supported well.

"it's quite a lonely job. I mean I get on with both teams but it would be nice to share" - Sarah, Brookshire.

"But I identify myself as being a part of the youth offending team, so I guess that's [pause] where I get away from that single lone worker, kind of very difficult, identity." - Liz, Northdale.

The level of support seemed to be a main difference between Brookshire and Northdale YOTs. This impacted mental health workers and how they identified themselves as fitting into the YOS. Brookshire's YOT seemed less integrated in terms of multi-agency working, with the mental health worker getting minimal support or supervision from within the YOS. Northdale's YOT were much more supportive of mental health and saw it as having an important place within the youth justice process as a whole. This impacted upon the professional identities of the mental health workers and how they perceived their role. Liz considered herself to be a member of youth offending staff opposed to a mental health worker or a member of CAMHS. Whilst it is positive that this meant she had increased feelings of support, it had led to some negative views of CAMHS and impacted her interactions with them.

"it's quite a traditional service, and there's nobody [pause] I do lots of presentations and people say 'oh that was really interesting' but nobody really asks any questions at CAMHS [laughter] because actually, their interest level isn't there" - Liz, Northdale

Conversely, Sarah did not feel she was well supported by managers in the YOS, which led her to identify more strongly with CAMHS as the support they gave her created a sense of 'belonging'.

> "You know, you need your CAMHS links because of your professional qualification, and one thing I've found, meeting up with other CAMHS workers […] I find it invaluable, to be honest, to share stuff, to share the mental health side of things with a colleague, because in YOS they do things very differently" – Sarah, Brookshire

It is difficult for a lone worker to meet the mental health needs of all young offenders in a specific area. Whilst Brookshire and Northdale have similar levels of youth crime, Brookshire is much larger, which creates problems of accessibility. Working within a larger area with a greater population implies that Sarah has to work with more young people than Liz. This may further explain her desire for a colleague. In addition to this their different approaches to working impact practice in specific ways. Liz aligns herself with the YOT and is unconcerned about the effect of delivering mental health interventions in a criminal justice setting; and so meets young people in the YOT offices. Sarah does not do this, to emphasise the voluntary nature of mental health work and that it does not impact upon young people's sentence or order. As such, she travels around Brookshire meeting young people. By not having to travel, Liz has more time to meet young people and is therefore more accessible to both offenders and to discuss cases with youth justice workers. Sarah is less accessible due to the time she spends travelling, but finds it necessary for her practice, and useful in creating positive working relationships with young people.

> "I think the most beneficial work is done in the car when you're driving. When you're driving along and you're not looking right at them and you can ask them questions and you get an amazing. You get answers, because they're not feeling under pressure, it's just normal life." – Sarah, Brookshire

The issue of accessibility is also of greater importance in the lone worker model because if Liz or Sarah are absent due to illness/holidays/training and so on, the YOT has no mental health provision. By having only one worker, the YOT is reliant upon their presence. This also means that young people's needs are also reliant upon their availability. In areas of limited access it is vital that youth justice workers have an understanding of mental health. In Northdale YOT, this seemed to be the case, and Liz ensured that new staff were given some mental health training. This same cannot be said of Brookshire YOT. Sarah encountered negative views of mental health and youth justice workers who were resistant to change. This impacted the type and number of referrals she received. Sara had tried to offer training or drop in sessions, but these were not acted upon.

> "If they, we try to, my colleague and I, who used to be in the position, we tried that when we had a Monday morning, say a two hour slot, where if anybody wanted to come and see us to discuss a case, but people are so fixed in their routines, we didn't have anybody and so they carried on doing what they always did, which was any time just come up to us" – Sarah, Brookshire

The lone worker provision inherently has problems regarding accessibility of services and support for mental health workers. This approach is unlikely to be able to meet the needs of young offenders. Both Liz and Sarah had adopted strategies to improve their situations, Liz found support by aligning herself with the YOT and met need by narrowing what was considered as 'need'. Sarah overcompensated within her practice, including not closing cases when a young person's order ended, to ensure that their needs were met.

> "So if I kept a case on, at YOS and obviously I'm meant to close when they, their order finishes or within a short time of their order finishing, but I have kept cases on when I've felt it necessary. Nobody's ever quibbled." – Sarah, Brookshire

These two opposing strategies show the inappropriateness of the lone worker format. The needs of young offenders cannot be sufficiently met in this manner. This form of provision was the least able to meet needs and also showed the fewest markers of socially just practice.

Mental health provision was considered as necessary in Brookshire and Northdale due to the statutory requirement and high prevalence of mental health problems, but not as a possible strategy to reducing youth crime or meeting organisational needs. Mental health provision was considered supplementary to practice, and had not been integrated well in either YOT. There were problems in both areas with YOT staff having low understanding of mental health or negative perceptions of it, which impacted upon the likelihood of young offenders receiving help. This led to socially unjust practices, such as offenders being denied access by youth justice workers when it may have been necessary. There were also poor relationships between the YOT and CAMHS in both Northdale and Brookshire. Differences between the approaches of the two agencies were considered as stubbornness or a lack of co-operation and created tensions within practice.

"you get seen as being a bit difficult somehow. And that's just the way it is, and they, they just have a set way of working they don't want to alter the way they work so they won't work round you " – Sarah, Brookshire

This not only means that treatment of young offenders is not socially just, but also treatment of the mental health workers. Liz and Sarah both had negative experiences in youth justice, where their professional judgement was not respected, or they were asked to carry out youth justice work, and they had to fight for their views to be heard.

"you've got to do the referral order contract sometimes, it makes me squirm a little when they say, you know, you've got to do so much victim empathy, and you think, yeaaaaah" – Liz, Northdale

The lack of support for mental health approaches amplifies these problems, meaning that young offender's needs are not met and that mental health workers in this form of provision are at risk of isolation or role drift. The lack of social justice present in lone worker models, in addition to the other issues discussed here, mean that it is not an appropriate form of mental health provision. Whilst Liz did not feel isolated as Sarah did, it is unclear if her identification with youth justice was a true choice or a way to avoid becoming isolated.

*Foot-In-Foot-Out: Westley*

The foot-in-foot-out approach is based upon mental health workers who divide their time between a YOT and a CAMHS service. This could be a lone worker splitting their time equally, or two mental health workers in a 'job share' scenario. Foot-in-foot-out approaches may co-exist with other types of health provision in the YOT, but mental health provision is on a part time basis only. This allows mental health workers to maintain links to CAMHS and ensure their clinical knowledge is up to date.

The foot-in-foot-out form of provision was found in one of the participating YOTs, Westley. The provision there reflected Khan and Wilson's (2010) description well. In this instance, a lone mental health worker, Dan, was seconded into the YOT and spends half of his time based within CAMHS. Westley YOT also had a specialist worker for physical health, also on a part-time basis. At the beginning of his secondment, Dan was based within the YOT full time, but his role

had changed in the last four years to include more CAMHS work. Dan now spends two days a week in Westley CAMHS and three days a week in the YOT.

Dan receives support from both the YOT and CAMHS in the form of supervision and the maintenance of clinical skills. Dan, was not entirely happy with the arrangement though, and would prefer to be in the YOT full time opposed to split-site working. This could be due to his background, Dan had previously worked in forensic environments and was more familiar with criminal justice mental health work. Additionally Dan holds a YOT caseload, which is unusual, he was  the only mental health worker in the case study to do so. The caseload was comprised of young people with more severe mental health problems, as it was thought they would benefit from having a mental health worker manage their case as youth justice workers may not have the knowledge or understanding of the specific mental health issue or how this impacts upon their offending behaviour.

> "I also carry a small caseload of kind of, probation, erm youth rehabilitation orders.  But those young people would have a specific mental health problem." – Dan, Westley

That Dan holds a YOT caseload is a point of concern and shows how his role has drifted from that of a specialist to a more general role within the YOT. The Westley YOT had been criticised in inspections for this use of provision, and it was being considered by management if this should change. Dan did not seem to have a high level of agency in these discussions though, which may be indicative of management's perception of seconded professionals and the value of professional judgement.

> "It was criticised in erm when we had our latest kind of inspection. My carrying a case load of young people, you know, could be seen as quite an expensive use of resources really. [Long pause] It's a tricky one really, it's for the managers to decide." – Dan, Westley

Having a mental health worker within the YOT on a part-time basis limits access to services, and giving that worker a YOT caseload limits their time for mental health work further. It also creates certain conflicts of interest, for example when a young person breaches the conditions of

their order. Dan felt some dissonance between the dual roles he held in these situations and was unsure of how to act.

> "Although I breach when I need to, I tend to try to [pause] be as flexible as I can within the legal parameters that can be taken really." – Dan, Westley

In terms of meeting young people's needs, the foot-in-foot-out format is lacking. Whilst having time in CAMHS is beneficial for mental health workers in terms of support and maintaining knowledge, there is also the risk of having to address young people's needs in a reduced time frame. In Westley YOT, where Dan is a lone worker, carrying a YOT caseload, his time to assess, refer and carry out interventions for mental health needs is severely limited. The foot-in-foot-out models can also operate with two mental health workers. This may alleviate this issue somewhat, but the two mental health workers in this situation would have to discuss practice frequently to ensure consistency and share information.

It seemed that within Westley YOT the general perception of mental health was a medical view. In addition to affecting referrals, this view impacted Dan's opinion of what mental health workers should address, making a distinction between a disorder and difficulties.

> "You know, [oppositional defiant disorder] is diagnosable in DSM isn't it? But you know, do they have a particular mental illness? I don't think so really."

This limits the services that are available to young offenders in Westley, particularly if they are dealing with internalising or non-medical issues such as affective disorders, anxiety, or conduct disorder.

> "a proportion of [young offenders] will have a mental health element to that, whether it's a disorder or an illness, or just an emotional wellbeing kind of issue that's quite transient." – Dan, Westley

Gaps in provision were identified by Dan that required specialist input, specifically learning disorders and autistic spectrum disorders. Language difficulties were also noted as being

prevalent in Westley. That Dan recognises these issues as requiring specialist help is positive, however, in Westley YOT there are not resources available to address this. There is also a lack of other sources of support in the local community, making it harder for these young people to have their needs met.

> "I think that [pause] yes, in an ideal world you would want a dedicated forensic, you know, team that could meet the needs of all young people that were, that came into contact with the youth justice system, but we don't have that." – Dan, Westley

In terms of socially just practice, Westley YOT could improve. It is difficult for young offenders in this area to access services, and if they do, the views of mental health within the YOT are somewhat narrow due to the use of the medical model, and the potential linkage of criminal justice to mental health work; due to Dan carrying a YOT caseload. Regarding this, it seems that the decision to carry a caseload does not rest with Dan, who would like to change this, or local CAMHS, who appear to have little influence on the structure of provision within the YOT.

> "Erm, you know I do feel, I know that it is an unusual arrangement, erm, it's something that, you know, I think that would probably work [pause] probably towards, not doing in the future. But at the moment, that's just how it kind of is for me." – Dan, Westley

That Dan has little agency in deciding what his role is and what work falls within that is not indicative of socially just practice. Additionally, Dan having ethical dilemmas regarding breaching young people to whom he is also delivering mental health treatment is concerning. In discussing this, Dan mentioned that this had happened on a number of occasions, implying that despite his discomfort with this, no changes had been made to practice to improve the situation.

> "Sometimes I am, I do struggle with it occasionally. You know, one of the criticisms I get for carrying a case load, is that if those cases that I manage don't comply with their orders, how do I feel ethically with having to take them back to court and breach them. Sometimes it can be a dilemma for me" – Dan, Westley

These issues may be related to the culture and management of Westley YOT rather than being aspects of foot-in-foot-out provision. However, that these issues can occur within this approach implies that it is not appropriately structured to allow mental health workers to maintain boundaries around their role. There are also issues regarding accessibility in this type of provision; perhaps this may be improved if there were two mental health workers, but Westley YOT is an example of one not being enough to meet needs in this format.

*Health Team Within A YOT: Edgeham and Stoneycombe*

The description of the health team within a YOT implies that it overcomes the issues that are inherent with the lone worker and foot-in-foot-out forms of provision. This provision is comprised of a variety of health and welfare professionals working together within a YOT, including at least one mental health worker. By creating a health team, there is support within the YOT for mental health workers and the boundaries of their role are clearer. This does risk weak links to and relationships with CAMHS and other services, as the health team professionals work within the YOT full time. This provision is better able to meet needs though (Khan and Wilson, 2010) and was expected to foster socially just practice.

This type of provision was found in two participating YOTs. Stoneycombe YOT had a psychologist and assistant psychologist, a primary health worker, a housing specialist and a substance misuse worker and a specific manager for this team. Edgeham YOT had two mental health nurses, an education worker and two substance misuse workers as part of their health team, which also had a dedicated manager. This makes up the health teams within the two YOTs and fits with Khan and Wilson's (2010) description. All members of the health teams worked full time in the YOT. There were large efforts to maintain links to CAMHS in Edgeham, and the mental health workers received supervision from both CAMHS and the YOT. In Stoneycombe there were also links to CAMHS, but supervision from both organisations was seen as less necessary due to the high level of qualification and training Claire had had. The ways in which this format had been arrived at in both YOTs was of interest, as the managers, Luke, Rebecca and Joanna, had worked with other forms of mental health provision before, and found it unsatisfactory, or it has shaped their views about what they considered to be appropriate provision. In Edgeham this provision had been arrived at following a breakdown in relations with CAMHS, which had to be rebuilt. Following the separation of services, the YOT

hired a psychologist independently, and aspects of this were viewed positively, such as the freedom from CAMHS procedures.

> "That led to a greater degree of freedom for us. Because we employed her. She in essence did what we asked her to do. Erm, I'm not saying that's the answer, because, again the YOS isn't, doesn't know everything and mental health is a very specific area. But it certainly led to a swifter response in certain times" – Luke, Edgeham

There had to be a link with CAMHS due to multi-agency requirements in Edgeham, and so provision was re-addressed. Two registered mental health nurses were seconded into the YOT following the dispute, with a manger in the YOS regularly discussing the format with a manager in CAMHS to ensure the needs of both services were being met. The mental health workers in these YOTs received supervision from both the YOT and CAMHS.

In Stoneycombe, the structure of provision was re-assessed due to the previous mental health worker leaving the service. The manager in this YOT had an interest in mental health and was very clear about what provision they thought was needed in the area, based on what had worked previously and what could be improved. A psychologist and an assistant psychologist were seconded from CAMHS. This is quite a high level of expertise compared to other YOTs, and the YOT manager was clear that level of knowledge was what they wanted within the team.

> "I set up a team and purposely identified that I thought a psychologist would fit best really. Erm, with this service. So I think it was a conscious decision to have a psychologist before I arrived but I think that would probably be the preferred model that I would have gone with anyway." – Joanne, Stoneycombe

By having a health team within a YOT, there is greater accessibility for young people to have a variety of needs addressed, and YOTs can create the team based upon specific needs within the area. Both Edgeham and Stoneycombe YOTs had links with local CAMHS services which helped mental health workers feel supported, and in Edgeham, CAMHS was regularly involved in discussions to ensure standards were being maintained. With these structural issues and

tensions between organisations overcome, both Edgeham and Stoneycombe YOTs were better able to focus upon meeting need.

> "we still have issues now, as I say I think it smoothes over because from operational manager down, we all have a good understanding of where we're coming from." – Luke, Edgeham

> "Erm and sitting down and saying we have to do something about this or something's going to happen. Erm, and actually today I think erm, probably because of the personalities of both from this end and that end have really committed to trying to make things work, we've kind of, we've had good turn around and we're working much better with them than we had done previously." – Joanne, Stoneycombe

Additionally both YOTs had more than one mental health professional, this seems to have highly positive effects for accessibility. Both Edgeham and Stoneycombe YOTs had also moved beyond meeting basic mental health needs and were committed to meeting need on a broader scale.

> "We'd have a very open dialogue and communication about that and we'd reach a decision about what was best for the young person. Erm, so I think that works quite well." – Joanne, Stoneycombe

Whilst what is "best" for a young person is open to interpretation, that discussions about this are occurring shows reflection in practice. Considering the aims of the YOS, it could be argued that what is "best" for a young person is what supports their desistance from future offending. The health team in Stoneycombe supported young people in a variety of ways that may contribute to desistance; such as substance misuse support, education work, and accessing mental health services. This not only means that young offenders are receiving a robust and appropriate service, but it is also socially just practice, as it is meeting the needs of young people in a way that is commensurate with the overall aim of reducing offending.

This form of provision gives mental health workers flexibility and elements of choice about their approach. This included use of assessment tools and information sharing. In Edgeham, the

two mental health workers adopted somewhat different approaches to working within the YOT. This was a particular point of interest in this analysis as it clearly showed if the 'health team within the YOT' would allow different approaches to occur, which is indicative of socially just practice. One of the mental health workers strictly maintained a CAMHS approach, whereas the other was much more willing to adopt a YOT approach.

> "One person [long pause] is slightly maverick. Not terribly maverick but, one person is of the view of 'well that kid needs to be seen' and that's what I need at the end and almost a little bit of a Machiavellian approach of 'right sod the rules, I'm going to go out and do that'. The other person is, quite rightly, is very much driven about erm, 'under my guidance at CAMHS I'm not allowed to do A, B and C or I've not been instructed to do that'" – Luke, Edgeham

This caused problems within the team as there was a lack of consistency, which was discussed and addressed by Luke, who had tried to find solutions to this issue. Overall the health team within a YOT format seemed to work and create an environment in which social justice could occur within practice. That these factors were considered as issues and acted upon is positive.

In Stoneycombe there were clear objectives for how mental health provision was to work within the YOT and joint working was encouraged. Additionally the psychologists in the team were able to suggest ideas for and challenge practice and their professional judgement was respected.

> "I think personally that people really recognise Claire [the psychologist] as being a real field of expertise, a real field of knowledge and support and I think that's how they approach and work alongside you." – Rebecca, Stoneycombe

In Edgeham the focus was on building relationships between the two agencies and finding ways of allowing the two different approaches to co-exist. There was a great awareness of the two different approaches by management, which meant it was easier for mental health workers to get support and have problems addressed.

"And having that honesty in the discussions has meant that they've actually grown to understand each other's perspectives better and they've reported themselves to me that the three way supervisions are much more beneficial than individual supervisions." – Luke, Edgeham

This type of provision seemed largely positive and allowed for the needs of young offenders to be considered on a broad scale (e.g.: gender and ethnicity). Both Edgeham and Stoneycombe had good links with CAMHS though, which the mental health workers found useful. If this is not the case, the health team within a YOT model could create risk of role drift, or mental health workers' concerns being overruled by the needs of the YOS.

The managers in these YOTs had a large impact upon the structure of provision and the resolution of issues. It is possible that the positive aspects in these YOTs are due to proactive management rather than the format of provision. That the two teams that had this type of provision also had proactive managers with an awareness of mental health suggests that this type of provision is less likely to occur in a YOT where management is not interested in mental health or social justice. Whilst it has been made clear in the literature that the views of management are important and have a large impact on practice, that their decisions regarding provision could lead to young offenders not receiving an appropriate service or social justice is important.

*Outreach Consultative: Newkirk*

The outreach consultative form of provision is characterised by a team of mental health workers covering a large area. Often in this approach the area is divided between the professionals to ensure access. A key feature of this approach is that mental health professionals skill up youth justice workers to ensure appropriate referrals. A positive of this approach is that services can be tailored to meet the needs of the area. There is also the risk that the mental health workers are lone workers within their particular area and risk isolation. As this form of provision requires active consideration of what is needed in an area it was expected that this type of provision would be able to achieve a level of social justice.

One of the YOTs involved in the research used this approach. Three mental health workers were based within the area specifically for the YOT. They strategically split the area into three territories; north, central, and south, to ensure coverage. There were regular meetings for the three mental health workers which allowed them support. This YOT was not in a rural area as in Khan and Wilson's description, but a large metropolitan city. The decision to split the area was based upon the size of the city, but also due to other services. The police in this area were split into three districts and the YOT had an office in each district (but was a centrally run organisation). The mental health workers also noted differences in the three districts of Newkirk which would affect working.

> "I think they're very different areas, the north, central, and south. The north is, erm, you know whenever you see those things on the news about the most disadvantaged parts of Britain, it's always the north area and there's all sorts. […] Central's very, loads of LAC [local authority care] kids." – Beth, Newkirk

This approach allowed much support for mental health workers, they were based in the YOT full time, but had regular supervision and interaction with CAMHS. Additionally, having colleagues from a similar background that were also seconded into the YOT was a source of support.

> "So it's, we don't work out of the same base and I suppose if I was sat here and B was sat there and we worked out, [Beth: Yeah if we had more] if we talked to each other more, swapping ideas and supporting each other more than we do. And it's just something we've developed around styles and experience I suppose. And we still often meet and share stories." – Annie, Midcaster

As the outreach consultative form of provision applies to large areas, it was noted by the mental health workers that they cannot be a constant presence in the YOT offices. The mental health workers offered training for new YOT staff and gave guidance regarding assessment and referrals. This lessened inappropriate referrals. Additionally, the mental health workers were happy to discuss cases informally with youth justice workers. There was access to psychologists when needed and other services were available. Through having relatively high resource levels and support from both CAMHS and the YOT, the mental health workers were able to maintain

their professional approach and values. This allowed for a socially just approach to mental health work, which the staff were happy with.

> Researcher: "Do you feel you get to maintain that [CAMHS] approach and ethos?" Beth: "Yeah." Annie: "Yeah." Mick: "As you said before, it's the person centred approach, for me anyway."

This format suited the mental health workers in Newkirk and they felt able to meet the basic needs of young offenders. There were some gaps in provision, specifically around learning difficulties and speech and language development that required further provision, but the resources were lacking.

> "And actually there's a massive unmet need, we have mild to moderate learning difficulties and actually you can't access a clinical psychologist quickly here to be able to get a kind of analysis or assessment […] speech and language again, it's massive. Some YOTs have got a speech and language therapy, at the moment our waiting list in the locality I work in it is over six months now." – Annie, Newkirk

All three mental health workers in Newkirk YOT were previously full time, but recently financial cuts have made it necessary for them to each work one day a week in local schools, providing mental health care. It was felt that this was not appropriate for their skills and that their time could be better used.

> "Yeah, it has been a cut. They had a full time schools worker, the post was withdrawn and we were made to give a day. So it's increased our workload with no extra time and it's reduced our capacity here." – Beth, Newkirk

The outreach consultative form of provision gives mental health professionals a high level of agency and the flexibility to use their professional judgement. It was the mental health workers decision on how to split Newkirk into manageable territories, and their approach to their work is often unquestioned by those within the YOT, showing that the culture in Newkirk YOT is accepting of a variety of approaches. All of the mental health workers in Newkirk YOT were

strongly social justice oriented in their approach, actively seeking to separate their work from youth justice.

> "Mick: We're a bit different in terms of other agencies that come into YOS and do standout as we don't do duty and most of the others do and things like that." "Beth: and I think it's always been pretty much like that." – Mick and Beth, Newkirk

That the outreach consultative form of provision allows for this is positive, and it seems that it means mental health needs are met within this model and that socially just practice can occur.

*Virtual Locality: Woodshire*

The virtual locality form of provision is similar to the foot-in-foot-out approach in that mental health staff are seconded from CAMHS and spend half of their time in the YOT. The virtual locality format has a higher level of resources though with a small team of mental health workers, usually 3 or 4. Khan and Wilson were positive about this approach as it created a shared responsibility for cases, had good accessibility to services and mental health workers were supported. The provision in Woodshire most closely fitted this format; this did not mirror Khan and Wilson's (2010) description as closely other teams had with other types of provision.

Khan and Wilson's (2010) version of the virtual locality form of provision states that there are two "virtual teams" which was not found in Woodshire, but the provision fitted all other descriptive aspects of this form. There were three highly qualified mental health workers who were all part time within the YOT and had other roles elsewhere. William is a psychotherapist who also has a private practice, Emma, a counsellor who also works in CAMHS, and Phil, a mental health nurse who is also a member of CAMHS. William also managed mental health within the team, delivering supervision and solving disputes. Each of these persons also had specialist training and interests which had been worked into the provision. This allowed for a diverse level of specialty, and for both mental health workers to feel 'shared ownership' of cases when working with other agencies.

"actually there isn't a health intervention that isn't collaborative or co-constructed, so they take ownership of the intervention, as much as they want to and can." – William, Woodshire

Woodshire had previously had problems with their mental health provision and the YOT decided to restructure their service and try to improve the situation. This led to the current mental health provision within the Woodshire YOT. William, the psychotherapist and manager for mental health within the YOT had been asked to help create the mental health provision to ensure it met the needs of both CAMHS and the YOS. This resulted in a contract being drawn up between the two agencies, discussing what was expected of the mental health workers and creating boundaries for their role. This was highly successful, and not only had this improved mental health provision; the approach was being used with other inter-agency relationships and William was meeting with other YOTs to discuss the approach with them.

"I know. [AREA NAME] team and their manager's coming over this afternoon and they've got the same, they have a very different ethos, but they realise they need to change." – William, Woodshire

A key aspect of Woodshire YOTs provision was that there were high levels of acceptance of the need for mental health provision and the need for YOT practice to accommodate social justice based approaches. This was largely due to the management within the YOT and the Head of Service's approach.

"The organisation was run, was being run, by some very experienced social workers, they've been around for a very long time. But at some level got slightly disillusioned with child protection processes and wanted to get back more into, different kinds of social work, didn't fit with that. So the ethos really built in from the top actually. And it's been around for a long time here." – William, Woodshire

The result of this is that Woodshire YOT had good levels of access to mental health services for young people, a variety of specialisms and good relationships with outside services, the mental health workers were supported and to a large extent the needs of young offenders were being met. This was one of the few YOTs that had a strong focus on preventative work. It was the only YOT in the research that had an explicit awareness of social justice, which may be due to

the Head of Service and YOT management having previously worked as social workers. This was a positive and created a culture within the team that removed many issues from practice, such as hostility or problems with working relationships. Not having these issues allowed members of staff in Woodshire not only to focus on preventative work, but also to consider more abstract features of their work and the approach they take.

"I mentioned before that I would find it very difficult to work in an environment that didn't have that. So I kind of, it just kind of fits and, and maybe in a way I need to think about that a little bit more, because just fitting in within, with one's own value and belief system can make you not very reflective about other positions." – William, Woodshire

The virtual locality provision had allowed mental health workers to meet the basic needs of young offenders, and Woodshire YOT was working towards implementing preventative measures. This is positive, and shows that the aims of the YOT are being met in this area. Having three mental health workers on a part-time basis means that there is a constant presence in the YOT, making services accessible. It also means that informal discussion of cases can occur, which is positive. The relationship between the YOT and CAMHS was explicitly considered in Woodshire, which meant that many of the tensions between the two agencies had been addressed. That management in Woodshire had a social work background meant that there was a clear acceptance of approaches other than criminal justice and this seemed to be beneficial in practice.

"Definitely, because most of the senior criminal justice people here are very focused on social justice. They're much more socially focused than they are criminally focused, much more. A lot of them are social workers, so, no, no, they're very focused on alternatives to custody and interventions afterwards. Very focused on it. Which is why I like working here" – William, Woodshire

*External-One-Stop-Health-Shop: Midcaster*

There is one YOT in England that currently uses this type of provision (Khan and Wilson, 2010). Since 2010, when Khan and Wilson's study was conducted, this has continued to be the

case. This YOT still works with an external service that was set-up specifically to address the mental health of young offenders. The team is comprised of thirteen mental health workers who work with both the local city and county YOTs. This approach was created by the manager within the external service based upon their experiences of working in a YOT in a seconded position. They disliked this approach and wanted to create provision that overcame the issues that occur within mental health work in a YOT.

> "So that's where it all started really and what my aim was at that point was to ensure that children and young people who offend had access to a CAMHS service, that was highly specialist, that was effective and was able to deliver a CAMHS service alongside everything else, but not a seconded model. So we set up a team that was very much just for YOT referrals. We've grown since then so it does young people who offend, young people who've got a dual diagnosis issues, young people who sexually harm, and now young people who present with early intervention and psychosis symptoms. Very much come all from the population." – Naomi, Midcaster

Midcaster had the highest levels of mental health resources of any of the YOTs involved, the external service had thirteen mental health workers. Being a separate service to the YOT emphasized the voluntary nature of mental health intervention, which is beneficial for the young people. There was also fewer problems regarding referrals, as the external service could deliver assessment and intervention in-house. There was some consideration of constructed factors such as race, but this was not a main concern for the mental health workers. Midcaster is a largely rural county comprised of small towns and one large, urban city. The differences in the two areas effect the way in which the two YOTs work, and so the mental health service needs to be flexible to meet the needs of both YOTs.

> "The city's very different. It's been hard to tackle the city and we do see a lot of resistance in the city. I think that's a lot about, personally, the city YOT want the mental health worker sat there, and for them to be in control and in charge of the CAMHS worker. That's what they want. The county are more realistic and are more able to see that actually the model of service delivery that we've got means fair access for all, whereas the city don't." – Naomi, Midcaster

This approach allowed the mental health workers to retain their identity and eliminated 'drifting roles'. This was expected to be the most able format to foster social justice in practice. The workers had high levels of autonomy and the high resource levels reduced concerns of burnout or lack of support. There were still issues with this approach though, including relationships with the YOT, understanding, and referrals.

> "Yes. Because we often get referrals from YOT workers, "ooh, they're angry, they need to talk about it". And you'll go and see a kid, yeah, they are angry, they've got lots of reasons to be angry. Do they want to talk about it? No." – Naomi, Midcaster

Whilst this model has high resource levels and removes many of the issues of seconded models by being external to the YOT, there was less understanding of the needs of the YOT by mental health workers in the external service. There were few opportunities for informal discussion and there was little opportunity for the YOT to negotiate the relationship between them and the external service. This is not a useful in terms of multi-agency working. For this model to be successful there should be better links between the mental health service and the YOT.

It was unclear if this form of provision promotes social justice, as Naomi withdrew from the research after one interviews, meaning that further discussion on these topics could not occur.

**Impact of Provision of Social Justice**

Having established that the forms of provision identified by Khan and Wilson (2010) still existed within practice, to satisfy the research question it must be considered what the relationship is between each type of provision and social justice. Within this work social justice in practice is identified based upon the satisfaction of the Equality and Need principles, and the ability to recognise and overcome or address issues that impact these two principles. However, satisfying these two principles only shows that social justice is being achieved. As the YOS is a criminal justice organisation, it is necessary that the two approaches must be balanced, and able to occur to an extent that satisfies the aims of the system overall. Diagram 4.1 shows the extent to which each of the YOTs participating in the case study satisfy the needs of social and

criminal justice. From this, conclusions can be drawn regarding the relationship between the forms of provision and social and criminal justice also. Each form of provision is considered individually below.
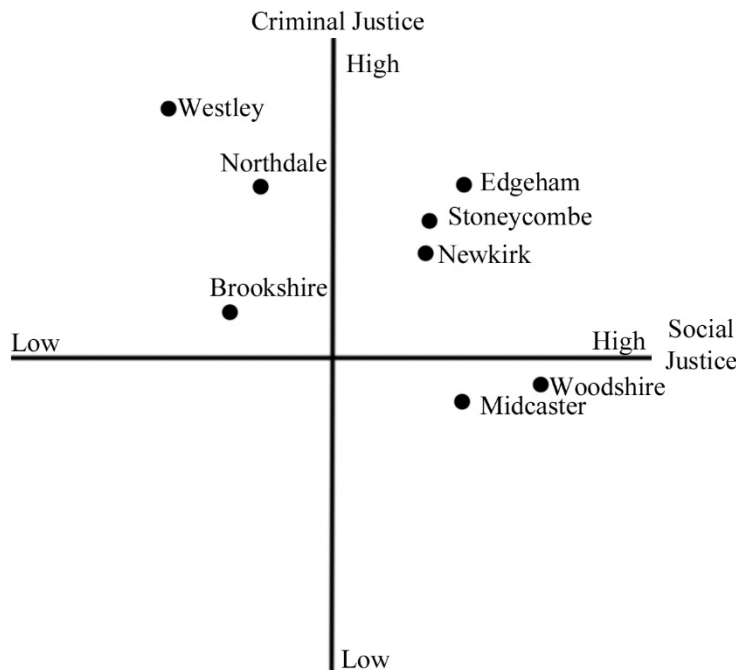


Diagram 4.1: Matrix of provision, social and criminal justice

*Lone Worker*

This model was unable able to satisfy the Equity and Need principles and overcome issues within practice. The examples of this provision in Northdale and Brookshire met basic requirements of practice, such as meeting targets for timescales for assessments to be carried out, however, social justice was not achieved beyond this minimum standard. Mental health workers in Northdale and Brookshire only assessed young people if a need was identified by youth justice workers. This is not necessarily a problem, however both Sarah and Liz said that receiving appropriate referrals had been a problem for them. This means that young people were reliant on youth justice workers in these YOTs having the depth of knowledge to recognise mental health issues and make appropriate referrals. There was not an option of self-referral for young people in Northdale and Brookshire. Young people in the teams that had a lone mental health worker did not have equal access to mental health services. Youth justice workers acted as gatekeepers to services in these YOTs, which removes young people's agency from their

participation in mental health services. This removal of agency and the lack of ability to self-refer or request mental health services implies that the voluntary nature of mental health work is not being promoted in these YOTs. This does not mean that young people in are coerced or forced to participate in mental health work, however, it does call into question if this form of provision can satisfy the Equality principle. The only reason for negating equality, as stated in the Need principle, is if there is increased need. The mental health workers in Northdale and Brookshire took different approaches to this issue, neither of which seemed to be equivalent with the Need principle, and thus were not valid reasons for the lack of equality of access. In Northdale, Liz recognised that she alone could not assess and deliver interventions for all the young people displaying mental health needs in the YOT. In response to this, Liz set relatively high thresholds for what was considered to be a need requiring a response. Whilst this may seem to satisfy the Need principle on a superficial level, it does not. Liz prioritises cases based on greater levels of need, which is consistent with social justice. However, the reasoning behind this is due to a lack of resources and time, rather than relating specifically to the needs of young people. If there were greater levels of resources in Northdale, these thresholds would likely be lowered. Sarah also did not treat all young people equally regarding access to services. Some young people were kept on beyond the length of their YOT order to allow Sarah to continue with mental health interventions. Again, this could be perceived as greater need being given greater levels of help, however, it puts both young people and Sarah at risk. The potential for harm in this situation means that in attempting to meet the mental health needs of these young people, Sarah is overlooking their right to safety, which is not compatible with social justice in a broader sense.

*Foot-in-Foot-out*

The example of practice in Westley was the least socially just of all the YOTs in the case study, and displayed the highest levels of criminal justice. This was largely due to Dan carrying a YOT caseload, and the impact this had upon his role as a mental health worker. Whilst Dan justified this practice as allowing young people with the most concerning mental health needs to have a mental health specialist involved in all aspects of their case, the way this had impacted his views of mental health and criminal justice was a cause of concern. Dan had comparatively high thresholds for mental health problems, and differentiated between a disorder and what he considered to be a difficulty. This largely followed a highly medical perspective, and meant that Dan only delivered interventions to young people with diagnosable disorders. As a consequence, the majority of his work revolved around autism spectrum disorders. There were

also certain diagnosable conditions that Dan considered should be addressed by youth justice workers rather than mental health workers, such as conduct disorder. This meant that a large number of young people with mental health issues, and particularly those with internalising or affective disorders such as depression would not be able to access mental health services through Westley YOT. There were also ethical concerns surrounding Dan's role, as it was unclear if the young people whom Dan acted as caseworker for could refuse mental health services. There were also ethical issues surrounding the appropriateness of Dan having to breach young people for not meeting the requirements of the criminal justice system, whilst also delivering mental health services. Whilst social and criminal justice are interlinked, and require balance, in practice a clear delineation is needed between who is delivering which service, simply because of the voluntary nature of mental health work. The mental health services available through Westley YOT did not have an equal level of access for all young people. This inequality was not founded on greater needs, but a highly restrictive definition of 'need' which was more aligned to the aims of criminal justice alone, rather than social justice or any form of balance between the two.

However, the example of foot-in-foot-out provision in Westley is not the only way in which this provision can occur. If Dan had not been required to hold a YOT caseload in addition to mental health work, the situation may not have been the same. Additionally, it is possible for the foot-in-foot-out approach to occur with two mental health workers. This again may have a different impact on the ability to meet the Need and Equality principles in practice.

*Outreach Consultative*

Newkirk was the example of outreach consultative provision found in practice, and it displayed a balance between social and criminal justice. By having three mental health workers supporting each other, and a specific strategy to address mental health need within the area, a large number of the problems that may have occurred in practice, or had occurred in other areas, were overcome. Whilst the mental health workers in Newkirk were still reliant on youth justice workers for referrals, they had been given training on mental health issues by the mental health

workers, meaning that more appropriate referrals were being made. Additionally, there was a high level of informal discussion in Newkirk YOT, allowing concerns to be raised and discussed prior to a referral being made. This means that the access to mental health services in Newkirk YOT is much more equal, and young people are more likely to receive support if they desire it. Where there were greater needs, or young people requiring specific types of help such as learning disorders, there were problems accessing specialist services, which was counter to the Need principle. This problem was due to a lack of resources though, rather than an issue in the structure of provision or philosophical approach in Newkirk. The mental health workers in Newkirk were not asked to consider criminal justice concerns, to the point where they often did not know what offence a young person had committed unless it was directly related to their mental health needs. This helped to create a balance between social and criminal justice within the YOT, however, it does need to be ensured that the two are not working entirely independently within the same organisation. In Newkirk there were regular meetings between mental health workers and youth justice workers, which helped to connect the two aspects, ensuring that their concerns were still aligned, and that the practice of all those involved with a young person reflected this.

*External One-Stop-Health-Shop*

Midcaster is currently the only area that has a specific organisation for the mental health of young offenders that is separate from, but linked to, both the YOT and CAMHS. As the representative of the mental health provision in Midcaster withdrew from the research, only limited conclusions can be made about this form of provision and social justice. In regards to meeting the Need and Equality principles, the team in Midcaster should be well placed to do so, as there is a high level of resources, and being independent from the YOT means that definitions of need would not be contested, or mental health workers could not be asked to consider the needs of criminal justice above those of social justice. However, as the mental health team is external, and did not assess all young people in the YOT for mental health needs, there was a reliance upon the referrals from youth justice workers. The mental health team in Midcaster worked with the YOTs in Midcaster City, and Midcaster County, and the two YOTs had different approaches to mental health referrals. This meant that there was good accessibility for young people in Midcaster County, but not so for those in Midcaster City. Managers in the City YOT had expressed a preference for a mental health worker to be present in the YOT, to facilitate discussions with youth justice workers and help identify mental health needs. However, the manager of the health team did not agree with this, and so young people in

Midcaster City were less able to access mental health services. This form of provision could be highly positive in delivering a balance between social and criminal justice, however, there needs to be a good relationship between the mental health team and the YOT, with an agreement regarding how access to services is to occur.

*Health Team within a YOT*

This form of provision exemplified a strong balance between social and criminal justice in practice. The YOTs in Edgeham and Stoneycombe utilised this form of provision, based upon issues that had occurred previously regarding mental health practice in the YOT. In both instances of this type of provision managers in the YOTs had a large role in deciding upon the provision, and a specific interest in how mental health can be used to meet the aims of the YOS. In Stoneycombe, these factors had led to the decision to hire a qualified psychologist, to address specific, high level needs in the area. In Edgeham, there wasn't a specific group with high level needs, but an issue in creating a positive relationship between CAMHS and the YOT. These specific issues impacted upon how the provision was considered and decided upon. In Stoneycombe, the needs of young people specifically in that area dictated large aspects of the way in which provision was organised. All young people entering the YOT were given a general mental health assessment, satisfying the Equality principle. Young people with lower level needs were referred to the local CAMHS where possible, allowing the psychologist to work with young people with higher levels of need, or who might be better supported by having the consistency of receiving provision within the YOT rather than being referred to CAMHS.

In Edgeham, the health team approach allowed relationships to form between youth justice workers and mental health workers to overcome differences in practice which had previously been an issue. Through using the strategy of joint supervisions also, youth justice workers and mental health workers in Edgeham gained a greater understanding of each other's role, and how they are working towards the same aim. By improving these relationships, the focus of work could return to young people. Not all young people in Edgeham received a mental health assessment, however, there were specific ways through which concerns could be raised by youth justice workers, allowing young people access to services. Interestingly, Edgeham was the only YOT in the case study that displayed differing approaches to mental health work within the same team. That this was accepted within the YOT is indicative of social justice as mental

health workers are given the freedom to choose their approach to practice based upon their professional judgement..

*Virtual Locality*

Of all the forms of provision this was the most socially just. However, this had come at the expense of criminal justice. So whilst young people had equal access to services, and any inequalities were based upon greater need, the needs of the criminal justice system were not being met. This means that the virtual locality approach may not be the most effective provision within the YOS. The example of provision in Woodshire was highly socially just, however if the criminogenic needs of young people are being overlooked, the YOT as a whole will potentially not be as able to meet its aims as it could be. Woodshire YOT had a good level of resources, with three part time mental health workers, one of whom was highly qualified. Managers in Woodshire had a profound impact upon the structure of provision, and also the working culture within the YOT. There was a strong concern for the welfare needs of young offenders, and that they were being treated in a socially just manner. William, manager in the Woodshire YOT, was the only interviewee to explicitly discuss the importance of social justice in practice. However, this concern for social justice took precedence over criminal justice in Woodshire. This may not have been a consistent issue, but it had caused problems when working with young people who had committed violent or sexual offences.

**Summary of Forms of Provision**

Based upon the YOTs involved in the research there does appear to be support for Khan and Wilson's forms of provision (2010). Whilst there are some differences between the given forms and the YOTs in the research, this is not to the extent that Khan and Wilson's theory is invalidated.  It must be remembered when using these forms of provision that they are ideal types, as the YOT changes regularly and so they may not mirror provision exactly but can act as a guide. Indeed, they are useful for understanding the level of mental health provision within a YOT and how it compares to others.

Of the six forms of provision introduced by Khan and Wilson, all six were found being applied in practice. The lone worker, foot-in-foot-out, health team within a YOT, and external one-stop-health-shop approaches were most closely mirrored by practice, with YOTs using provision that was very similar to that described by Khan and Wilson. The virtual locality and outreach consultative approaches were also found in practice, but these differed from the descriptions somewhat. The use of the outreach consultative format in an urban rather than rural area shows that it is applicable in locations where logistics impacts upon provision, and that it is a flexible format for provision. The virtual locality form of provision was not found in a way that directly mirrored the description by Khan and Wilson, lacking the 'virtual teams'. The provision in Woodshire matched the description in all other aspects though and fitted this format more closely than any others.

There were certain aspects that occurred across all the types of provision, in some cases these developed into themes in further analysis. It appears that mental health workers all face similar issues when working in/with the YOS, but the extent of these issues varies across the differing forms of provision. The forms with lower levels of resources (lone worker, foot-in-foot-out) have more problems with meeting need than others. This is to be expected though due to the level of resources. It is interesting that theses YOTs also seemed to have cultures that did not promote social justice and mental health approaches, and management was less supportive of mental health workers in these YOTs than those with higher resource levels. It is unclear if having more mental health resources allows mental health workers to be active and vocal about their professional needs and thus gain better structures and support for their work, or if managers and commissioners created provision that better supports mental health workers. The implication of this is that YOTs with high levels of mental health resources are better able to not only work in a socially just manner, but also to meet the needs of young people than YOTs with lower levels of resources.

From viewing the various forms of provision in practice, it is clear that the types with greater numbers of mental health workers are more effective than those with a single mental health worker. The 'lone worker' and 'foot-in-foot-out' provisions create issues of accessibility. There is also additional risk of mental health workers having the boundaries of their role compromised, as was the case in Westley, where Dan had been asked to act as a youth justice worker, managing the cases of a number of young people. Foot-in-foot-out provision may work

more successfully with two members of staff operation in a job share context. However, none of the participating YOTs could provide evidence of this, so the practicalities of this approach and the impact on social justice remains unclear.

Other forms of provision were better able to meet the needs of young people. Whilst all the YOTs participating faced similar issues, this disparity is likely to have arisen from the core structure of the YOS and then exacerbated and/or mitigated by the level and form of mental health provision. One of the aims of this work is to suggest a baseline level of mental health provision for the YOS. This baseline must be considerate of two factors, one being the ability to balance criminal and social justice within practice in a way that allows young offenders access to services, and secondly, that the baseline is practically achievable given the structures of YOTs and CAMHS. Whilst ideally a 'health team within a YOT' or 'virtual locality' form of provision would be a minimum, this is not practically achievable within many localities. Funding has consistently been an issue within the YOS (Smyth, 2010), and recently CAMHS has been subject to large cuts (Young Minds, 2014). Allocating three full time staff to the YOS will not be possible in many areas. Allowing for concerns of practicality, it is suggested that a 'foot-in-foot-out' provision with two mental health workers could be an appropriate baseline, with the proviso that better resourced provision is a long-term goal.

Whilst none of the forms of provision are inherently wrong or inappropriate, it seems that some are more adept at catering to the needs of young people than others. For example, the lone worker and foot-in-foot-out types generally utilise one mental health worker, which creates problems of accessibility if they are ill or away for any reason, or even if they are busy working with a young person. It seems that these forms of provision are not actively chosen by YOTs, but occur due to a lack of resources. So whilst it is suggested that mental health provision within the YOS has a minimum standard of a foot-in-foot-out format with two workers, this may not always be possible.

This part of the analysis gave some insight into the ways in which social justice is impacted by provision. Through identifying the different forms of provision, how each relates to social justice in practice could be seen on a superficial level. Factors such as resource levels and

working cultures play a role in the promotion of social justice within YOTs, but it is not clear how these factors are related. From this preliminary analysis further questions can be asked of the data relating to social justice and how this is linked to aspects of practice.

A variety of factors affect mental health practice and provision which were explored in detail in the thematic analysis. The main points to take from this initial discussion of the data is that there is support for Khan and Wilson's (2010) forms of provision, and that there are differences between the forms that affect levels of social justice in the YOS.

## Real World Model of YOS

Upon finding support for Khan and Wilson's (2010) work the construction of the case study could continue based upon the framework of different forms of provision. To aid stage five of the SST process, where the real world is compared to a conceptual model, the interviews were thematically analysed to create a theory that represents the reality of mental health provision in the YOS. Through the thematic analysis of the interviews, five themes emerged from the data;

- Mental health worker's approach to practice.

- Identity of mental health workers

- Factors that affect practice

- Differences in practice and best practice

- Provision of mental health services within the YOS

The way in which these themes relate and affect each other created a theory of how mental health provision occurs within the YOS and how this impacts upon social justice within youth justice as a whole. Each theme is considered here individually, and it is then discussed how they add to a theory of mental health provision. The creation of the theory allows the information found in the case study to be integrated, so that the context of mental health provision in the YOS can be understood and the information can contribute to a wider discussion about youth justice.

*Mental Health Worker's Approach to Practice*

The approach taken by mental health workers and youth justice workers is of great importance. It directly impacts upon the service young people receive. Approaches are based upon an individual's background, training, views, experiences and position. Approaches can also vary or change over time and situation. There are differences between the approaches of mental health workers and youth justice workers, which can largely be characterised in terms of the perspectives taken on social and criminal justice. Although such characterisations are not all encompassing, and over-generalise in some circumstances, they can be useful for the purpose of discussion. The differences in approach are linked to different styles of working, views of young people, views of mental health and views of justice. Of the mental health workers interviewed, there were two distinct attitudes that affected the approach to working within the YOS. The first of these was a distinctly social justice oriented approach. The main concern for these individuals was ensuring that young people's needs were met and that CAMHS procedures and standards were maintained. Ensuring need is met is in line with the principles of social justice set out by John Rawls (1971), and the adapted versions that are being utilised in this work to identify socially just mental health provision. That this approach can be closely linked to these principles is indicative of social justice being a priority within this approach. The second approach observed amongst mental health workers in the interviews was more aligned with the attitudes of the YOT and criminal justice approaches. There was still a concern to meet the needs of young people, but this was done in a manner that was more in line with existing YOS procedures and standards opposed to the standards of CAMHS. An example of this is the approach to recording and sharing information. Those who held a social justice approach were uncomfortable with sharing detailed information about mental health interventions and specific details about young people's mental health needs unless it was necessary in terms of safeguarding. There were concerns about confidentiality and that the information entering a criminal context would lessen the voluntary nature of mental health work. Those who took a criminal justice approach did not share these concerns and were comfortable sharing information even if this did not conform to CAMHS guidelines. They considered that if the information would help youth justice workers when working with young

people, or it could be used as a mitigating factor in deciding a sentence, this justified the breach of confidentiality.

> "But you know, [pause]  I think if you're putting down quite delicate information and the whole of the youth offending service can see it, to me, if I was that young person I would be very unhappy about that." – Sarah, Brookshire

> "But I find that when young people are talking about emotional, mental health difficulties, and they're here in the YOT for offending, it's nonsensical to not to share that." – Liz, Northdale

Both of these positions are valid an justifiable in terms of practice, but it is necessary to have consistency within the service regarding how information is shared. Not only does consistency give those working within the YOS clearer expectations and facilitates working, it is also necessary so that young people understand how their information is being used. As mental health treatment is voluntary, and in many situations is confidential, having information shared may impact upon an individual's decision to participate. The differences in approach and the impact this could have were not made clear to young people, and so confidentiality may not have been presented to them as an option, even if it was available. This overrides the rights of young people within the YOS, regardless of the approach of mental health workers. Data protection and sharing procedures should be made clear to young people to allow them to make an informed decision regarding treatment for their mental health. Rawls stressed the need for transparency in organisational procedures, and how this is linked to social justice (Rawls and Ward, 1985; Rawls, 1971), the inconsistency in youth justice practice caused by the differing approaches of mental health workers lessens this transparency, and thus social justice within the YOS.

There were a number of factors that affected the approach of mental health workers in the YOS. Support seemed to have a large impact upon approaches; those with higher levels of support within the YOS were better able to choose their approach freely, and were more likely to have a social justice oriented approach.  However it is not just the level of support that has an impact. Where support comes from also affects the approach of mental health workers. Of the two lone

workers, Liz received more support from within the YOT, whilst Sarah was more supported by CAMHS. Possibly due to this Liz had a more criminal justice oriented approach. She identified as a YOT worker and did not consider herself a member of CAMHS. This is in contrast to Sarah, who received very little support (and sometimes opposition) from the YOT but had colleagues in CAMHS who she remained in contact with for support and supervision. She held a social justice approach and actively tried to avoid mental health work being associated with criminal justice views.

> "Because I see myself as part of the YOT. Christmas dos, I go with the YOT not with CAMHS [laughter]." – Liz, Northdale

> "the ISS workers like my appointments to go on their timetable and then, to that young person I'm seen as part of their ISS program and not, not something that's therapeutic for them, that's separate to that, it's in part of the offence focused stuff, which I'm not very happy about, so I've sort of kept away from that." – Sarah, Brookshire

The level of support given to mental health workers not only affected their approach. It also impacts relationships between members of the YOS, and indirectly affects the service and support that young people receive. Sarah received little support within the YOT and there were tensions between herself and her colleagues. It cannot be said if the tension contributed to the lack of support or vice versa, but it was clear that Sarah felt it negatively impacted her ability to meet young people's needs.

> "A few different things really. Sort of erm, conflicting things, [pause] I've found here, probably two or three members of staff have very negative views of CAMHS, so they erm, have been very derogatory and I've heard, they've been overheard saying very negative things about CAMHS. Which I take quite personally really" – Sarah, Brookshire

In other YOTs the level of support for mental health workers was very high, allowing them to choose their approach more freely, and creating opportunities for discussion of problems. In Newkirk the three mental health workers were fully supported by managers, and could choose how this support was given to them.

"just based on my capacity, you know, if I took up all the supervision that was offered I'd always be in supervision. Also, erm, I guess that I felt it's not needed at the moment, and I can approach on a case by case, if I need to discuss something, the office doors open, so I can just go in. Rather than booking an hour slot every month." – Beth, Newkirk

The support and freedom to choose an approach to working is consistent with socially just structures, as staff have opportunity within the YOS, and can decide how they wish to act within that opportunity. This tended to coincide with a socially just approach to practice also. Sarah maintained a social justice approach, but found this difficult and faced pressure to change her views to be more consistent with the other staff in Brookshire.

"And that's just the way it is, and they, they just have a set way of working they don't want to alter the way they work so they won't work round you and, I think up to now it's been very hard to change." – Sarah, Brookshire

Edgeham YOT also displayed the differing approaches between CAMHS and the YOT. The two mental health workers (Jane and David) seconded to the Edgeham YOT took differing approaches. Whilst their views of mental health were similar and they both shared a view of the importance of meeting the needs of young offenders, their views of how this should be achieved through practice differed greatly. Jane was reticent to deviate from the CAMHS way of working, and so was highly concerned with confidentiality and the ethics of her practice. David was more concerned with making services accessible through the YOT and so was happier to share information with YOT staff and alter his practice to meet the needs of the YOT. This caused problems for Luke, their manager, as there was inconsistency in mental health practice within the team which was confusing for youth justice workers and placed a strain on relationships between staff. Jane was perceived by others as difficult, as her approach limited access to information and required referrals to be made formally. David was perceived as being flexible and helpful by YOT staff, but his work had reduced accountability and ran the risk of breaching young people's confidentiality.

"whatever approach we're taking, it's got to be consistent. Because otherwise it's divisive. Erm, erm, and, yeah, those sort of issues have been problematic, and the

person who's process driven, erm, has followed what they've been told to do, and has been seen to be awkward. They're not at all, that's how they've been seen. The other person's been seen as flexible and really helpful, when actually what he's doing is not sticking to the guidance he's been given from CAMHS." – Luke, Edgeham

Luke had found some ways of resolving these issues and commented that it had made him more aware of the differences in the two approaches, and the role of management in ensuring good relationships between the two agencies. That the issue of differing approaches could be overcome in Edgeham shows that support from within the YOT and an understanding of mental health practice are conducive to social justice for mental health workers.

Workplace culture also impacted the approach of mental health workers within the YOT. Where managers and commissioners had a concern for social justice, or issues relating to social justice, even if they did not phrase it in these terms, the culture of those YOTs were more accommodating of mental health approaches. In these teams there were fewer instances of mental health workers being asked to take on youth justice work and mental health workers felt better supported and more able to challenge practice where necessary. These YOTs also had more comprehensive provision. Where there were lower levels of provision, mental health workers had less support and the overall culture within these YOTs was less open to mental health in general, which created difficulties for mental health workers.

Workplace culture can be difficult to identify in general, but as this work was looking specifically at mental health, culture can be identified and discussed more readily as it is in relation to a specific factor rather than as a whole. The YOTs in the case study tended to have one of two types of workplace culture. Some of the YOTs were heavily criminal justice oriented and the workplace culture involved elements of this, such as objectivity and certainty. Other YOTs had a culture which valued fairness more highly, and were more accommodating of subjectivity. Both cultures had elements of the other, but to different extents. Mental health workers in criminal justice focused cultures found that they faced increased pressure to give definitive information, and quickly, when, in mental health work, this is not always possible.

"But she was like, "blood test for it". There's no blood test for it! You can't, and she was like "that's what frustrates me about mental health" and I said that's what it is, it's a cluster of symptoms […] but I think they struggle sometimes, some people struggle with that." – Annie, Newkirk

Workplace culture may directly impact the approach of mental health workers. Dan and Liz both held criminal justice approaches and worked in YOTs that generally had cultures that promoted criminal justice (Westley and Northdale). There were differences between the two though, Liz seemed comfortable with her chosen approach and discussed it freely. Dan was the only interviewee to hold a YOT caseload in addition to mental health work, and didn't receive appropriate support from managers in Westley. Westley used a single mental health worker, and this isolation or lack of support may have contributed to Dan's approach.

Some mental health workers found their approach was challenged by the YOT, or that the workplace culture did not accommodate their approach. This led to tensions between mental health workers and YOT workers, and impacted directly upon the young people who interacted with the YOT. In Midcaster, these tensions were present and meant that mental health workers had to draw boundaries around their practice, to the extent that a differing form of provision, the External One-Stop-Health-Shop was created.

"I think [pause], I think it's very much cultural and very much attitudinal so for instance in the city it is shifting very slightly, they will, if kids do something bad, they'll say "well they're ill". Ok. "they're ill" and actually we'll say, no they're not." – Naomi, Midcaster

The approach of mental health workers is vital to their practice and goes beyond their preferred method of treatment for mental health intervention. It impacts how they view their work and relate to the YOT. It also directly impacts the service young people receive. YOTs should not be prescriptive about the approaches mental health workers take or create a culture that promotes certain approaches over others. This defeats the object of multi-agency working and is unjust to mental health workers within the YOS as their opportunities are limited. YOTs should create an

environment in which a variety of approaches could be adopted by staff, through giving support and encouraging understanding and discussion between professionals.

*Identity of Mental Health Workers*

Identity is highly important in social professions. How an individual perceives themselves impacts what roles they think they should fulfil, what the limits or boundaries of their profession are, and is strongly linked to the ethical choices professionals make. Identity is of particular interest in this work as within the YOS mental health workers are a minority in terms of their profession. How their identities are affected by or maintained within this situation is currently unclear. Additionally identity may affect which mental health workers choose to work within the YOS opposed to remaining within CAMHS.

The identity of the mental health workers interviewed was strongly linked to the approach they adopted. Identity is important as how mental health workers perceive themselves impacts upon the relationships they make within the YOT, how they approach their work and how they perceive and address young people's needs. Identity impacts upon the approach of mental health workers and vice versa but the two were large enough and occurred frequently so as to be considered as separate themes. How a person creates their identity is highly complex and so is not covered in its entirety here. The way which identity is expressed and how this impacts upon working within the YOS is the concern of this research.

One of the ways in which identity was discussed in the interviews was by asking interviewees how they introduced themselves to young people in the course of their work. The variety of the answers was telling, as this highlighted the differing identities amongst mental health workers in the case study and in some cases how mental health is perceived.

> "What happens is that I, as I said I identify myself completely with the YOT and that's how I present myself to the young person." – Liz, Northdale

Whilst the way in which mental health workers introduce themselves is presenting information for a specific purpose, it can still be indicative of their identity. Liz, who took a YOT approach, also identified herself as a YOT worker. In discussing practice Liz also displayed signs that she identified as a YOT worker, by being very accepting of YOT practices and somewhat dismissive of CAMHS. This is in contrast to all the other mental health workers interviewed who specifically mentioned mental health, their position or relation to CAMHS or their qualifications.

> "I say, 'I'm Sarah, I'm a CAMHS nurse', then I try to explain to them what CAMHS is [laughs]" –Sarah, Brookshire

> "I'm a registered mental health nurse" – Dan, Westley

Some of the mental health workers recognised the problems that can occur when presenting a mental health identity. There is a high level of misunderstanding about mental health within society and stigma is still prevalent. Amongst the interviewees who identified as mental health workers there was an implication that their position or presence within the YOT required an explanation or justification that emphasized their role as helpful, in a way that youth justice workers were perceived by young people to be helpful.

> "when I get involved or introduce myself as a psychologist I get quite an extreme reaction to that which I then have to deal with. So I want to be able to include all that so the YOS officers have a way of describing it to a young person in a way they know is going to be helpful to them." – Claire, Stoneycombe

> "what's the difference between me rocking up and a YOT worker rocking up? I ain't got a white coat or nothing, do you know what I mean?" – Naomi, Midcaster

The case study included both mental health workers and YOT managers. Identity was not a considerable concern for managers and was much more strongly linked to the mental health workers. As mental health workers within the YOS are generally seconded from CAMHS, there is some conflict about which organisation they belong in. This does not include the external-one-stop-health-shop form of provision as mental health workers are not seconded and work

separately to the YOT. Belonging was a large aspect of the mental health workers identities, support and positive relationships helped to create a sense of belonging. The majority of the mental health workers interviewed identified strongly as CAMHS staff or mental health professionals. This was evident in how they would address themselves to young people and whether they aligned themselves with YOT or CAMHS approaches. There were exceptions to this and two interviewees; Dan and Liz, identified with the YOT. They considered themselves to be YOT staff and Dan had taken on a YOT caseload. These two workers also utilised a YOT approach.

> "But I identify myself as being a part of the youth offending team, so I guess that's [pause] where I get away from that single lone worker, kind of very difficult, identity. Because I see myself as part of the YOT. Christmas dos, I go with the YOT not with CAMHS [laughter]." – Liz, Northdale

The identity of mental health workers also impacted upon what was considered as an issue within practice and what was considered as a mental health problem. This is problematic as there must be some standardisation regarding what the YOS utilises mental health specialists for. In some areas conduct disorder and anger issues were addressed by mental health workers as they are indicative of underlying mental health issues. In other YOTs these issues are considered as within the remit of youth justice workers and referrals citing these problems won't be accepted. Liz considered her "high tolerance" level for mental health problems as a positive, only dealing with the more serious referrals. Other interviewees were highly flexible, accepting referrals for low levels of need to reduce the chance of progression to a more serious problem.

> "I was a deputy manager on the inpatient unit, so my threshold for mental illness is quite up there really, so if I say to one of the psychiatrists that I'm worried about someone, then they would know that that's quite justified." – Liz, Northdale

> "And ultimately if we need a service for somebody or if somebody needs a roof over their head or if somebody desperately needs a mental health, a multi-disciplinary mental health service, then regardless of thresholds and resources we will fight for it tooth and nail." – Rebecca, Stoneycombe

The identity of mental health workers also impacted upon how they were perceived by youth justice workers. Those who strongly identified with CAMHS and social justice approaches were perceived as difficult and faced more issues within practice regarding assessment and referral. The mental health workers who identified with the YOT were more willing to conform to YOS standards, and so were perceived as helpful and accommodating.

> "I think it's very much about the culture of the organisation and it's very much about how staff are supported and how they're trained and how they see their partners." – Naomi, Midcaster

> "the issue is other workers here and their perception of CAMHS workers. Which has also been an issue within the organisation." – Luke, Edgeham

Identity also impacted upon enthusiasm for the work and persistence or willingness to go 'above and beyond'. It became clear through the interviews that some of the mental health workers had strong links between their professional and personal identities, and saw it as their role to meet needs or to help young people regardless of certain limitations of their role (e.g.; time constraints). Other mental health workers did not identify personally with this role and considered their work as a job, ending when they went home.

> "Now I don't, again I'm probably not meant, I'm probably meant to follow their way of working but, because of the client group, I don't, and I will keep trying and trying and trying." – Sarah, Brookshire

> "So they'd like, they've had things like, erm, it's not so bad now but, Fred's in reception and he's cut his arms, can you come and sort it? Well we're not an ambulance service are we? Or, Fred's in reception, he's gonna kill himself, at 5 o' clock. [pause] Well you need to take him to A&E don't you. So, do you know what I mean?" – Naomi, Midcaster

Neither of these approaches are wrong, but it is interesting to note the differences between the ways in which identities are held by mental health professionals. The differing identities

impacted upon relations within the YOT, and could also impact whether a young person received a service. Whilst strongly linked to the approach of a mental health worker, identities did not always match the approach. Dan, took a criminal justice approach to his work, and it was implied that this was heavily influenced by the culture within Westley YOT. However, his identity remained that of a mental health worker. This caused some tensions within Dan's practice, particularly regarding ethical issues and breaching young people.

> "Sometimes I am, I do struggle with it occasionally. You know, one of the criticisms I get for carrying a case load, is that if those cases that I manage don't comply with their orders, how do I feel ethically with having to take them back to court and breach them. Sometimes it can be a dilemma for me." – Dan, Westley

None of the other mental health workers interviewed faced these tensions, and were able to reconcile their approach and identity. Whilst Dan was in a unique position within this sample, it is unlikely that he is the only mental health worker within the YOS to hold a differing approach and identity. Dan was a lone worker but within a foot-in-foot-out form of provision. It is possible that retaining links to CAMHS allowed his identity to remain, despite the change in approach. The impact this would have in other forms of provision in unclear.

The identity of mental health workers impacted upon the service that young people received as it impacted upon what was considered within the remit of mental health workers, what their thresholds for mental health work were, and how persistent they were in trying to give help. That it has such a strong impact upon practice and the care that young people receive, there is a need for more research to investigate this area.

*Factors that Affect Practice*

The issues that occur in practice was a main theme from the data. It is of importance in this work as these issues were often inhibitive of socially just practice. Many of the teams faced the same issues, but the extent to which they were problematic differed based upon the level of provision, the approach taken by the YOT and the identity of individuals. The issues identified in the literature and used as a basis for discussions were supported by the views of mental health

workers. These were not the only problems facing mental health practice within the YOS though; a number of others were identified in the interviews and are described here.

The perception youth justice workers hold of mental health was a particular problem for mental health workers in the YOS. Many interviewees found that there were largely negative views of mental health and a lack of understanding when they first began working in the YOS. This could be due to a lack of experience and understanding of mental health, and many interviewees noted an improvement in attitudes as they became more familiar with mental health processes. This was not universal though and some still faced highly negative attitudes towards mental health. This led to young people not being referred for assessments when it may be necessary, and in one case an active hindrance of mental health work.

> "And one member of staff actually, he's a social worker and he'd done part of his training some time ago in a mental health rehab unit and had quite unpleasant experiences of that, erm, and so he was actually very anti section and really couldn't see any benefit to the point where I had to have a word with one of the managers because I felt the message he was giving to the lad when he was visiting him was probably conflicting with what mental health professionals were saying, so erm, that was one thing." – Sarah, Brookshire

Not all misconceptions about mental health were negative though and the idea of mental health being perceived as 'magic', or a cure all recurred in the experiences of interviewees. This highlights a lack of understanding about mental health and the fact that it is often subjective or abstract. This is also reflective of the culture within the YOS, which emphasizes both speed and certainty. This issue of how mental health is perceived puts constraints upon mental health workers in the YOS as they are held to unrealistic standards which affect relationships between mental health and youth justice workers.

> "Because we're driven by courts, by national standards and risk management, it's very much a do, do, do, now, now, now, we need this assessment, share information, swiftly and record all information so we're defending ourselves." – Luke, Edgeham

"they want a yes or no because the YOT is quite black and white, you're coming, you're not coming, you're on an order or not, you're breached or not. But she was like, 'blood test for it'. There's no blood test for it! You can't, and she was like 'that's what frustrates me about mental health' and I said that's what it is, it's a cluster of symptoms but if you look at a lot of health problems they all are like that, they're not just straight forward" – Annie, Newkirk

The relationships between mental health workers and youth justice workers was also frequently cited as a problem in the interviews. Where relationships within the YOT were difficult the mental health workers reported that there was a lack of discussion about their role and mental health practice. The ability to form relationships is impacted by the approach of an individual, their identity, the culture within the YOT, and the perception of mental health, amongst other factors. In Edgeham previously the relationship between CAMHS and the YOT had become so strained that CAMHS withdrew their services. Whilst this was later resolved, there was still a direct impact upon the service that young people received.

The majority of the mental health workers interviewed mentioned an improvement in relationships as they became more established in the YOT and as their work was seen to be effective. The need for visible results ties to the larger culture within the YOS, which is becoming increasingly focused upon outcomes, particularly with the introduction of payment by results.

"I think it, one it was over time and, two it was relationships and them actually seeing that this service was going to deliver" – Naomi, Midcaster

"So, but it, but generally speaking and I think it comes from you're team getting to know you and if you like trusting you're judgement and knowing that you're not someone that just refers anything in" – Sarah, Brookshire

This is problematic as a number of issues that negatively impact upon mental health practice are not in the control of individual mental health workers. The idea of working relationships being based upon perceived value or efficacy creates a requirement of mental health work being

visible, which is rarely possible given the nature of mental health and the ethics of work in this field.

> "it'll be 'Well I haven't seen them for ages'. Well it's not the CAMHS worker to be running around the office to be seen, it's the CAMHS worker to be out, seeing young people in appropriate environments, not being seen in the office just to make us happy. And that's still sometimes an issue. That if they're not seen they're felt they're not doing anything" – Luke, Edgeham

One of the key problems regarded information recording. Practice within the YOT is that all information is recorded on a computer system accessible by all members of staff. This caused concerns amongst mental health staff as participation in mental health services is voluntary and the information confidential. All the mental health workers interviewed had been asked to put confidential information onto computer systems accessible by any member of the YOT. This was considered as unnecessary and unethical by a number of the mental health workers, and conversely the withholding of information was seen as stubborn and problematic by members of the YOT.

> "it's quite, the YOIS system and erm, they were trying to just have a non-paper system for referrals but of course because CAMHS work is in paper files and generally there was no way they could do that, so it's, you get seen as being a bit difficult somehow." – Sarah, Brookshire

> "Erm, I can see why. I can see some of the logic, I do think just sticking to paper files is, a little bit old hat, but I can see their thinking." – Luke, Edgeham

> "Similar, yeah yeah. I think the other thing I can think of is recording, just day to day recording on the youth offending system's service [A: Yeah you're right, yeah]. Recording on our service, recording our [Beth: Yeah] stats. [Annie: Handwritten notes] A common theme we always talk about is our notes being somewhere other than where we are. So." – Mick, Newkirk

Both sides of these issues perceived that the other didn't understand their reasons, the YOS didn't understand the need for confidentiality in mental health work, and CAMHS didn't understand how information about mental health could be used in pre-sentence reports and advice to judges. Overall this strained relationships between the two agencies, making meeting the needs of young people more difficult.

These issues all impact directly upon practice and this the service young people receive. The majority of these issues occurred across all the YOTs involved in the research. The extent to which they were considered issues or solutions were found varied though, and is discussed in more detail later (*See: Suggestions and Strategies for Change*) . The issues made working more difficult for mental health workers and exacerbated feelings of isolation or 'otherness' in some mental health workers. The prevalence of these problems impacts upon the ability of mental health workers to be socially just in their approach. These issues seem to occur from a lack of understanding of the two services, or a lack of consideration of how the two organisations should work together. Whilst these issues occur within individual YOTs, they are indicative of larger problems with the implementation of multi-agency services within the YOS.

*Differences in Practice and Best Practice*

In discussions with mental health professionals about their work, practice is highly likely to be a common theme within the discussion. In this research practice was of interest regarding how both provision and social justice affected it. There is no attempt here to be prescriptive about how mental health work should be carried out; this theme relates to how practice differs across YOTs, how this is affected by the provision of service and what effect this has upon social justice.

There were a number of aspects of practice that stood out from the interviews, all of which were mentioned by all the mental health workers interviewed. The way in which they were discussed differed though; this may be due to factors such as the provision in that YOT, the approach, identity, and background of individuals, and the workplace culture. Resources also seemed to relate to how practice was discussed. The YOTs with lower levels of resources talked about practice in very concrete terms, concerning how to get the work done. The teams with higher

levels of resources used more abstract terms when discussing practice, considering how the work should be done. Woodshire had a comparatively high level of resources, with three mental health workers, all qualified to a high level. Whereas in Westley, the focus was upon meeting basic need.

> "we're kind of trained to understand, erm, the differences between different cultures and how you work with it. Erm, more importantly how power is kind of distributed in relationships, who holds it, who doesn't, erm, what does, what do your kind of physical characteristics say about the way about how you might be positioned and how you position others. These are all themes that are up for discussion all the time. And it should be." – William, Woodshire

> "it's very much about their offending behaviour and that risk of re-offending and the risk of any harm to others is reduced, and the mental health part is kind of secondary to that." – Dan, Westley

This isn't surprising; when there are fewer resources, having the ability to meet the basic needs of young offenders takes priority over more abstract issues such as if there is a power imbalance in the relationship. There is a basic hierarchy of need which has a strong impact upon youth justice services, particularly regarding questions of priority. Physical safety will often take priority over mental health for example. When these basic needs are met, others can be considered, which means that YOTs with higher levels of resources are more likely to be able to progress through the hierarchy.

Regardless of provision and resource levels, one factor that occurred in all the YOTs was that mental health workers were asked to take on "extra" duties or aspects of work. This involved school visits, duty on self-harm or emergency rotas, and general YOS or CAMHS work. Only those in the external-one-stop-health-shop were exempt from this; which is an advantage of non-seconded models. Whilst some of the mental health workers found this useful in some ways, such as maintaining professional practice or identifying local need, all the interviewees felt it was not the most appropriate use of their time.

"Yeah, it has been a cut. They had a full time schools worker, the post was withdrawn and we were made to give a day. So it's increased our workload with no extra time and it's reduced our capacity here." – Beth, Newkirk

"Erm, you know I do feel, I know that [having a YOT caseload] is an unusual arrangement, erm, it's something that, you know, I think that would probably work [pause] probably towards, not doing in the future." – Dan, Westley

One of the aspects of the practice theme was the ability of mental health workers in the YOT to practice in a way they felt was appropriate and to challenge aspects of practice they did not feel were appropriate, like the 'extra' tasks and duties. Again, the teams with higher resource levels were more accommodating of this than those with lower resources. Often, interviewees who felt more able to challenge practice and state their opinions felt better able to excise professional judgement. The managers interviewed also echoed this sentiment.

Researcher: "Do you get asked to consider things in terms of a criminal perspective?" Beth: "No." Annie: "No. I wouldn't have it! [laughs]" – Beth and Annie, Newkirk

"And we just had to say look, it's going to take up all my time to do that and it's going to be no value whatsoever. And the response was, "well yeah, but it's all part of it" and I had to turn around and say actually, no. This isn't part of the agreement and we're not going to do anything that is outside the agreement and they had to accept it." – William, Woodshire

Brookshire YOT was about to undergo a period of change due to funding cuts. Sarah, the lone mental health worker within the YOT, took this as an opportunity to change aspects of practice she felt uncomfortable with that she was unable to change previously.

"in a way it's quite exciting really; I can use it as an opportunity to look at the referral process and try and get better referrals […]So erm, I'm seeing it as a bit of an opportunity really, I think it's going to be hard and they're gonna do it and it might not be workable. It might all be too much, but at least we're giving it a shot I suppose." – Sarah, Brookshire

Other YOTs involved in the research had previously gone through periods of re-structuring and change due to outside factors like funding cuts. The changes were generally positive in these YOTs, although they had higher resource levels than in Brookshire. Additionally, in those instances managers were more heavily involved in the process of change and prioritised mental health. This may not be the case in Brookshire as Sarah had spoken of a lack of support previously; Sarah's drive to create change may not be as effective without support from management.

*Provision of Mental Health Services within the YOS*

The provision of mental health services in the YOS was also a key theme as it addresses one of the main aspects of the research question. The interviews covered how provision was set up within each of the YOTs, if there were any gaps in the provision and if the mental health workers and managers felt the provision was appropriate. This linked into most of the other themes; and change was a large factor in how mental health provision was approached, structured, and perceived. Funding cuts had impacted strongly upon both the YOS and CAMHS and how the YOTs in the case study confronted these changes was telling as to the levels of social justice within the service and how mental health is considered.

Upon discussing how mental health provision within each YOT had come about, a clear distinction emerged. The involvement of CAMHS in the creation of provision usually led to services with higher resource levels and a greater consideration of how best to meet young people's needs. This also created better relationships between the two agencies and allowed for better understanding of mental health approaches and how this would fit into the YOS. Where CAMHS was not involved in decisions about the creation of mental health provision within the YOS, there were lower resource levels, mental health workers faced more problems and there was less understanding of mental health. This is a simplistic view of provision, as many factors play a role in these decisions, such as approaches, identity, funding levels etc. However, the inclusion of CAMHS seems to have a stronger influence than these other factors. The YOTs where CAMHS was involved in decisions about provision seem to have taken a more considered approach, which has been carried through into everyday working practice.

"this model is, it works, what the YOTs do is, they just refer to us and cases are allocated and there's a big team that they can allocate, be allocated to. So what we do is we have service fit for young person's need." – Naomi, Midcaster

"So we're part of a brand new commissioned agreement between the services. […] and the activities, so they're basically split into KPI [key performance indicators] which was set as part of the agreement between the agencies so our whole service is really kind of relates to, the activity of the service relates specifically to that and within that you'll see it's broken down into key areas of what kind of practice what kind of work that we do" – William, Woodshire

In discussing the creation of provision it became clear that some interviewees found seconded approaches to provision problematic. Naomi had disliked working in a seconded position and this led to her helping to create the external-one-stop-health-shop.

"It was a very difficult job, to be a seconded worker into a youth offending team, and given that they were very much in their infancy as well it was very much everybody being told to do the same and you have to do this, this and this and obviously, you know, there's issues to do with, I'm a nurse and actually I'm not competent to do these things and court work." – Naomi, Midcaster

"I came back to Midcaster because, to set up a new model really. And that was not a seconded model, it was a bespoke service team to deliver mental health input for children and young people who offend." – Naomi, Midcaster

When discussing seconded positions in the interviews the idea of belonging and ownership occurs. This linked strongly to the theme of identity, and it highlights the role conflicts that can occur in multi-agency working. Whether seconded staff are responsible to CAMHS or the YOS is not always clear; there is a need for clear boundaries to these roles in seconded models. The idea of the YOS trying to control mental health workers occurred in a number of the interviews and is indicative of working cultures within youth justice.

"The relationship between CAMHS and YOS broke down so much that CAMHS actually withdrew the CAMHS service. And what the YOS did was actually employed our own mental health worker who wasn't CAMHS but had a, came from a young person's mental health background. [pause] That led to a greater degree of freedom for us. Because we employed her. She in essence did what we asked her to do. Erm, I'm not saying that's the answer, because, again the YOS isn't, doesn't know everything and mental health is a very specific area. But it certainly led to a swifter response in certain times" – Luke, Edgeham

At present the YOS is undergoing funding cuts, as are a large number of public and social agencies. This had impacted upon mental health provision in some YOTs and CAMHS had also had funding cuts. This placed pressure on services to adapt and some areas were using it as an opportunity to re-evaluate mental health provision and ensure the YOT could meet needs. This had led to identifying and understanding gaps in provision and discussions with commissioners. Learning difficulties and autistic spectrum disorders were identified by most of the YOTs as an area requiring more services, along with speech and language difficulties.

"Learning difficulties and speech and language are the main problems and actually getting a psychologist here to do psychometrics or a psychology assistant, because actually [pause]our kids are not always appropriate to go into a CAMHS service and it would be nice if they would, if that could be offered, for them to come in here as a slot."
– Beth, Newkirk

The mental health workers that held a social justice approach were also aware and concerned about more abstract issues, such as gender and ethnicity in regards to allocation of cases and if they could provide support in this regard.

"And there is a great concern about interventions with young girls because there are increasingly concerns around, erm, the increasing number of girls in the criminal justice system, […] we've got a very good female councellor, who's really interested in thinking about how we can really do that. Erm, but we haven't really developed it in a way I'd really like. So I think to some extent it's something that we need to look at a bit more." – William, Woodshire

"Erm, [pause] we have, we're lucky and it was luck not judgement that we've got a black male, and a white female, so at least it meets some scope for meeting identity needs or allocating a young person to somebody appropriate." – Luke, Edgeham

A number of YOTs had tried to gain support for their view that these gaps in provision required further services or resources. However, commissioners were found to be unwilling to listen or accept the views of youth justice or mental health workers. This makes the YOS seem hierarchical and strongly top-down as there seems to be little opportunity for those who work directly with the young people to have their experience recognised and their knowledge utilised in deciding what young people need.

"Whether or not that is the same view held by higher management, commissioners needs to be seen. There are always changes, there are always cuts and I think that, you know, I think the current socio-economic climate, and the government cutbacks etc., they're more of a driving force about what services are provided than the kind of than where it's made up." – Dan, Westley

"But whenever I've met with commissioning they're very keen to tell me about their restraints and what they will and won't do. They're less keen to understand what's going on, on a shop floor basis." Liz, Northdale

This hierarchy also affected the flow of information. There was much uncertainty about the future of the YOS regarding practice, provision, and the continuation of services. All the YOTs involved in the research were aware of new schemes that had been proposed for practice, including payment by results or new assessment schemes such as Asset + or the CHAT (Comprehensive Health Assessment Tool). None of them had a firm idea of how this would apply to practice, what would be expected of them, when these initiatives would be rolled-out, or if they were to use them at all, and there seemed to be little way for them to gain more information about this.

"Yeah, I find it quite interesting that they're doing it that way because I'm really involved in the implementation of the new ASSET Plus. The new assessment framework and erm, I can't understand why you'd want to do it that way if then, you

form an assessment such as ASSET Plus. So, I find it weird that that team don't know about it." – Vicky, Northdale

"lots of people at quite a high level have just disappeared. Just taken redundancy almost overnight really. We've been left thinking, well who's leading on this!" – Rebecca, Stoneycombe

"I don't know what they're gonna do. [laughs] The YOT, it's ridiculous isn't it, payment by results, take away all the social services, take away all the supportive services and then, [laughs] you've got a, well it's just mad. It's just crazy isn't it! It's mad." – Naomi, Midcaster


In addition to this there was uncertainty about the future of the YOS in general. In seven out of the eight YOTs visited, in discussing when this research would be finished (usually estimated at a year after the interviews) interviewees said "I hope we'll still be here then". The way this sentiment was echoed across the majority of YOTs involved in this work shows the extent to which this uncertainty about the future of youth justice exists. It also creates problems for YOTs in how they commission services and plan to meet need. Young offenders have complex problems that are best approached on a long-term basis. If there is uncertainty about the future existence of the service for the following year, making long-term plans to meet needs is difficult.


## Theory of Mental Health Provision within the YOS

These themes all display aspects of mental health work within the YOS, whilst they are interesting individually, the way in which they inter-relate is of more importance as this creates an image of how mental health services are provided within the YOS and how this impacts upon social justice. This description is being termed as a theory. To clarify, this theory reflects the reality of the YOS, but it must be acknowledged that this has been shaped by the constructions of the interviewees and the researcher. There may be other interpretations of the data that would lead to different themes and conclusions than those presented here; but as this research is not claiming to find any objective truth this is not a main concern. The process by which these

findings have been identified should be clear and supports the reasoning for this particular interpretation of the data. The theory that is presented here is reflective of the reality in which youth justice work takes place is an outcome of this process.

Based upon the thematic analysis of the data, the theory representing the reality of mental health provision in the YOS can be seen in Diagram 4.2. This shows the process of provisioning of mental health services, how the differing forms of provision occur, and how this impacts practice. The various themes are indicated on the diagram where they impact upon practice. Some themes affect numerous aspects of practice and so appear more than once. The various forms of provision are also indicated in Diagram 4.2. Their placement relating to resource levels and the inclusion of CAMHS in the commissioning process reflects what was found through the case study; this may not be true of all instances of the forms of provision. It should also be noted that the phrase "effective working" in Diagram 4.2 does not necessarily mean ideal. This is representative of YOTs that had provisioned mental health services that worked effectively, meeting need within the area; there may still be problems present but they are not as detrimental to practice or social justice as in other areas.
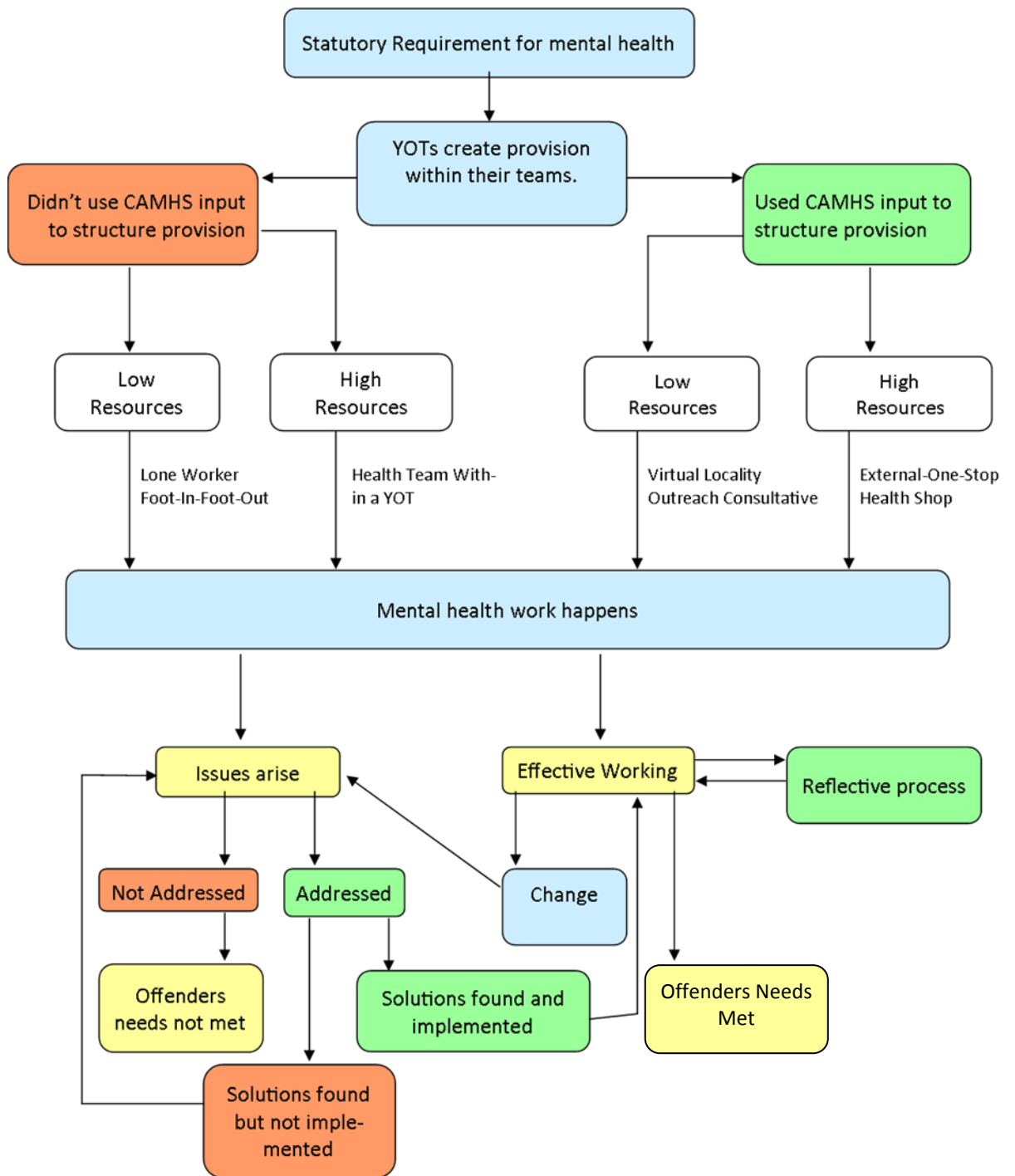
Diagram 4.2: Real world model of mental health provision in the YOS

The inclusion or exclusion of CAMHS in deciding provision seems to be one of the key factors affecting what form of provision will occur and how effective it will be. The YOTs that had a manager from CAMHS help to organise the provision, or to create provision entirely were more likely have a social justice approach regarding mental health work than the YOTs who did not consult with CAMHS in the commissioning process.

Following from this, the level of resources available also impacted strongly upon the form of provision adopted. The YOTs that utilised the Lone Worker or Foot-In-Foot-Out models did not seek any substantial input from CAMHS when commissioning services. Additionally, amongst the managers in these teams there was less knowledge of mental health practice, which may have impacted upon this decision. The YOTs that had lower resource levels but a greater understanding of mental health practice were more persistent in gaining a higher level of provision than one seconded CAMHS worker.

Once provision had been established within the YOTs, mental health work could occur. There seemed to be two main outcomes from this; either this work was effective, or issues occurred that impacted upon work. Addressing and understanding the outcomes of mental health work was largely done by mental health worker, youth justice workers, and their direct managers. Input from operational level management, commissioners, and the YJB is minimal at this point, and starting discussions with these groups is difficult.

> "what the problem is, is that I am a practitioner [pause] and I'm trying to communicate with people who are three or four steps above me, and they're like 'who is this Liz person?'" – Liz, Northdale

> "I don't think the strategic management side of thing have the same relationship. Which means that they don't always listen to one another, they just state their case and that's the end of the discussion." – Luke, Edgeham

In addressing the effectiveness of mental health work, some YOTs created solutions for the issues that occurred, which helped lead to effective practice. Other YOTs were unable to do this due to either a lack of resources, an inability to implement solutions, a working culture that doesn't recognise or minimises issues, and so on. This generally means the mental health needs of young offenders are not met. Despite this, mental health workers in the YOS are generally positive, with many remarking that they work well in a difficult situation and that they feel the service they deliver is better than that in other areas.

> "Yeah I think we're really fortunate, I think compared to other youth offending teams I think we fair pretty well" – Liz, Northdale

> "I think we've probably got it better. Like, when you speak to other YOT nurses, we've got laptops where we can access, kind of, YOIS anywhere and NHS"– Beth, Newkirk

> "I'm pleased that we're able to be, I'm really pleased that we're able to have got to where we are, but I realise to some extent we're out of kilter with a lot of people." – William, Woodshire

In the YOTs where effective working occurred, there was much clearer consideration and reflection about practice and what was needed to improve. This generally led to mental health professionals taking note of problems in youth justice as a whole and trying to incorporate them into their practice.

> "Erm, we don't have any specialists. And there is a great concern about interventions with young girls because there are increasingly concerns around, erm, the increasing number of girls in the criminal justice system and also issues, more recent issues around sexual exploitation and that kind of stuff." – William, Woodshire

All those interviewed, regardless of approach, identity, etc., held the view that young offenders are in need of mental health services and that their needs should be the driving force behind the YOS and their practice.

"One of the things I felt passionately about and one of the reasons I came here to this job was because I've always worked with children, adults, young people, and I feel that they deserve a service, you know." – Dan, Westley

"It's, we'll come and see you, where you want to be seen in a setting you feel comfortable and empowered in and are there any issues we can help you with on a journey of yours that we'll be part of." – Naomi, Midcaster

"We need to have an understanding of it but we also need to get the right service for our young people to meet their needs." – Rebecca, Stoneycombe

"it's about what the young person needs and what's going to lead to a better outcome for the young person in the long run." – Luke, Edgeham

## Conceptual Model of YOS

The conceptual model was derived using the approach outlined by Checkland (Checkland and Scholes, 1990) It can be seen in Diagram 4.3. It is intended that this conceptual model relates to how provision should be structured and placed within the YOS, rather than how mental health work should be carried out. Mental health is a professional discipline and for someone outside of that profession to be prescriptive about practice is at best unhelpful, and at worst an active hindrance to mental health workers. This model represents socially just mental health provision, based upon Rawls's version of social justice (1971). The result of this is not the only possible idealised version of mental health provision, however, it is the one that has been arrived at following applying Rawls's principles of social justice to the methods used within this work, particularly SST.

The model is based upon the adapted principles of social justice that were created to guide this work. They are;

All young offenders have an equal right to access mental health services.

Disparity of access to mental health services should only occur when there is greater need.

These principles were arrived at following consideration of Rawls's theory of justice as fairness, and how this could be applied practically within youth justice for the purpose of structuring mental health services in a way that is fair for both those working within the system, and the young people whom the system aims to help. By using these principles in conjunction with the approach outlined by Checkland (Checkland, 1999) for creating conceptual models Diagram 4.3 was arrived at.
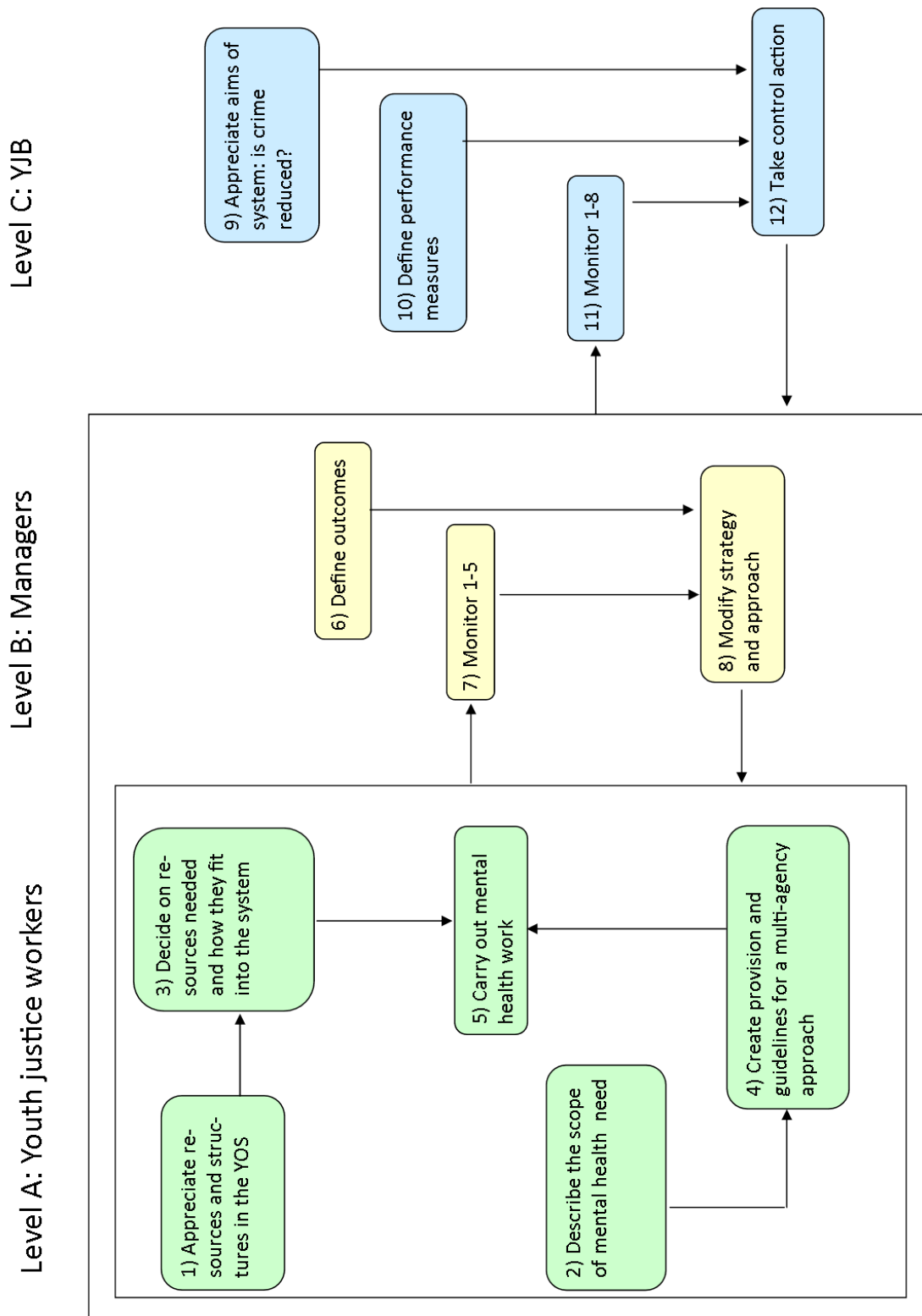


Diagram 4.3: Conceptual model of mental health provision within the YOS

167

One of the main features of Diagram 4.3 is the differing levels. This was not present in the real world model of the YOS. The use of levels is important particularly considering how they relate to organisational structures. Being able to link certain tasks to specific roles within an organisation is important as this affects accountability.

The Level A requires understanding of the limits of the system, what is required of it, and how this could be carried out in an effective manner. Regarding mental health provision for young offenders this entails understanding the extent of need in the area, the resources available to the YOS to provide mental health care, what best practice is for mental health care, and using all this knowledge to create an effective plan to provide within the area. This means that there is not an ideal form of provision based upon this model, but provision must be considered in terms of need, and how best to meet that. Following these stages (1-4 on Diagram 4.3), mental health work is carried out by mental health workers. Persons from high level management, mid-level management, and 'front-line' workers should be involved in the discussions preceding this. By involving persons from all levels of the system in preliminary discussions, the service is structured in a bottom-up manner, which is more likely to make front-line workers able to put across their views and expertise, thus giving them a larger stake within the system, and more control over their working environment. However, the front-line workers should not have to carry out work beyond Level A. The concern of staff at this level is meeting the needs of young people, and as such staff at this level should not be monitoring accountability or effectiveness of practice.

Level B concerns managers within YOTs, and monitors the work carried out in Level A. Monitoring practice is necessary to ensure accountability, and that statutory and other necessary requirements (e.g. safeguarding measures) are fulfilled. This level also defines some outcomes, which at this point are based on efficacy. The concern of Level B is that needs of young people are being met in an effective manner, i.e. that assessments being used are appropriate, interventions are being applied, and that staff are not overcompensating or raising thresholds beyond the level agreed in instituting the system. Once these outcomes have been defined, practice at Level A can be evaluated, and changes can be made to the strategy and approach to mental health provision if these outcomes are not being met.

Finally within Level C, the concern is if the provision is meeting the overall aims of the YOS, in that youth crime and recidivism are reduced. By having questions of efficacy and effectiveness at higher levels of the system, the responsibility for these questions falls on higher levels of management and those facilitating organisational structures. This avoids front line workers having to consider the larger aims of the system and targets, allowing them to focus on meeting the needs of young people. This also means that operational level management and higher management within the YOS and YJB have to maintain an awareness of practice at all levels of the system, to be able to monitor and evaluate the efficacy. The overall responsibility for reducing youth crime falls only at this level of the system as it relates to those with the power to make changes if they are required.

The need to ensure accountability within this system comes from basing it upon Rawls's ideas, which emphasize the importance of transparency and ensuring the efficiency and efficacy of structures (Rawls and Ward, 1985; Rawls, 1971). Additionally, ensuring that criminal justice systems are accountable creates legitimacy (Canton and Eadie, 2008; Eadie and Canton, 2002). The accountability described in the conceptual model is not managerialism. This is often how increased accountability occurs in practice, and is not appropriate, as it focuses on quantitative aspects of working, rather than if the work is effective also (Canton and Eadie, 2008). Accountability as used in the conceptual model should measure both the efficacy and efficiency of practice. This would allow young people to be recognised as individuals by the YOS, professional discretion to be used relatively widely in practice, and managers to ensure that this discretion is commensurate with the aims and procedures of the YOS as a whole. Of course, this is a theoretical discussion of the processes, for this to be applied in practice much more detailed approaches to these monitoring practices would need to be considered so that the underlying aims and principles of the system are considered and ensured opposed to managerialised practices that can be seen in practice currently (Holland, 2000; McLaughlin and Muncie, 2000; Muncie, 1999).

The system structures must be fair and just to facilitate working with young people in a fair and just manner. A bottom-up approach fits with this and is also true to the original philosophical basis of the YOT, which was based upon ideas of "what works" (Holdaway et al., 2001). The original intentions of a "what works" approach were not carried over into policy and practice though; a narrow selection of evidence was chosen to inform "what works", and it ended up

being a largely restrictive approach (Burnett and Roberts, 2004; Prior and Mason, 2010; Yates, 2012). A true "what works" approach would be based upon a wide selection of evidence from research and practice, i.e.: things that have been shown to work through research and practice are implemented on a wider scale. This would give those who work with young people a say in how the work should be done, recognises professional judgement and creates a sense of ownership within practice. By having higher levels of the model monitor practice allows for ideas and strategies to emerge from practice, facilitating a genuine "what works" approach, in contrast to a top-down system in which practice is dictated based upon inadequate evidence bases which only recognise quantitative measures (Hope, 2005). In addition to recognising a wider evidence base, including these aspects within the conceptual model means that it retains the value base that was originally conceived for youth justice.

The conceptual model is not prescriptive in terms of how mental health work should be carried out, this is best left to professional judgement and training. The model does create a structure which would allow professionals the freedom and flexibility to structure mental health provision in a way that meets the needs of the service within that area and also is accountable and has systems in place to monitor efficacy and make changes where necessary. The conceptual model is also based upon a fair approach, being created with Rawls's ideas in mind. Using Rawls's ideas for a basis gives some aspects of the model that are not directly related to the structure. By entering the original position and considering what fair mental health provision would look like within the YOS, the issue of accessibility was pertinent. For mental health provision to meet the needs of young offenders, there must be clear access pathways. This means that the lone worker model or a foot-in-foot-out model with one worker are not sufficient. There are frequent occasions where there is not access to mental health services within the YOT when these models are utilised. To create a fair service a minimum of two mental health workers is necessary. This also improves support for mental health workers as well as maintaining accessibility.

The conceptual model, if applied within practice, should meet the two requirements of social justice. This is largely due to having discussion about what the system aims to achieve, and how it can feasibly do this before any work is carried out. Additionally, the bottom-up structure means that those who work with young people are treated fairly as their agency and expertise are adequately recognised, and that ineffective or inefficient practice can be changed. This

should allow mental health workers to agree with youth justice on levels of need within the area that can be addressed and how to go about this. So young offenders will have access to mental health services (based on their needs), and any disparity is likely to be due to higher levels of need taking precedence. This is not guaranteed though, as mental health workers differ in their approach and views, which may impact upon their practice. This model was not created for practice though, and so is likely to have limitations.

## Comparison of Models

Checkland (2000) outlines four main approaches for model comparison within an SST framework. Model Overlay is used here. This method of comparison uses the "rich pictures" or diagrams for each model and directly contrasts them in terms of how similar they are. The two models are compared in Diagram 4.4 to highlight the contrast between them.

## Real World Model

**Statutory Requirement for mental health** → **YOTs create provision within their teams.**

YOTs create provision → **Used CAMHS input to structure provision** → **High Resources** (External-One-Stop Health Shop) and **Low Resources** (Virtual Locality Outreach Consultative)

YOTs create provision → **Didn't use CAMHS input to structure provision** → **High Resources** (Health Team Within a YOT) and **Low Resources** (Lone Worker Foot-In-Foot-Out)

All resources → **Mental health work happens**

Mental health work happens → **Effective Working** → **Reflective process** → **Change**

Effective Working → **Offenders Needs Met**

Change → **Solutions found and implemented**

Mental health work happens → **Issues arise** → **Addressed** → **Solutions found and implemented**

Issues arise → **Not Addressed** → **Offenders needs not met** → **Solutions found but not implemented**

## Conceptual Model

**Level C: YJB**

9) Appreciate aims of system: is crime reduced?
10) Define performance measures
11) Monitor 1-8
12) Take control action

**Level B: Managers**

6) Define outcomes
7) Monitor 1-5
8) Modify strategy and approach

**Level A: Youth justice workers**

1) Appreciate resources and structures in the YOS
2) Describe the scope of mental health need
3) Decide on resources needed and how they fit into the system
4) Create provision and guidelines for a multi-agency approach
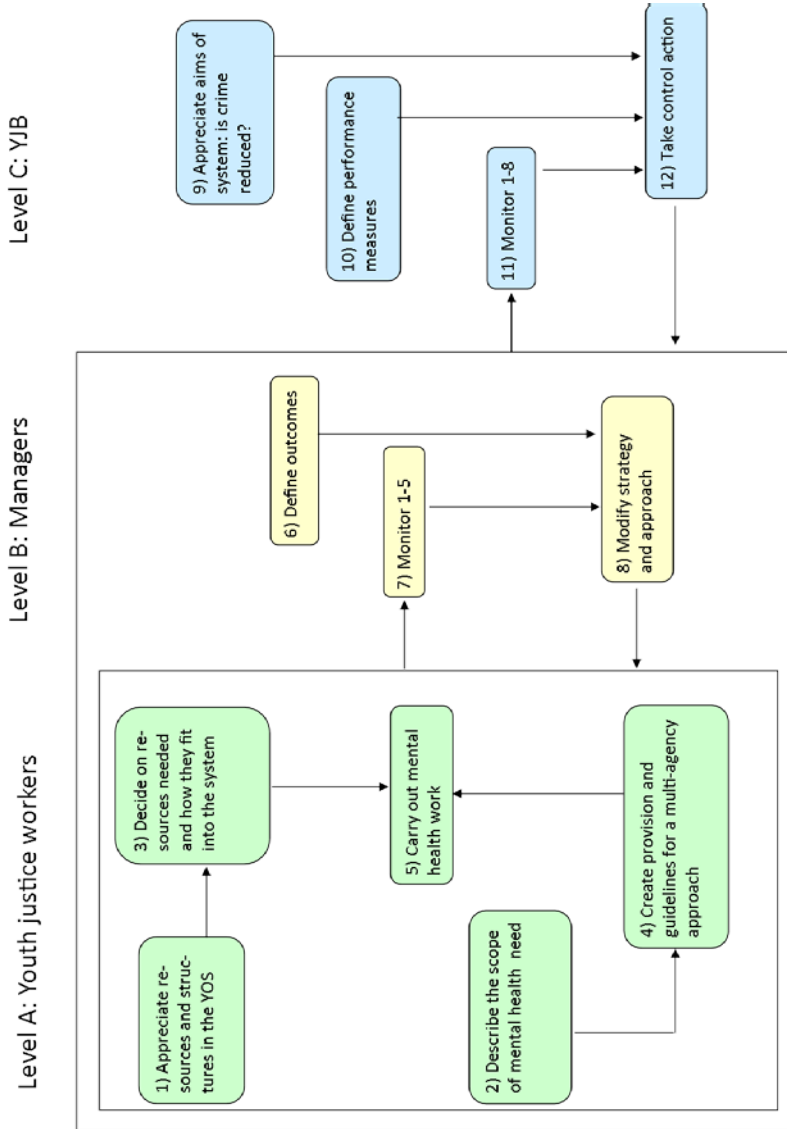5) Carry out mental health work

Diagram 4.4: Comparison of models

172

The most striking of the differences between the two models is the organisational structure. The conceptual model has a clear structure, differing levels, and links each level to different roles within the organisation as a whole. The real world version does not have levels. It is a strictly top-down process, with low levels of involvement for higher level management beyond the institution of service provision. The ways in which the two models approach creating services is very different. In the real world model, the level of resources and the persons or organisations involved dictate how mental health provision is structured and carried out. Whereas in the conceptual model there is a high level of consideration before provision is created as to how needs can be met with the resources that are available.

It is also interesting that there is not a clear system of accountability within the real world model, again with problems such as unmet needs or lack of resources falling upon those who are trying to carry out mental health and youth justice interventions with young people. There is little recourse for those who identify problems that require more resources or a change in structure to be resolved.

## Suggestions and Strategies for Change

Contrasting an ideal with reality can highlight areas for improvement. It can also show what changes are needed to make the real world closer to the ideal. This process identified strategies and suggestions for changes to youth justice that may improve mental health provision and allow young offenders to be treated in a way that meets standards of social justice. In addition to the comparison process outlined in SST, some solutions to problems within the YOS were identified by the interviewees.

The ability to create and implement solutions to problems is affected by numerous factors. Most prominently the culture within the YOT has to be one that recognises issues when they occur. If this is not the case, issues within mental health provision and practice are unlikely to be addressed. Whilst this is an aspect of the culture of the YOT, it also relates to the approach taken by mental health workers. The approach taken can affect what is perceived as a problem. In some teams this directly impacted upon perceptions of mental health and what was considered to be a mental health problem. In YOTs where the culture was more accommodating

of mental health and social justice attitudes, high prevalence of low levels of mental health need were seen as a problem that needed to be addressed through improved provision or training. In teams where the culture was heavily criminal justice oriented, this was not perceived to be an issue, as only clinically diagnosed need was considered to require referrals. Differences in culture directly impact upon the service young people receive in this way by defining what is a problem and thus what requires a solution.

> "I probably see 2, 3 a year with a significant mental illness that you know, you'd really be kind of worried about. We get a high proportion of young people who present with self-harming behaviour, that tends to be on the whole fairly superficial, crisis reaction led. We have a lot of young people present with ADHD, conduct disorder, oppositional defiance, that sort of thing. We have a few young people present with eating disorders, usually females. A few young people present, quite a number of young people actually present with autism, autistic spectrum disorder. So we get quite a variety. The majority I wouldn't say are truly mentally ill." – Dan, Westley

Mental health workers who had the ability to challenge practice within the YOT were better able to suggest and implement solutions. Additionally, being able to enforce role boundaries alleviated some of the problems that occurred within YOTs regarding mental health provision and drifting roles. Being able to enforce boundaries also gives mental health workers more agency in defining their role and identity.

> "Very much able to maintain a mental health [pause] view really, and to keep out of the youth justice stuff. Because that was quite overwhelming." – Naomi, Midcaster

> "That, taking on that more support worker type role, what YOT workers would take on, that's not what we do we do mental health." – Annie, Newkirk

> "if there was any concern that we might be pulled in one direction, we can say, aah, we've got a contract, it's very clear, this is what we're doing." – William, Woodshire

The ability to recognise problems, challenge practice, and define boundaries to one's role gives mental health workers better ability to create and implement solutions to issues. This is also

dependent upon having support within the YOT. If managers are not supportive, it is unlikely that they would be willing to implement solutions. By this thinking, solutions being found and implemented is a mark of socially just practice. If solutions are being implemented this means that there is some reflection occurring about mental health provision and practice, issues have been identified and recognised as problematic, and steps have been taken to rectify these issues and meet needs.

Some of the strategies that occurred from the analysis and interviews aim to create change on a short-term scale, and are aimed at being implemented by YOTs. However, some of the problems affecting mental health provision are based in philosophical differences and the larger structures of youth justice overall. These issues cannot be rectified in the short term and require greater thought. In addition to strategies for change, suggestions were created that are aimed at the YJB, commissioners, and higher level management within the YOS, to address these larger issues which require further consideration and a longer time-scale. The short-term strategies for change focus upon current practice within YOTs. These suggestions aim to be practical and easily applicable given the current state of the YOS. Some of these were found in the case study, being utilised successfully within YOTs, others emerged from the SST process of outlining what is necessary for a specified transformation processes to occur. It is recognised that certain factors such as funding or resource levels are not controllable by individuals within YOTs, thus the suggestions for this level do not focus upon these factors. Practical strategies are given for improving relationships between mental health workers and youth justice workers, improving communication within a YOT, and meeting the standards of both youth justice and mental health organisations.

*Strategy 1: Training to create better understanding*

Relationships between youth justice and mental health workers were found to be a cause of problems within certain YOTs. A lack of understanding of the other organisation was found to be a problem for both mental health workers and youth justice workers, which impacted upon practice. The interviews highlighted that some mental health workers felt excluded by members of the YOT who had negative views of mental health and that these persons were reluctant to refer young people for mental health assessment. This negative perception of mental health or poor relationship with mental health workers directly impacts upon the service young people

receive in these instances and so requires improvement. To alleviate this some YOTs undertook training to ensure that all staff had necessary levels of understanding. In some cases mental health workers organised training days for YOT staff, others trained individuals as they joined the YOT. This allowed YOT staff to have a better understanding of what mental health is, how it relates to YOT work, and what mental health workers do. In addition to creating greater understanding, this fostered discussions between mental health and youth justice workers. In addition to this, it may be useful for YOTs to give mental health workers some training as to how the YOS operates and the approach it takes. A number of interviewees expressed a desire for this, stating that it would have helped them understand what the YOT needs from a mental health worker and what is expected. Ensuring that there is understanding of both agencies through training improves relationships between staff as there are more realistic expectations of what a mental health worker within the YOS does.

*Strategy 2: Working Contracts*

In addition to improving knowledge, relationships between YOTs and CAMHS can be improved by creating working contracts when instigating multi-agency partnerships. Whilst it is recommended by the YJB that service level agreements are in place between agencies, often these are considered as a box ticking exercise and do not address practical aspects of joint working. One of the teams in the case study had created a comprehensive working contract, which had improved relationships between the two agencies and positively affected practice. This contract was created following discussions between the YOT and CAMHS considering what each organisation expected and needed from a joint partnership. It defined the role of a mental health worker within the YOS, creating clear expectations and removing the risk of the mental health worker role "drifting" to include aspects of youth justice work. The contract addressed specific aspects of practice that had previously been problematic, such as information sharing. The needs of each organisation were considered and it was agreed that basic information about mental health work with young people could be shared, such as how often meetings took place, if a formal diagnosis had been given, if the young person's family were involved in their treatment, and if the young person was engaging with the mental health work. Specific details such as the nature of the mental health intervention would not be shared as this information is not necessary for youth justice workers to know, and so can remain confidential. This satisfied CAMHS ethical requirements for confidentiality, whilst allowing the YOT access to information that could be helpful in pre-sentence reports or court situations.

*Strategy 3: Joint Supervisions*

Another strategy that had been used to improve communication and relationships between mental health and youth justice workers was joint supervisions. This worked particularly well in Edgeham, where the two mental health workers took different approaches and there was a need for consistency. By having supervisions with both, discussions were open and any differences or disputes could be addressed directly. This also allowed for management to be aware of issues and how they could affect practice. This moved supervision from a more formal discussion of working to a more informal format. Doing this allowed for the mental health workers to feel better supported and more able to express problems and solutions.

*Strategy 4: Improved Communication*

Aside from issues regarding communication and relationships between mental health and youth justice workers, many of the issues that were identified within the case study centred on specific aspects of practice. The assessment and referral process in particular was described as problematic. It was often mentioned that youth justice workers were unsure about when to refer a young person for a mental health assessment. This is partially due to problems with the Asset tool, but also an ambiguity about when mental health issues require specialist help. This was cited as being a cause for inappropriate referrals from youth justice worker, particularly regarding anger management. To overcome this all the mental health workers in the case study encouraged youth justice workers to discuss cases with them informally if there was concern or uncertainty about the need for mental health assessment. In one team a system had been created where an alert was sent to the mental health workers if an Asset score of two or more had been given on the mental health section, but the young person had not been referred. This allowed the mental health workers in that team to discuss this with the case manager and schedule an assessment if necessary. Encouraging informal discussion between mental health workers and youth justice workers "de-mystified" mental health processes, allowing for more appropriate referrals and for youth justice workers to be better able to discuss mental health with young people. Monitoring systems for Asset scores also increase levels of accountability of mental health work within the YOS, ensuring that the service is being used appropriately.

Whilst these strategies were being used in teams to overcome issues, they are not a panacea. All the YOTs involved in the research still faced problems. These were gaps in the provision, lack of resources, and changes to the service that impacted upon the ability to meet needs. The YOTs that had a greater focus upon social justice seemed to be more aware of these issues and aimed to improve. The YOTs where the mental health worker had become aligned with criminal justice approaches were less concerned with these issues regarding provision. This is reflective of working cultures and attitudes within individual YOTs. It also highlights the need for social justice to be considered; the YOTs where social justice was a concern had greater awareness of issues, and thus are better able to overcome them.

To go beyond these strategies and ensure that changes occur throughout the YOS as a whole rather than in individual YOTs, long term plans for improving practice are required. As these suggestions are long term in nature and are apply to the YOS as a whole, they are aimed at the YJB rather than YOTs. The reason the term suggestion is being used here rather than strategy is because it cannot be guaranteed that these changes will have the desired impact. Also, the strategies can be adopted quickly and relatively easily, whereas the following suggestions require widespread change throughout the youth justice system as a whole. This makes them less likely to be enacted, as the YJB has not undertaken any wide scale changes to youth justice since its conception. Additionally using different terms for the strategies and suggestions highlights the difference between them, and creates greater transparency in how these findings have been constructed.

*Suggestion 1: Baseline level of provision*

At present within the YOS there is not a baseline level for mental health provision. This has been a contributing factor to the reason why a variety of forms of provision have occurred (Harrington et al., 2005; Khan and Wilson, 2010). As some of the forms of provision that have emerged leave mental health workers unable to meet needs adequately, a standard minimum level of provision is required to guide YOTs. This work used the forms of provision identified by Khan and Wilson (2010) as a framework, and has found evidence that supports not only the theory, but also its presence in practice. As these forms of provision have occurred 'naturally' it can be assumed that they are representative of what is practical for YOTs based upon their resource levels and knowledge of mental health. Using this framework in suggesting a baseline

level for practice is useful as it can be seen how the forms of provision work in practice, and as the differing forms have been developed by YOTs, they are applicable in terms of context and organisational culture.

Not all of the forms of provision identified by Khan and Wilson (2010) are appropriate though, as can be seen from the results of this work, some are more prone to problems within practice than others, and some are better able to meet the needs of young people than others. The 'lone worker' format would not be a useful baseline, as a single worker will likely be unable to practically meet needs in a consistent way. The lone worker approach also means that it can be difficult for young people to access services, which is unjust. The foot-in-foot-out format would also be inappropriate as a baseline with only one worker (as in Westley), however, this approach could also be used with two mental health workers. This would be more appropriate, as it would increase the level of access to services for young people, and give mental health workers within YOTs better support. The foot-in-foot-out approach with two mental health workers would be an appropriate baseline suggestion, as it would better meet the needs of young people, and through having good links to CAMHS and being supported by a colleague could allow mental health workers in the YOS to overcome a number of the problems that were found in practice. The other approaches to provision found by Khan and Wilson (2010) have greater levels of resources and are better able to meet need in that respect, and so go beyond what would be required of a 'baseline' level.

Using the foot-in-foot-out approach with two mental health workers as a baseline for provision in practice is not necessarily practical though, and is somewhat idealistic. Not all YOTs have the resources to carry this out, which may be why lone worker approaches have occurred. This suggestion is more likely to occur as a long-term goal, or as an aspiration for youth justice to work towards. There is a need for contingencies to be created though to ensure that young people's needs are met in situations where a lone worker approach is used.

*Suggestion 2: Structured planning of multi-agency work*

One of the main issues regarding mental health provision in the YOS is that the YJB gave very little guidance to YOTs as to how to create multi-agency partnerships, what provision should

achieve, or how. There was little strategic planning regarding how mental health provision was to occur within the YOS, and how relationships between YOTs and CAMHS should occur. This uncertainty contributed to tensions between the two agencies and forms of provision that were not effective. The YJB needs to give better guidance to YOTs regarding planning for multi-agency work. Whilst giving YOTs autonomy to decide what is best is reasonable regarding some aspects of youth justice, it is not appropriate for a multi-agency partnership that is to occur on a national scale.

All of the mental health workers interviewed had experience of YOTs that they thought didn't know what to do with a mental health worker. If this is a common problem, it shows the lack of guidance that YOTs received regarding the requirement to meet mental health needs. Guidance could be created that would be informative, but still give YOTs autonomy. Involving CAMHS in the discussions about creating provision seems to have a positive impact, so it could be included in guidance, as could a discussion of the different types of provision that currently exist, allowing commissioners and managers to see what has worked or not worked in various contexts, and to make informed decisions about what type of provision would be most appropriate within their area. This would also allow for new types of provision to be created, but on a stronger basis as they would be informed by discussion with CAMHS and knowledge of the impact of provision.

*Suggestion 3: Improved practice guidelines*

The guidelines for practicing mental health work within YOTs are quite restrictive, which is in direct contrast to the guidelines for creating provision. Mental health workers have to use assessments chosen by the YJB: the SIFA and SQUIFA. None of the mental health workers interviewed found these assessments useful, and completed them only to meet guidance standards. Any additional assessments that the mental health workers chose to use were not part of YJB guidance. Additionally, many of the mental health workers interviewed had encountered problems between the differences in YOT and CAMHS guidance regarding storing information. There was not specific guidance for mental health workers in the YOS regarding this, which led to confusion and problems within practice. This shows that guidance for practice is not appropriate, and that the YJB doesn't regularly monitor practice for accountability in a meaningful way.

Improved guidelines for practice could have a list of approved mental health assessments which would be recognised by the YOT. By broadening the number of assessment tools that could be used, referrals to CAMHS would also be simpler, as tools recognised by CAMHS could be advocated within the YOS. Additionally, the role of mental health workers within the YOS could be defined more clearly. Currently there is uncertainty as to whether mental health workers who are seconded from CAMHS are to maintain CAMHS procedures, YOS procedures, or a mixture of the two. This uncertainty has contributed to tensions between those working within YOTs, and differences in practice across the YOS as a whole.

As the YJB is responsible for the YOS, and thus the impact of youth justice, there should be more concern from the YJB regarding improving standards within practice. Creating useful guidance would be a key step towards this, ensuring practice is standardised across the YOS, and that young people receive a similar standard of care.

*Suggestion 4: Increased accountability*

Accountability within youth justice requires improvement. The YOS is based upon a hierarchical, top-down structure, and accountability does not follow the same process. The YJB does not monitor practice in a way that shows effectiveness. The YJB monitors if base guidelines are met, and if they are met within set timescales. Youth justice and mental health workers are held accountable to their managers, however, accountability within the YOS doesn't seem to extend much further than this. That those without the power to create change are the those who are held to account within the system does not seem just. The YJB is ultimately responsible for the service as a whole, and so should be accountable for problems. It could be said that this was the case when the YJB was to be one of the QUANGOs that were closed, however, since that decision has been reversed there have not been any large scale changes to youth justice that would improve accountability.

The YJB should monitor practice in terms of its effectiveness as well as efficacy. At present mental health practice within YOTs requires improvement. Examples of successful and effective mental health practice within YOTs are largely due to the individuals within those

teams opposed to standards or guidance set out by the YJB. There have been numerous calls from research stating that youth justice is not working and large-scale changes are required (Crawford and Newburn, 2013; Goldson, 2011; Muncie, 2010; Newnham and Page, 2010; Pitts, 2003; Smith, 2010; The Howard League for Penal Reform, 2011a; Whitehead, 2011), but this has not been heeded by the YJB. Whilst change occurs frequently within youth justice, it does not affect the service as a whole, and largely consists of increasing targets or requirements for those who work directly with young people. That practice with young people doesn't change (Kemshall, 2010; Newnham and Page, 2010) shows that the YJB instigated changes are not working as planned, and their main impact is to increase the workload of those within the YOS, giving them less time to carry out meaningful work with young people. That the YJB hasn't acted upon this shows that they are not monitoring practice, and that there are ineffective accountability measures within youth justice.

## Summary

The initial aspect of the analysis was to see if the forms of provision identified by Khan and Wilson were still present in practice. Of the eight YOTs participating in the research, seven closely matched one of Khan and Wilson's six forms. The remaining YOT bore some similarities to one of the forms, but was not identical. This supports Khan and Wilson's work, and could allow the research to continue based upon this framework.

The data was thematically analysed, the themes that emerged from the data related to mental health workers approach to practice, the identity of mental health workers, issues that occur in practice, the various factors that impact practice, and the impact that the structure and type of provision has upon practice. The themes formed a case study of mental health provision within YOTs. The case study and other information from the interviews were used to create a model of mental health provision and practice within the YOS. This was contrasted with a conceptual model of what provision would look like if social and criminal justice were balanced.

The comparison of the two models led to a number of suggestions and strategies to improve practice being made. The strategies relate directly to practice, and could be carried out by YOTs to overcome issues in practice. The suggestions relate to the philosophical aspects of the research question, and are aimed at the YJB and Ministry of Justice, as they require implementation across the organisation as a whole.

## Discussion

### Overview

This chapter considers the success of the findings in answering the research question, and considers how the findings relate to both the philosophical and practice aspects of balancing social and criminal justice within the YOS. There are three main sections to the discussion. The first expands upon the need for social justice within the YOS. There are a number of reasons why social justice is necessary in the YOS, but it is important that its presence is balance with criminal justice. It is discussed how the findings support the argument that John Rawls's theory of justice as fairness can be applied to the YOS, and would be beneficial to underpin practice.

The second section discusses the relationship between mental health provision in the YOS, and social and criminal justice. The ability to create balance between these two factors has a reciprocal relationship with the way in which provision is structured and created. Evidence from the findings is discussed relating to how balance can be achieved, and the ability to overcome issues within practice.

The third section focuses on the need for change within the YOS. To achieve a balance between social and criminal justice, principles are needed to guide practice. As the YOS has not used guiding principles to aid decision making across all levels of practice, the current system lacks accountability, consistency, and is not treating young people equally. Using justice as fairness to create principles would benefit practice, but it is likely that to apply those principles consistently, structural changes would be needed within the YOS.

### The Need for Social Justice in the YOS

> "If a society cannot guarantee 'the equal worth of all citizens', mutual and self-respect and the meeting of basic needs, it cannot expect that all citizens will feel they have an equal stake in abiding by the law. In these respects, criminal and social justice are inseparable" Cook (2006: 24)

Youth justice is an important institution in our society, both protecting public rights through preventing crime, and protecting young people's right to fair treatment and access to opportunity. To ensure that youth justice meets these aims in a way that is fair and equitable, it should be held to standards of social justice. Social and criminal justice are not opposites on a spectrum (*See Diagram 1.1*). They can be used in tandem, and it actually seems beneficial to do so (Bradt and Bouverne-De Bie, 2009). If criminal justice is not also socially just, it can be argued that it is not actually achieving justice (Cook, 2006). The processes of criminal justice need to be fair, and applied consistently. Ensuring that these practices are socially just is ensuring that criminal justice is not being applied in ways that are biased or inappropriate. That both dimensions are incorporated into institutions like the YOS is important in ensuring that the rights of young people are maintained whilst the law is upheld.

Citizenship involves both rights and responsibilities being accounted for by the state (Hobbes, 1651; Rousseau, 1762). This dialectic is reflective of the relationship between social and criminal justice. Social justice is concerned that our rights are maintained, and criminal justice our responsibilities. Whilst both social and criminal justice have broader impacts than this, it shows how ensuring balance is necessary within societies. Current trends within youth justice seem to be de-prioritising social justice to focus on responsibilisation and punitive measures (Bateman, 2011; Bradt and Bouverne-De Bie, 2009; Muncie, 2008; Whitehead, 2011). Whilst this does not inherently mean that criminal justice will be applied inappropriately, it increases the risk that young offender's welfare and social needs will not be met by the YOS. It also highlights the current imbalance between social and criminal justice within the YOS, as young people have a right to have their mental health needs met by this organisation. This would mean that the aims of the YOS would be less likely to be achieved as the YOS has a duty of care for young people, and meeting welfare needs, such as mental health needs, may reduce offending (Townsend et al., 2010). As young people are denied many aspects of citizenship by society (autonomy, the right to consent etc.) but are held accountable to laws, there is an extra concern that the needs of young people are met to justify this imbalance (Fourie, 2006). From the case study it can be seen that some individual YOTs do consider social justice in their work and have found it beneficial to do so. If the YOS as a whole adopted principles based on balancing social and criminal justice to structure and organise youth justice, it may be beneficial to both those working within the service and the young people it is trying to serve.

It is unclear if incorporating social justice into mental health practice allows YOTs to consider a wider range of issues within their practice, or if consideration of these issues leads to socially just approaches. Negotiating and accessing resources was an example of this in the case study. Woodshire YOT was very concerned with social justice, and actively sought higher levels of resources. Edgeham YOT sought higher resource levels for practical reasons, but became more engaged with social justice during this process. This work has established a link between consideration of social justice and recognition of pre-existing practice issues. Following this, further research is required to explore this area more fully. Whilst at present the exact nature of the relationship is unclear, the case study provides evidence of the benefits to practice, specifically improved relationships between mental health and youth justice workers, and greater capacity to meet need. In addition to improvements in practice and the potential for reductions in re-offending, social justice approaches ensure that young people are considered as citizens opposed to solely being 'offenders'. If it is ensured that these young people receive social justice in their treatment by the state, it may impact their views of crime, justice and citizenship by highlighting the contractarian nature of the relationship between citizens and the state. (Bateman, 2011; Goldson, 2000a; Whitehead, 2011). Making social contracts transparent and understood by all is vital, as citizens are unlikely to uphold their responsibilities to the state if they do not know why they should or how it will benefit them (Rawls, 1971; Rousseau, 1762). Often young offenders have not had experience of appropriate or dedicated services before (The Howard League for Penal Reform, 2011a), and building trust is a key aspect of working with young offenders for both youth justice and mental health workers. By ensuring that youth justice services are socially just, these trusting relationships may be easier to create, improving engagement with the service, which has previously been a problem (Muncie, 2006a).

In discussions about youth justice in the media, public forums, and political rhetoric, it is often overlooked that young offenders are still children, and offered certain protections by law (Anderson et al., 2004; Barrett et al., 2006; Harrington et al., 2005). Historically there has almost consistently been negative perceptions and moral panics about young people (Pearson, 2006). This makes it difficult for some to reconcile the idea of a criminal justice organisation offering help and services such as mental health to offenders. These offenders may be as young as ten years old though, and in the long term meeting their health and social needs acts as a better preventative measure against reoffending than punishment (Goldson, 2000a; Home Office, 2004). Additionally, providing services earlier in life allows problems to be resolved before they reach crisis point, or impact severely on other aspects of an individuals' life (Allen

et al., 2012; Loeber et al., 2003). There have been questions raised within youth justice about the ethics of early intervention (Case, 2006); if these measures also catered to welfare needs, this would balance social and criminal justice in this work, and potentially prevent young people from requiring further support in later life. If the YOS is becoming more punitive or less able to meet the needs of young people (Caputo, 1987; Putnins, 2002), due to changing trends or funding cuts, it may no longer be meeting standards set by the Children Act (Home Office, 2004), calling into question the overall purpose of YOTs.

The YOS currently doesn't formally recognise social justice as part of its aims or purpose, beyond requirements to meet welfare needs. However, social and criminal justice are interlinked, and require balance (Cook, 2006; Fergusson, 2007). If the YOS adopted principles that balance the two perspectives as the basis of practice, this would allow the YOS to meet requirements of social and criminal justice, and overcome a number of issues in practice. Within the YOS there is a localist agenda, which has allowed variance in practice to occur across the country. This in itself is not necessarily problematic, but it has meant that young people do not receive an equal service; some YOTs have high levels of resources that others do not, and some have a greater concern for social justice than others. This affects the way in which young people's needs are met by the YOS overall. Additionally, localism has meant that beyond practice guidelines there are not principles to guide practice within the YOS as a whole. This means that the judgement of professionals within the YOS does not have any uniting factors, again leading to differences in the service offered to young people. Whilst youth justice workers will have a similar professional background that will create unity though the YOS, multi-agency practice means that the YOS has a number of professionals from differing backgrounds and with differing standpoints and views working together. A set of guiding principles would help create cohesive decision making within the YOS, and allow all professionals to have a clear understanding of not only what the YOS is aiming to achieve, but also how.

*Social Justice Impacts Practice*

Many of the issues faced by mental health workers within the YOS are based in, or linked to, social justice. Issues of accessing services, or creating an equal level of access for young people and questions of whether young offenders have a right to access mental health services all

occurred throughout the case study. All the YOTs involved in the research face similar issues, but some were better able to overcome these. It appears that social justice has a reciprocal relationship with practice issues, the problems themselves are barriers to socially just practice, and working in a socially just manner makes it easier to overcome issues within practice. For example, a lack of understanding of each other's perspective impacted relationships between mental health and youth justice workers, and also meant that young people were not always referred to mental health assessment when necessary. Newkirk YOT instituted training for both the youth justice and mental health workers to allow their knowledge to improve. This helped remove problems within practice, but also meant that young people receive higher levels of social justice, as a broader range of issues were considered, and the relationships between mental health and youth justice workers allowed this to be addressed. The teams that were better able to overcome practice issues displayed a number of common features. Higher levels of resources were generally present in the YOTs where solutions were found and implemented. Additionally, mental health workers in those teams were better supported, and more able to maintain their professional identities and approaches than when compared to other YOTs. The attitudes of management within the YOTs were also similar, they were not only accepting of mental health, but promoted the use of mental health work within the YOS and had some concerns about social justice, or fairness within the service.

"I think it's been developed within this team actually over a number of years. Erm, and we as health workers, now and in the past, have, I think it just fits our value system in a way. The organisation was run, was being run, by some very experienced social workers, they've been around for a very long time" – William, Woodshire

"engage in dialogue with the workers, and as a result, definitely from my supervisions with other staff, I get far less grumbles about CAMHS, far better outcomes and better understanding of the CAMHS process, because it isn't just one way." – Luke, Edgeham

Higher resource levels and managers more committed to social justice would be expected to deliver better outcomes, however, from the interviews it seems that managers developed these concerns after problems occurred in practice. Following the recognition of these problems managers actively sought higher resource levels or more targeted resources. The relationship between social justice and problem solving does seem to be reciprocal. This does not negate the

argument that the YOS should work to make its structures more socially just though, instead it emphasizes the need for research into youth justice to consider the philosophical and theoretical aspects of justice and how they impact practice. Whilst it cannot be said with certainty that implementing socially just structures within youth justice will lead to improved practices, based upon the results of the case study, it can be said that YOTs which are aware of and concerned with social justice are better placed to meet the needs of young people.

One of the key ways in which social justice impacts practice is the perception of problems. In the YOTs that considered social justice or worked in a socially just manner, more existing issues were recognised as problematic than in YOTs that took a more criminal justice approach. An example of this is low level mental health issues such as anxiety or depression. Some mental health workers considered these as worth assessment and intervention to help that young person, and to potentially prevent the issue from worsening, or contributing to reoffending. Other mental health workers did not assess or refer for low level mental health problems, as they considered them either not the responsibility of the YOT, not related to the offending behaviour of a young person, or not significant enough a problem to warrant attention. Conduct disorder was a specific example of this. Those YOTs that did consider this a problem were creating a higher number of assessments for mental health workers, however, they were also giving young offenders the opportunity to access services they may gain benefit from. This satisfies the Equality principle, and so is socially just practice. As mental health is strongly linked to re-offending it is also in the benefit of the YOS. Some of the YOTs did not deliver interventions for low level mental health problems as there were limited resources. This creates an inequality that is not based upon greater need, and therefore does not satisfy either the Equality or Need principles. In some YOTs thresholds were raised for what mental health problems were to be considered as it was not possible to attend to lower level needs whilst also meeting the needs of those above the threshold. Whilst this may be construed as satisfying the two principles, the reason for raising the thresholds was the capacity of the service, opposed to greater need. As Rawls drew upon Kant's moral imperatives in his work, applications of this theory must recognise that the reasons behind decisions impact on whether they are just or not. Funding cuts have also impacted practice and caused thresholds for what is considered an acceptable level of need to be raised. It is concerning though that in YOTs where low level mental health problems were not addressed, the language which these problems were discussed differed from that of other mental health workers. Problems like anxiety and depression were minimised, being referred to as aspects of being a teenager opposed to being considered as 'real' mental health

problems. One interviewee explicitly chose different terms for certain issues, differentiating between a disorder and a problem.

> "only a small minority of those young people will have a mental health problem, you know, when you kind of filter if down into the youth offending team, I think we discussed last time a big proportion of those will have a mental health element to that, whether it's a disorder or an illness, or just an emotional wellbeing kind of issue that's quite transient." – Dan, Westley

The ability to practice in a socially just manner affects the identity of mental health workers as well as practice. Working identities are important as they shape an individual's approach to their work and how they view their role (Jones and Baker, 2009; Jones et al., 2004). The mental health workers who were in a socially just environment identified as mental health workers, and identified with mental health approaches and views. This is in contrast to those who were in YOTs that were highly criminal justice oriented. These mental health workers had come to identify with the YOT and in one instance had taken on a YOT caseload. The development of professional identities is complex and impacted by a number of factors. Once developed, identities become important to individuals and are resistant to change (Rutherford, 1994). If a working environment doesn't recognise the validity of a variety of identities, this limits the professional judgement of individuals and can cause problems if an individual's identity is not compatible with the approach requested/required by the environment they work in. Whilst this issue occurs to some extent within any workplace, mental health in particular required greater freedom to express professional identities. Westley YOT was highly criminal justice oriented, and took a highly medicalised view of mental health. This meant that certain mental health problems such as depression or conduct disorder were not acted upon, and there was pressure on Dan to conform to this view.

> "So a lot of those conduct disorder oppositional defiance, naughty behaved children, it's kind of bread and butter to the kind of, the youth offending team workers" –Dan, Westley

A social justice environment allows individuals to choose their identity freely, as encouraging opportunity and maintaining individual rights like choice are part of social justice (Ellis and Boden, 2000; Fournier, 2002). It could also be the case that the mental health workers had specifically remained within YOTs where the working culture suited their own identity. Almost

all those interviewed had worked in other YOTs previously, and this may have impacted upon their views of the environments they were comfortable working in. Of those working within socially just YOTs, mental health workers stated that they would not be comfortable working within a different dynamic, and that through their experience within the YOT, working culture had become important to them.

> "I would find it very difficult to work in an environment that didn't have that [approach]. So I kind of, it just kind of […] there may well be other positions but it's something I don't enjoy." –William Woodshire

The tensions between YOTs and CAMHS have been well documented (Fergusson, 2007; Smith, 2005), and working culture seems to have a significant impact upon this. Encouraging socially just structures within youth justice way be a way to relieve those tensions and allow mental health workers to have better working relationships within YOTs, clearer guidance around how their role fits into the YOS, and greater capacity to meet the needs of young people.

The case study identified numerous different ways of working and factors that affected practice. Examples of this contributed to the 'factors that affect practice' theme (*See Page 150*). Differences in working practices and approaches impacted on objective markers of results, like reported outcomes and re-offending rates, and more subjective factors like workers satisfaction. This seemed to relate to the use of socially just practice. Those YOTs that satisfied the Equality and Need principles in relation to provision of mental health services were better able to meet the needs of young people, better able to support staff, and reported low levels of re-offending. YOTs which were not able to satisfy the two principles frequently had issues reoccur within practice, mental health staff reported feeling unsupported, and it was apparent that practice did not go beyond meeting the basic levels of mental health need. The exact nature of the relationship between social justice and improved practice is unclear regarding cause and effect, establishing a link between the two is useful. Adopting aspects of socially just practice can be useful for YOTs to improve. Specifically, socially just practice relates to ensuring that practice is fair and accessible for young people, and also fair for those working within YOTs.

*Justice as Fairness is Applicable to the YOS*

Whilst the focus of this work has been social and criminal justice in mental health practice in the YOS, justice as fairness is applicable to the YOS as a whole, rather than just mental health work within the YOS. This is because, many of the issues between mental health and youth justice are caused by differences between the two, and justice as fairness uses principles as a basis for practice. If this were only applied to mental health within the YOS, there would still be differences between the two practices, and whilst some issues may be resolved, this central problem would not. Additionally, underlying principles would not be effective if limited to one specific aspect of an organisation, as they would not be creating a basis for practice to build upon. This is the reason for the generalisation of applying justice as fairness to the YOS as a whole.

Rawls's version of social justice (1971) has been used within this work, and as it specifically addresses application to institutions and organisations, this is an appropriate choice. It is recognised though that there are a variety of views regarding social justice (such as Hobhouse, 1922; Machan, 1985; Mill, 1863; Nozick, 1993; Sandel, 2010), however, justice as fairness is best suited to be applied to social institutions. Rawls created stages for creation of a society, and processes through which principles could be created to guide that society (*See Page 21 for further detail*). Whilst these have been criticised as being inapplicable or unrealistic on a societal level (Daniels, 1975; Kukathas and Pettit, 1990), for application to an organisation or institution, they are apt. Other approaches to social justice do not have set procedures in this way, which makes them less able to structure organisations like the YOS. Additionally, justice as fairness is an egalitarian theory; it defines social justice as equality of opportunity (Rawls and Ward, 1985; Rawls, 1971). This is compatible with the political system within which the YOS must operate, and is also sympathetic to the aims of the YOS. Utilitarian approaches would not be appropriate in this setting, because if the YOS strived for the happiness of young people, this would be incompatible with the criminal justice aspects of the organisation, as these would likely limit the happiness of individuals. Similarly libertarian approaches would not be an acceptable basis for the YOS, as the emphasis would be on merit or effort, which overlooks the context of what contributes to youth offending, and that certain structural aspects of society limit what options are available to young people who are likely to offend.

Two principles are central to justice as fairness. Rawls used a thought experiment to determine two principles which would be agreeable to all persons within a society (Rawls, 1971). The first of these established equality for all citizens, and the second expressed that inequality was only acceptable when it favoured those most in need. Within this work these two principles were adapted for the purpose of underpinning mental health work within the YOS. The two principles could be adapted to any organisation with a set aim. Application to the YOS is particularly apt because of the role the organisation plays within society, and also because the of the role of the underlying philosophy of the YOS. Youth justice is a political priority (Bottoms and Dignan, 2004), and an important aspect of the role of the state. As part of the social contract, the state has a duty to protect citizens rights from being infringed by crime, and also to protect children and young people from harm, allowing them to develop into upstanding citizens. Youth justice is involved in helping achieve both of these duties; addressing the offending behaviour of young people, and providing them with the support necessary to prevent future offending. Ensuring that this role is carried out in a way that balances both social and criminal justice is imperative to ensuring that it meets the requirements of the social contract between the state and its citizens. John Rawls's theory of justice as fairness is based upon social contract theory, making it appropriate to use in this context. Additionally, justice as fairness recognises that in carrying out the actions necessary to fulfil the social contact, the state must act in a way that meets the standards of morality set within society (Lovett, 2011; Rawls, 1971). This is an important point when applying justice as fairness to organisations, as it implies that the ends will not justify the means if they came about through immoral actions. This again emphasizes the need for balance between social and criminal justice, and also underlines the need for set principles to guide practice.

The philosophical underpinnings of the YOS have not always been evident in practice. Initially the YOS had clear underlying principles to guide practice, based on evidence-based practice, and clear aims for practice. However, this was not consistently applied across the YOS as a whole, and so these principles do not fulfil their purpose of underlying and guiding practice. From this, confusion has arisen regarding the purpose and aims of youth justice work, and tensions between the differing views have occurred (Goldson, 2011; Muncie, 2010; Smith, 2005, 2011). Creating transparent and consistent principles to underpin the actions of the YOS would remove this confusion and allow practice to be unified and operate on the same basis

nationally despite differences in resources and approaches on a local level. This would allow young people to receive a comparable service regardless of the YOT they were involved with. Rawls's theory of justice as fairness is unique in having set principles as the basis of action, with a clear description of how these principles were arrived at. This allows adapted versions of these principles to be created for organisations or institutions. Other approaches to social justice do not make explicit how their ideas could be applied in an organisational context. This makes Rawls's work the most applicable.

## The Impact of Mental Health Provision on Social Justice

The findings showed a relationship between mental health provision in the YOS and social justice. The main ways in which this occurred was the ability to balance social justice, and the ability to overcome issues. Certain forms of mental health provision allowed mental health and youth justice workers to meet basic need, meaning they had greater capacity to consider broader issues, such as social justice. Whilst this may not have happened explicitly, the YOTs which did consider social justice better satisfied the Equality and Need principles in practice than the YOTs which were focusing on meeting basic need.

### *The Ability to Balance Social and Criminal Justice*

The case study identified different forms of provision, supporting research showing that there is a lack of standardisation across the YOS regarding mental health provision (Callaghan, Pace, et al., 2003; Khan and Wilson, 2010) The examples of these forms of provision found in practice displayed different abilities to balance social and criminal justice (*See Page 130*). That these forms are distinctive and some occurred in more than one team, suggests that there are common formats that have emerged in providing mental health care through the YOS. It is interesting that despite the flexibility given to YOTs in creating provision similar types of provision should occur. This does not necessarily imply that there is a particular form of provision that works best for YOTs or is best suited, but more likely suggests that in uncertainty about how to provide mental health care. Managers in the YOTs requested mental health workers be seconded from CAMHS as it was the more obvious and accessible option. Beyond this though, it seems that in a number of teams there was little consideration of how mental health provision was to be implemented or fit in with the existing structures of YOTs. In some instances there had been

greater consideration of how provision should occur and what would be most effective. This seems to have been due to managers who were invested in the idea of providing comprehensive mental health care through the YOS. Managers in Edgeham, Stoneycombe and Woodshire YOTs all exemplified this. Through their previous experiences and personal views of mental health, they considered it an important aspect within the YOS and had clear ideas about what provision should look like and achieve.

> "I think for me [pause] it was probably about […] the high level of training and experience that clinical psychologists have in particular when working with the client group that we have. Erm, so I felt that a clinical psychologist was the best position for experience and knowledge based post really to work with this client group." –Joanne, Stoneycombe

Increased consideration of what provision was necessary also occurred due to problems occurring in practice and certain types of provision being considered ineffective by those within YOTs. Midcaster was an example of this, where Naomi's dissatisfaction with seconded formats caused her to create a new approach to provision. Similarly, Luke in Edgeham was aware of issues in practice and tensions between mental health and youth justice workers and implemented strategies to overcome this. The involvement of CAMHS in the decision making process of creating provision seems to have been crucial also. The YJB has not improved upon guidance for mental health provision beyond the initial directive that YOTs provide mental health care. At present the provision of mental health through the YOS lacks accountability. Some YOTs have created accountability measures themselves, but a service-wide standard is necessary. Organisations and researchers involved in youth justice have looked into these issues with some success (Callaghan, Pace, et al., 2003; Callaghan, Young, et al., 2003; Khan and Wilson, 2010; Khan, 2010b), but greater understanding is needed, as is the involvement of the YJB, as they have the ability to create change within the YOS as a whole.

Some of the forms of provision helped create a balance between social and criminal justice, whereas others did not, and in some cases may have made tensions between the two approaches more explicit. The examples of the health team within a YOT provision displayed the greatest balance of the YOTs within the case study. The example of foot-in-foot-out provision was the least balanced (*See Page 115 for further discussion*). These differences are not inherent within each form of provision; the views and approaches of the individuals involved, and the working culture within each YOT has a large impact. For example, Brookshire and Northdale YOTs both

used the same form of provision (lone worker), but due to the levels of support from managers and the identities and approaches of the two mental health workers, each had a very different experience of working within the YOT as a mental health professional. However, it does seem that the YOTs which adopted forms of mental health provision which displayed less ability to create balance were already more aligned towards criminal justice. The choice to not create more accessible or substantive provision is evidence of this.

The forms of mental health provision that occur in practice mirror those proposed by Khan and Wilson (2010). Whilst not all the YOTs in the case study were exact duplications of Khan and Wilson's examples, the similarities were enough that the proposed models can be taken as ideal types. The main differences between the given descriptions of the forms of provision and the YOTs who participated in this research were that resources were not as extensive as in the descriptions, and that some YOTs had adapted or altered their provision to be more efficient. It is to be expected that some changes would have occurred since the original survey took place, particularly as there have been funding cuts across youth justice within this time. As the YOTs participating in the research had provision that could be identified with the given forms of provision on a variety of distinct features, including number of mental health workers, professional backgrounds, and structure of provision, it was deemed that Khan and Wilson's (2010) theory was still applicable. Gaining support for this work is important as at present there is little research looking directly at the provision of mental health services through the YOS, thus a theory of the types of provision that occur is useful for both further research and practice. In terms of research, having this basic understanding of what types of provision exist, further work can be done on the differences between each type, what makes some more effective than others and so on. For practice, the examples created by Khan and Wilson could act as a guide for those creating or re-structuring mental health provision; they show what exists and what the impact of each is. Managers within YOTs can see what benefits and problems each type of provision presents and make an informed decision about what would be most applicable within their area. This work builds upon Khan and Wilson's not only by providing support, but also through creating understanding of how provision is created and how each type impacts upon social justice in practice. One key aspect that must be established though, is the prevalence of each form of provision. Whilst establishing what types of provision occur is useful, without knowing their prevalence, any conclusions taken from work regarding provision are limited. In this work it is suggested that the lone worker format would ideally be phased out within practice, as it does not lead to effective working or just provision. But this is not practical given

the current political and financial climate. Until the YOS is in a situation where more resources are available and the suggestions for change can be carried out, the strategies given in the findings (*See Page 173*) are likely to have a positive impact on practice and improve the balance between social and criminal justice. Understanding the prevalence of each form of provision can highlight how widespread problematic provision like the lone worker model approach is; if lone workers are one of the more common forms of provision in practice, this is a large problem for youth justice, whereas if it is rarely used, research needs to look to other factors that may be causing mental health provision in the YOS to be inadequate.

One of the main features of the YOS is change (Cavadino and Dignan, 2006). In the four years since Khan and Wilson theorised forms of mental health provision (2010) there have been a number of changes to youth justice, particularly the YJB becoming part of the Ministry of Justice (Puffett, 2013). This does not seem to have impacted upon mental health provision and Khan and Wilson's theory is still applicable. Some YOTs in the case study had previously had to change their mental health provision due to funding cuts, staff changes or wanting improved efficacy. In these instances, provision was usually improved, moving from lone worker models to those with greater resources, or following assessments of what provision was necessary; creating more applicable services for that area. Woodshire YOT was a particular example of this. This prior form of provision consisted of two highly qualified psychologists receiving a pay grade commensurate with this. However, managers within the YOT were not sure what role they wanted these mental health workers to fulfil. This resulted in a very costly form of provision that did not work in a way that was useful for Woodshire YOT. During a period of financial change in Woodshire, the mental health provision was reconsidered, and following discussions with CAMHS it was decided that the needs of young people in Woodshire could be met by 3 professionals with lower levels of qualification. Through being forced to reconsider mental health provision due to financial pressures, managers at Woodshire YOT considered what they wanted from mental health services, and arrived at a more appropriate form of provision for their area. Additionally, social justice was considered more in these instances, as differences between mental health and youth justice approaches had contributed to problems which led to change being required. The breakdown of relations between the YOT and CAMHS in Edgeham is an example of this (*See Page 119*) This created a balance between social and criminal justice in practice, and seemed to be beneficial. The YOTs that had not adapted their provision to balance social and criminal justice faced more problems in practice. Surprisingly, where these changes had occurred, the mental health provision still conformed to one of Khan

and Wilson's (2010) types. However, as funding cuts are becoming more widespread, changes are being considered in terms of value for money, and as such, those within the YOT are being asked to do more within their time. An example of this is the mental health workers in Newkirk, who each had to devote one day a week to delivering services in local schools. This impacts negatively upon both social and criminal justice, as access is reduced for young people, due to increasing demands on both youth justice workers and mental health workers reducing the capacity for detail to be sought and relationships to be built with young people.

All the forms of mental health provision outlined by Khan and Wilson (2010) are useful and an improvement from the previous situation within the YOS where there could have been no mental health provision at all. Some of the forms are ineffective at balancing social and criminal justice though, and are unlikely to satisfactorily meet the needs of young people. The lone worker approach in particular is a problem, as it requires one mental health worker to assess, refer, and treat vulnerable and complex young people across a large geographical area alone. It is unlikely that this type of provision would be successful in meeting the needs of young people even if the conditions surrounding the provision were ideal. This is simply because by having only one mental health worker in a YOT, there is a severe limitation upon access. If that person is unavailable due to being away, ill, or simply visiting a young person; they are inaccessible, at those times the YOT has no form of mental health care. This means that emergency situations could not be dealt with as quickly as if there were two or more mental health workers in the YOT. Additionally, there are fewer opportunities for discussion between mental health professionals and youth justice workers. Working in the YOT meant a large amount of travel for a majority of the mental health workers interviewed, as they were unwilling to meet young people in the YOT offices; as this would link a voluntary intervention with mandatory criminal justice work. These high levels of travel meant that mental health workers were not often able to stay in the office to discuss cases with youth justice workers informally. In the YOTs where there was more than one mental health worker, this made it easier for these discussions to take place, as there was more likely to be a constant mental health presence in the YOT. Whereas for the lone worker, this becomes difficult, and contributes to their isolation from the rest of the team. This is not socially just for either young people, who are receiving limited access due to lack of resources, and for the mental health workers themselves, who face a large amount of pressure to meet the needs of young people, which may not be possible for a single person to do in a limited time frame. This approach means that unless managers and youth justice workers have a particular interest in social justice or mental health, it is likely that criminal justice will

be prioritised over social justice. Both examples of lone worker provision in the case study showed this.

It needs to be mentioned though, that the two lone workers in the case study identified differently, and this strongly affected their work and how the relationship between social and criminal justice was perceived. The lone worker who identified with the YOS, did not have any issues with meeting young people for mental health interventions in the YOT offices, which thus meant less travelling and more accessibility for YOT staff. Having higher thresholds for what was considered to be a mental health problem also meant there were fewer demands on the lone worker, which made meeting the needs of the young people above that threshold more manageable. This in essence sacrifices a higher level of social justice for improved efficiency. Whilst financial cuts are inevitable, this will result in the overall needs of young people not being met, and thus the aims of the YOS not being met also. Based upon the established link between mental health problems and re-offending (Crawford and Newburn, 2013), favouring efficient practice over socially just practice may in fact be a false economy in the long term as those with unmet mental health needs are more likely to re-enter the YOS or enter the adult justice system in later life.

The issues with the lone worker form of provision also apply to the foot-in-foot-out format, if this uses only one person. Whilst the foot-in-foot-out approach can occur on a job share basis, or with two people, the YOT in the case study using this approach had only one mental health professional. This YOT had similar problems regarding access as the lone worker approach presented. Accessibility was a particular issue, again if the mental health worker was away or ill there was a highly limited access to services. In this YOT the mental health worker was effectively "on call". They spoke of being accessible via mobile phone at all times in case of emergency. This meant that interventions with young people could be cut short if an emergency occurred and the mental health worker was needed. This highlights the need for better levels of resources regarding mental health provision in the YOS. A single worker will not be able to meet the various needs of both young people and the YOS on their own. It should be a requirement that there is a minimum of two mental health staff in each YOT. However, this is unlikely to occur and is not a practical solution in the current financial climate. Contingency plans need to be established between YOTs and CAMHS regarding the absence of mental health professionals. This could be that for the duration of the absence, CAMHS seconds

another mental health worker into the YOT, although this may present problems regarding knowledge of YOT procedures. Alternatively, during absences of the mental health worker, youth justice workers could be able to make direct referrals to CAMHS. This does create extra demand upon those within CAMHS though, and the case study also established that there are some issues regarding CAMHS accepting young offenders for referrals. For this to be successful, positive relationships would need to be in place between the two organisations. These are imperfect solutions in terms of organisational considerations, but would ensure that young people's needs were not overlooked during these periods, thus creating some form of balance between social and criminal justice, and ensuring that basic needs are met. Of course, this problem does not have as large an impact outside of the lone worker and foot-in-foot-out approaches. The greater levels of provision should still be a long-term aim, as they overcome these problems, but contingencies need to be created prior to that aim being reached.

At the other end of the spectrum of provision is the external one-stop-health-shop. This format was created out of dissatisfaction with seconded lone worker approaches and the lack of accessibility they create. Whilst this form of provision has very high resource levels, it is not without problems. Tensions remained between social and criminal justice in Midcaster, as the external mental health service had completely removed direct social justice work from the YOT. The balance between social and criminal justice still needed to be negotiated to allow the two organisations to work together effectively. Having a specific mental health provision for young people with high levels of expertise and resources was working well, but the relationship with one YOT in the area was less successful. There were suggestions that youth justice workers wanted to be able to speak with mental health workers more easily on an informal basis, and would prefer to have some mental health provision based within the YOT. The manager of the mental health service was highly resistant to this, having experience as a seconded lone worker and strongly disliking that format of provision. This was a source of tension between the YOT and the external one-stop-health-shop. Whilst having a specialist mental health service for young offenders was beneficial, there needs to be strong links to the YOT as this service is essentially why mental health provision outside of CAMHS is necessary. If the two fail to agree about how provision occurs, problems will arise in practice. In the case of the external one-stop-health-shop, they received a low number of referrals from that YOT, or often referrals were inappropriate. When constructing provision, it must be made clear what the needs of each service are, so that they can be either met, or compromise can be reached so that services can work together effectively. Transparency is an important aspect of social justice (Rawls and

Freeman, 1999), and to create a transparent agreement between two organisations an honest discussion about the needs of each must occur. Edgeham YOT is an example of this form of discussion happening successfully, allowing compromise to occur and a balance between social and criminal justice to be achieved. Whilst theoretically, the external one-stop-health-shop should allow for high levels of social justice, the problems in the relationships with the YOT hindered this. This emphasizes the need for both organisations to make their expectations clear and create an agreement; tensions in the relationship can impact upon social justice, the service young people receive, and thus criminal justice also. If young peoples' needs are not met due to receiving a lesser service, they are more likely to re-offend (Currie et al., 2011; Webster, 2006). In order to be meeting its criminal justice aims, the YOS needs to be giving young people social justice within the service.

*The Ability to Overcome Issues in Practice*

Mental health provision is an important aspect of youth justice at present, with the potential to reduce offending and allow the YOS to better meet its organisational aims. That it has not been considered fully how mental health work would be integrated into youth justice has caused problems in practice. These problems impact not only on young offenders, but also those working within the YOTs. From the case study it seems that mental health provision is more successful within YOTs when operating on a socially just basis. Whilst some questions of providence and causality remain on this subject, this work has established that there is a relationship between social justice and mental health provision, and improving either of these is beneficial for practice as a whole.

Regarding how the various forms of provision have occurred, it seems that there are a number of distinct features that affect the creation of mental health provision within YOTs. Drawing from the thematic analysis of the interviews, a model of how mental health provision occurs within the YOS was constructed (*See Page 139*). This highlighted one of the key aspects that affected what provision would occur: the involvement of CAMHS in the planning. The YOTs that worked with CAMHS in creating and structuring mental health services within the YOT had more effective provision, and were better able to meet the needs of young people. Those that did not involve CAMHS in the planning of provision had lower resource levels and poorer

links between the two organisations. The contrast between these two approaches was exemplified by Midcaster and Westley YOTs. In Midcaster decisions regarding the structure of mental health provision for the YOS lay entirely with Naomi, a manger in CAMHS. This led to a very specific set-up where mental health provision for the YOT was highly resourced and entirely separate to the YOT. Conversely, in Westley discussions with CAMHS regarding provision were limited and Dan, the seconded mental health worker had to alter his approach to fit in with the YOT. Beyond the involvement of CAMHS, resource levels themselves played a key role in shaping provision. The combination of these two factors was interesting, because the YOTs that had low levels of resources available, but involved CAMHS in planning the provision, seconded more mental health workers and created more resources than the YOTs who also had low levels of resources available but did not involve CAMHS in the planning process. It seems that by having CAMHS involved in the planning process, concerns of social justice are represented. The overall impact of this representation is that a balance can be struck between the needs of social justice and criminal justice, and provision is more effective for the organisations involved in meeting the needs of young people. However, from the example in Midcaster it is clear that there needs to be a balance between the requirements of both the YOS and CAMHS.

By involving people with specialist knowledge of mental health more appropriate provision was created, even if resources were at a high premium. The decision to involve CAMHS in the decision making process seems to have been driven largely by managers in YOTs. The views of managers regarding mental health vary, depending on knowledge and experience. Those with a knowledge of and interest in mental health were keen to include CAMHS in the process of creating provision, whereas managers who had little experience or knowledge of mental health did not, or discussions were limited. This is not a point of fault for those managers, their role does not necessitate that they have knowledge of mental health. The YJB should have recognised this and given clearer guidance to managers regarding creating provision, or suggested that CAMHS be involved in this process. The impact of these decisions was striking. The YOTs that involved CAMHS in the decision making process not only had higher resource levels, but there was a greater concern about how mental health provision was to fit in with existing YOT structures. This led to better relationships between the two organisations and gave mental health workers more support. The YOTs where CAMHS had not been involved in the decision making process faced more problems regarding mental health practice, the majority of which impacted most strongly upon mental health workers in seconded positions. These teams

utilised forms of provision that meant that mental health workers were more likely to be isolated and subject to drifting roles; such as the lone worker or foot-in-foot-out approaches. These YOTs also held working cultures that were less open to different approaches. This could be due to the precedents set by managers which also led to the non-inclusion of CAMHS in decision making. An exception to this was Northdale YOT. Resource levels were limited in Northdale CAMHS, which led to the use of the lone worker approach. Discussions between the YOT and CAMHS did occur though, and the resulting relationship between the YOS and CAMHS allowed Liz, the seconded mental health worker, to feel better supported. It can be implied from the case study evidence that incorporating aspects of social justice into the practice and provision of mental health services in the YOT, such as equality of access to services and using need as a basis for decisions rather than resources, is positive. Those YOTs that had addressed social justice concerns were using resources more efficiently, had better inter-agency relationships, mental health workers felt better supported, and seemed better able to meet the needs of young people regarding mental health.

Certain issues emerged from the literature as being problems within YOS practice regarding mental health. These issues were used as a starting point for discussions during the data collection phase of the research. From these discussions it became apparent that the issues identified in the literature, relating to assessment, referrals, and interventions, were present in the YOTs in the case study. However, these issues were not the most pressing or problematic aspects of practice for them. The issues identified by the literature are built into working in the YOS to the point where they are highly unlikely to be changed. Mental health and youth justice workers have found ways of working around these issues rather than attempting to change them. These aspects are tied in to the structure of the YOS and the standards set by the YJB and so are difficult for those on the 'front line' of the service to affect or alter. This is why the findings created separate strategies and suggestions for those in YOTs and the YJB. The problems identified by the literature were considered to be part and parcel of working within the YOS. Other issues were identified by mental health workers as being more problematic and having a greater impact upon their working lives. These included time constraints, lacking resources, and a lack of understanding of mental health within the YOS. Why these issues are generally not given as much attention in the literature, or addressed by the YJB should be understood. It is possible that it is because they are more qualitative in nature and so are less likely to be

considered by the 'what works' or 'evidence-based practice' standards (Prior and Mason, 2010; Senior, 2011). Moves towards these standards have been criticised as overlooking valuable information, particularly from qualitative work (Burnett and Roberts, 2004; Prior and Mason, 2010). The impact of this is that the studies that are considered in evidence bases tend to look at effect size or factors linked to offending. This means that there is less consideration of the variety of approaches and viewpoints in practice and social justice approaches in particular are at risk of being minimised.

The literature identified assessment, referral, and intervention as the main areas where problems occurred in mental health practice in the YOT. During the interviews, mental health workers did express that these were issues within practice for them, but not the most pressing. Critiques of assessments within the YOS generally focus upon the Asset, SIFA and SQUIFA and their efficacy (Nacro Cymru, 2007). Some mental health workers did agree that these are not effective assessment tools for identifying young offenders' needs. The Asset was still accepted for use within the YOS though, as it is part of the standards given by the YJB. The SIFA was largely unused and the SQUIFA was used by youth justice workers as the basis for a referral to a mental health specialist, but the reason for this again seemed to be due to YJB guidelines and standards opposed to finding the tool useful.

> "I've found a young person that was quite depressed actually, and had scored 0 on a SQUIFA. So, I'm not convinced it's a great tool. In fact I don't think it is at all. Sorry to say." –Sarah, Brookshire

All of the mental health workers interviewed used additional assessments that they had come across either in their training and education, or through working with CAMHS. By mandating that specific assessment tools are used, the YJB is overlooking the professional judgement of mental health workers, and also the variance of mental health problems. There are a vast array of mental health assessment tools, with many for specific issues or disorders. Whilst assessments for general mental distress are valid, those selected by the YJB seem to be too vague to give any helpful information to mental health workers about a young person. From this mental health workers then have to carry out further assessments. This duplication of effort could be avoided by the YJB reassessing their guidelines for mental health practice within the YOS, or by allowing other assessments to be used in place of the SIFA and SQUIFA if deemed necessary by mental health professionals. Perhaps a list of accepted mental health assessment tools could be created for the YOS, to allow mental health workers to use their professional

discretion in choosing assessments based upon the context of each case. The issue of assessment though, is one that requires a long-term solution coming from the YJB, opposed to something that can be altered by those within individual YOTs. So this issue is worked around by mental health and youth justice workers and taken as an aspect of YOT practice. This means that those working within YOTs have to duplicate their efforts regarding assessment. This also means that young offenders are dependent upon those within YOTs to go beyond standard practice to have their needs assessed and thus understood in a way which will lead to meaningful treatment. This equality is socially just. YJB mandated practice should be enough to identify needs, whereas at present it is not.

The referral process has also been discussed in the literature as being an area requiring change within the YOS (Burnett and Roberts, 2004; Fox and Albertson, 2011; Senior, 2011). Referrals to CAMHS were described by mental health workers as difficult, but were again considered simply as an aspect of the job opposed to a specific problem requiring action. Partially due to tensions between the two organisations, disagreements over what form mental health provision should take, and differing approaches, relationships between the YOT and CAMHS were fractured in a number of areas. The relationship between the YOT and CAMHS in Edgeham had previously broken down completely and mental health provision was withdrawn. In addition to this, young offenders are not considered a priority in CAMHS, with a number of interviewees mentioning that CAMHS staff were uncomfortable or unwilling to work with young offenders, holding stereotyped views of them being violent or frightening.

> "I think they don't they think we should be providing a role in a service for offenders. Criminal justice, some are really into it and think it's absolutely for everybody and some just think they should be dealt with elsewhere."- Annie, Newkirk

> "CAMHS say yeah, lock them up. Lock them up. Get them out of our lovely clinic, they're not grateful [laughs]" -Beth, Newkirk

If views like this are prevalent through CAMHS culture as a whole, it may be a factor in why young offenders have problems engaging with mental health services (Baker, 2005, 2014; Wilson, 2011). Some interviewees expressed the view that CAMHS often sees young offenders as undeserving of help, and that they should be dealt with solely in the criminal justice system. This led to a de-prioritising of YOT referrals to CAMHS, and so young offenders were placed on lengthy waiting lists. The main issue with this was that the waiting list was often longer than

the length of a young person's time with the YOT, and so they did not receive access to services at all. Additionally referrals were complicated by the fact that CAMHS does not accept any of the assessment tools insisted upon by the YJB. Mental health workers did not see this as a structural issue with the YOS and the partnership with CAMHS, but simply as an aspect of their work.

That issues occur within core aspects of practice like assessment and referral outlines how the partnership with CAMHS was not fully considered by the YJB. One of the main aspects of mental health work in the YOS is meant to be making referrals to CAMHS, that this process is hindered by the YOS guidelines and CAMHS staffs views of young offenders shows that there has not been a high level of discussion between the two agencies about how this partnership would work in practice. That all the interviewees had experience of these issues also suggests that this is a trend throughout the YOS as a whole. The majority of mental health interventions for young offenders are meant to be carried out by CAMHS, however, in practice this does not occur. Mental health workers seconded to the YOS carry out a large number of interventions themselves. All the interviewees had similar experiences on this point. This means that the types of interventions available to young people are limited by the knowledge of individual mental health workers. In an external one-stop-health-shop form of provision, this may not be as problematic, as there would be a large team of mental health professionals with a variety of specialisms. Contrasted with a lone worker form of provision, this shows how limiting carrying out interventions in-house can be, and the problems of having only one mental health professional within a YOT. Lone workers will still have specialist knowledge and skills, such as Sarah's knowledge of EMRD. However, it cannot be expected for a lone worker to have knowledge of all possible interventions and approaches that may be relevant. Additionally this shows the ways in which young offenders' access to services is limited, and the services received are not equal. Mental health interventions are highly varied and not all will work with every individual. Thus having access to a variety of interventions is important and a necessary aspect of meeting needs.

There were a number of issues that emerged from the interviews that could be changed within YOTs on a local level, that may lead to improved or more effective practice. One of the main problems described by mental health workers was the lack of understanding of mental health by those within the YOS. This impacted upon relationships within the YOT, the ability to work

effectively, and the service that young offenders received. Where there was a lack of understanding of mental health, it was reported that referrals were more likely to be inappropriate, or not occur when they would be appropriate, that discussions between mental health and youth justice workers were less frequent, and in one extreme case, that a youth justice worker refused to acknowledge a young person's mental health need (*See Page 151*). The problem of a lack of knowledge or understanding of mental health creates much larger problems regarding social justice. If young people are receiving limited access to mental health services due to issues of knowledge, this means that the YOS as a whole is not doing all it can to meet the needs of young people. It also suggests that the Equality and Need principles are not being satisfied. Not all youth justice workers will have the same ability to recognise and refer a young person for mental health assessment, meaning access is not equal. This inequality is based upon youth justice worker's knowledge, rather than need, suggesting that this is unjust. That these issues have not been acted upon by the YJB suggests that they do not monitor practice and understand what requires improvement. Another possibility is that these issues have been noticed, but are not recognised as problematic enough to act upon, showing the overall imbalance between social and criminal justice in the YOS. This means that the YOS lacks accountability, there are problems within practice on a large scale, which could be changed, but are not being recognised or acted upon. The problem of knowledge is something that could be simply resolved through training, ensuring that youth justice workers and managers have an understanding of what mental health is, and how it is relevant to their work. Training for CAMHS about the role and needs of the YOS would also be beneficial in overcoming differences. This would mean that there were improved referrals to mental health workers, and that the mental health needs of young offenders would be less likely to be overlooked or missed, thus improving their access to services. This typifies the issues identified by mental health workers that didn't relate to the structure of the YOS, small, practical problems that could be resolved relatively simply, or could not have occurred at all if the implementation of mental health workers into YOTs had been more extensively planned.

There were a variety of problems that face mental health workers within YOTs that were not structural in nature, but cultural. One of the more concerning of these was the time constraints placed upon mental health workers. As the YOS often has to act quickly to situations, and much of their work does occur on limited time lines, a culture of speed and certainty has developed.

"it's very much a do do do, now now now, we need this assessment, share information, swiftly and record all information" –Luke, Edgeham

Whilst there not an inherent problem with this, it can create difficulties when working with other agencies that do not have this culture. Mental health in particular in not a 'quick' process, there is often not a definite end-point where an individual is 'cured' as with physical health. When working within the context of youth justice, there appears to be an expectation that mental health workers will conform to the fast-acting culture of the YOS. This causes a number of problems within practice, as often mental health work cannot be 'quicker'. What happens to young people receiving mental health interventions when their time with the YOS comes to an end is a particular issue. The mental health workers in the case study had developed their own strategies to cope with this, but none of them were entirely satisfactory. For example, Sarah kept working with some young people once their time with the YOT had ended. This meant that this work was not managed, or accountable to either the YOT or CAMHS. The problem of time constraints underscores both the lack of planning of the multi-agency approach, and the lack of accountability regarding practice within youth justice. That it wasn't considered that mental health work rarely takes place on a short time scale, and no contingency plans were put into place is indicative of a lack of discussion regarding how multi-agency work like mental health provision would occur on a day to day basis. This raises questions of how the YJB expected multi-agency practice to work, and if the devolution of decision making power to individual YOTs on a large scale is useful. Additionally, that these problems are occurring consistently across youth justice, and that mental health workers, youth justice workers, and managers are aware of them but no guidance or strategies have been put in place to address the situation; shows that the YJB doesn't monitor practice effectively. There is a lack of accountability within youth justice to the point where young people across the country can receive a very different service, but this is not acted upon.

Forming links between the YOS and CAMHS seems to be crucial for mental health workers seconded to the YOS. Having support from both within the YOS and from CAMHS allows mental health workers greater confidence in their decisions, opportunity for further training and maintenance of skills, and helps create a sense of belonging, fostering professional identities. If support for mental health is not present within the YOT, it is even more important that support can be gained by CAMHS. Where CAMHS did not offer seconded workers enough support, role drift was more likely, for example in Westley, Dan noted that members of CAMHS did not

have a good understanding of youth justice, and so were less able to be supportive of his work. Additionally, those who did not feel supported by CAMHS identified more with the YOT, which impacted upon their approach to practice. Liz in Northdale exemplified this, her views of CAMHS were not positive, and she had aligned herself with the YOT. The problem of role drift means that resources within the YOT are not being used effectively; when a specialist is given general YOT work that means there is less time for them to carry out mental health work. It also impacts upon the service that young people receive from the YOT. If a mental health worker is also a case-holder, this can impact how voluntary mental health treatment is perceived by young offenders, with the possibility of linking it with criminal justice. There is also a risk of ethical dilemmas for mental health workers in this situation as they have to balance the needs of the criminal justice system, and the young person's mental health needs. If managers within YOTs are comfortable with mental health workers carrying out youth justice work, there is little recourse for this to change. By having stronger accountability measures in place regarding practice through youth justice as a whole, issues like this may be avoided.

Within the YOS the role of mental health workers is ill-defined. All of the interviewees expressed that they had experience of YOTs not knowing what to do with mental health workers, and some  felt that this is still the case. This in part was a reason that motivated the creation of the external one-stop-health-shop model (*See Page 128 for further discussion*). By placing themselves externally from the YOT, the mental health workers in this approach were free to practice unquestioned, and without having to account for their activities in detail. Managers and youth justice workers were criticised in some YOTs for wanting to know detail about the therapeutic work that occurred with young people, which is confidential. The mental health workers in these situations felt that this was partially due to not understanding the role of a mental health worker, and managers or youth justice workers were expecting to be given this information to justify the presence of mental health workers in the YOT. Other YOTs also had a culture where not being seen in the office was perceived as not working.

> "It'll be 'Well I haven't seen them for ages'. Well it's not the CAMHS worker to be running around the office to be seen, it's the CAMHS worker to be out, seeing young people in appropriate environments, not being seen in the office just to make us happy"
> –Luke, Edgeham

This again illustrates a misunderstanding of mental health work and the role of mental health workers in the YOS. Another example of this is the frequency of inappropriate referrals to

mental health workers. All the mental health workers interviewed mentioned that they used to receive, or still do receive, a high level of referrals that were not related to mental health services. Anger management was a common example, as was youth justice workers telling young people that they could see the mental health worker for counselling. This highlights a need of the YOS, if there are high levels of young people requiring help with anger management or counselling, however, this is not the role of mental health professionals within the YOT (unless they are specifically trained for, and offer, a counselling or anger management service). That these referrals were so commonplace demonstrates that there is a widespread misconception within the YOS as to what mental health work is. Additionally, this shows a disconnect between what the YOS wants mental health workers to do and what they actually do. If creating working contracts and having discussions about expectations and roles prior to creating provision were encouraged or expected, this problem may be overcome. This would also improve accountability within the YOS as if mental health workers roes are defined, the effectiveness of their practice can be better seen.

Service level agreements are currently standard practice within the YOS for multi-agency working. It became apparent through the interviews that they are considered as little more than a box ticking exercise though, and had not been used in a meaningful way. Additionally, the literature suggests that these service level agreements are not detailed enough to guide practice in an effective manner (McLaughlin and Muncie, 2000). Service level agreements are relatively basic, and generally relate to resource levels and how these resources are to be allocated and managed. This means there is no formal agreement between the two services about what provision should entail and how this is to operate in practice. As these factors are often sources of tension between the two agencies, it seems that there needs to be clearer strategies regarding this. One YOT in the case study had experienced these problems and created a working contract to overcome this (*See Page 176 for detailed discussion*). The working contract went beyond a service level agreement in that it related to specific aspects of practice and defined the role of mental health workers within the YOT. Additionally, the working contract was re-assessed and altered or updated as necessary at regular intervals. This ensured regular discussion between the two agencies and that standards were being met even through periods of change.

**The Need for Change in the YOS**

> "Justice is the first virtue of social institutions, as truth is of systems of thought" John Rawls (1971: 3)

If there is to be an improvement in the way mental health services are provided within the YOS, change is required. These changes would likely extend beyond mental health provision, as the issues between  mental health and youth justice practice are largely structural in nature. If change was only applied to mental health provision within the YOS, differences would still remain, and so the issues that impede practice would not be resolved.

*Current Practice Lacks Accountability*

The debates surrounding youth justice regarding purpose and aims often do not impact upon practice (Adorjan, 2009; Crawford and Newburn, 2013; Muncie, 2008; Smith, 2010; Yates, 2012). Youth justice workers and those from other agencies like CAMHS carry out their work to similar standards that occurred in earlier iterations of youth justice (Home Office, 2004).They generally try to meet the needs of young people as best they can within the current structures of youth justice. A large number of youth justice workers are trained social workers and so welfare concerns play a vital role in their judgement (Burnett and Roberts, 2004). The impact of certain structures within the YOS make it more difficult for these factors to be addressed, due to problems similar to those that face mental health workers, the structures for assessment, referrals, and interventions are not developed enough. That the way in which youth justice and mental health workers interact with young people is not largely affected by changes in guidance or procedures for youth justice is indicative of the way in which professionals are perceived by operational level management and the YJB. Many of the interviewees mentioned that they felt like their views and professional opinions were not given a voice regarding changes made to the YOS.

> "what the problem is, is that I am a practitioner [pause] and I'm trying to communicate with people who are three or four steps above me, and they're like 'who is this person?'" –Liz, Northdale

That aspects of practice do not change regardless of guidance implies that the professionals working with young offenders have strong preferences and views of what they believe works which are not recognised by the YJB. That there is not scope for professionals to present their views to the YJB shows two things. Firstly that there is a lack of accountability within youth

justice as a whole. There is an awareness that procedural change and new guidance do not make substantive changes to practice, but this has not been acted upon by the YJB. There have not been discussions with youth justice workers as to why they maintain these standards within practice, their views have not been taken into account, nor has it been discussed why new guidance does not cause true change. Secondly, this indicates that there is a lack of social justice, not only for young people, but also those who work within the YOS. That professional judgements can be minimised or overlooked is unfair, and contributes to feelings of de-professionalisation (Canton and Eadie, 2008; Smith, 2009). By creating a socially just structure within the YOS, these issues could be avoided. The conceptual model of youth justice had built in systems of accountability. Whilst this has been created for research purposes, this does not mean that it is inapplicable to practice. It also acts as an illustration of what a socially just YOS might look like. That the YOS at present doesn't have accountability structures in this manner creates another reason for the YOS to incorporate social justice.

The future of the YOS is at present unclear. With the relatively recent incorporation of the YJB into the Ministry of Justice (Carswell et al., 2004; Mitchell et al., 2011; Stallard et al., 2003; Williams et al., 2010; Young and Thome, 2011), and the piloting of payment by results (Liebenberg and Ungar, 2014; Nicol et al., 2000; Whitehead, 2011) and new assessment formats (Baker, 2014; Youth Justice Board, 2014a), there is a high level of uncertainty amongst those working within youth justice as to what will happen in the immediate future. This came across in the interviews and this uncertainty meant that changes to provision of mental health services are considered on a short-term basis. This is understandable as long-term plans are likely to be altered or possibly impeded by future changes to the service as a whole. However, short term consideration of mental health provision is not the most effective way to meet the needs of young offenders. Long term structures and agreements need to be in place between the organisations, long-term planning requires more investment from those involved and means that the plans need to be effective and appropriate.

Additionally, the uncertainty of the YOS's future acts as a stressor to those working within the YOS. Due to present funding cuts there have been redundancies in both YOTs and CAMHS. None of the YOTs in the case study had to make recent redundancies regarding mental health provision, but there was a clear anxiety about the prospect of this. Additionally in areas where there had been redundancies, it placed a strain upon practitioners, who face increased

workloads. Funding cuts seem to have impacted more strongly upon CAMHS than the YOS across the country (Fox and Albertson, 2011), which has caused problems in the service and referral pathways between CAMHS and the YOS. This has led to mental health workers within YOTs taking on more work than they had previously or incorporating other work into their existing role, due to the diminished capacity for referrals at CAMHS. In Newkirk this had led to each of the mental health workers spending a day in local schools. Funding cuts should ideally instigate a re-evaluation of services so that work can still occur efficiently. This re-evaluation should occur under the guidance of the YJB to ensure accountability and a standard of care across the service as a whole. There is a concern that funding cuts will lead YOTs to consider efficiency over efficacy and that practices promoting social justice may become minimised.

Planning is a factor in the emergence of issues within practice, and the continuing existence of these issues highlights the lack of accountability practices within the YOS as a whole. YOTs have to comprise reports on an quarterly basis (Fox and Albertson, 2011) that discuss quantitative aspects of practice such as timescales for assessments, and reoffending rates. These are generally monitoring the efficiency of practice opposed to the effectiveness. This is an important distinction to make as YOS practices could be highly efficient and meet all YJB targets and standards, but still not be effective at meeting the needs of young people and reducing youth crime. Ensuring practice is effective is a key aspect of meeting organisational aims. That efficiency is the greater concern within youth justice is indicative of the managerialisation suggested by John Muncie (McLaughlin and Muncie, 2000). Monitoring the efficacy of practice can show what aspects are working and where improvement is required. Improved monitoring and accountability practice had been implemented in Woodshire YOT and whilst it created an increased workload for William, who managed the mental health workers, he found it beneficial to know regularly if practice was working well.

> "And so for example we might be starting to fall behind in one area we need to tweak it, we might be able to highlight gaps in other areas, we need to tweak it, and that helps to organise it. So it's onerous, but it does have its benefit." –William, Woodshire

Efficacy and efficiency also interrelate, at present mental health workers generally do more assessments than is required by the YJB to ensure young people's needs are recognised effectively. But this makes the YOT less efficient as more time is being spent on assessment than is necessary. By considering both efficacy and efficiency the entirety of this problem can be seen and resolved. If the YJB created accountability measures for the effectiveness of

practice, there may be greater motivation to resolve problems throughout youth justice as a whole. Since the 1998 Crime and Disorder Act and the accompanying National Standards, practice within youth justice has become highly constrained (Canton and Eadie, 2008). Prescriptive measures and more standardised assessments within youth justice reduced professionals capacity for discretion, which has had a negative impact on practice, and potentially heightened tensions within youth justice as professionals are faced with a conflict between the standards they are required to carry out, and the ethics and values which underlie their profession and promote discretion. A balance between accountability and discretion is possible (Canton and Eadie, 2008), and if the conceptual model were put into practice, achieving this would be one of the considerations required.

The YJB has recently undergone a period of change, and is now part of the Ministry of Justice (Puffett, 2013). Prior to this the YJB was independent and facing closure. It was generally considered that the YJB was not successfully addressing youth crime. (The Howard League for Penal Reform, 2011a; Whitehead, 2011) The impact of this change is yet to be seen, though some predictions can be made. Despite this change to the YJB, there hasn't been any alterations to the structure of the service, so it is unlikely that being part of the Ministry of Justice will have a large impact in the near future. At present the only significant impact is that uncertainty has been created amongst those working within YOTs. Following the incorporation of the YJB into the Ministry of Justice there have been no reviews of practice or the structure of youth justice. This signifies that change is unlikely. If this continues to happen, the problems that face youth justice will not be improved; and following funding cuts may even worsen. The main function of the YJB is to create guidelines for practice and ensure that standards throughout the YOS are met. However, ensuring standards are met is a difficult task, requiring an understanding of all aspects of practice. The YJB does not act in an interventionist capacity, and does not monitor practice closely. Outcomes are the main form of monitoring, but this is far too simplistic a measure for an issue as complex as youth crime. One of the interesting aspects of the conceptual model of youth justice was that there were different levels within the system, but these were linked, with upper levels monitoring those below to ensure effective and efficient practice. This was the most striking difference between the conceptual model and the reality of youth justice (*See Diagram 4.4)*. Accountability is important as it ensures that problems are noticed and addressed. The responsibility for issues that occur within practice cannot rest solely upon YOTs; the YJB created and instituted many of the structures and practice conventions that have led to problems, and so also hold responsibility. At present the YJB approaches solving these

issues by adding extra aspects to practice, which generally have not been met with success (Archer, 2013; Goldson, 2011). Closer consideration of the larger structures within youth justice is required to instigate more meaningful change. The YJB is able to do this, whereas YOTs are not.

One positive change being made within youth justice is the implementation of Asset plus. This new assessment tool will replace the original Asset form during 2016. Asset plus has much more capacity for detailed information to be gained about a young person, and allows more room for professional discretion in deciding a course of action to take following the initial information gathering process (Baker, 2014). This may allow youth justice workers greater capacity to gain an understanding of the mental health needs of the young people they work with, and by eschewing the 1-4 scoring system of Asset, allows for a more subtle and realistic understanding of when mental health needs require support or intervention. The need for accountability remains though, and greater improvements could be made to understand how effective mental health services within the YOS are at supporting young people with mental health needs.

The need for a clear and accountable structure in the YOS is imperative. At present youth justice has been the subject of much criticism and has been described as 'in crisis' (Burnett and Appleton, 2004; Sutherland, 2009; Wigfall and Moss, 2001). The changes made to youth justice have been largely procedural, but little attention has been given to the structure. Through implementing multi-agency practices, it has become apparent that some of the problems within the YOS are structural in nature. Youth Justice is currently a hierarchy, with a top-down approach. This means that those who work directly with young offenders have to address or work around the problems that are created by the structure despite them having the least power to create change within the service. Additionally, there are few ways in which their experiences can be expressed to those with the ability to create change. This creates a situation in which problems are unlikely to change. Youth justice is currently subject to finding cuts, and a variety of other changes are taking place across the service. This period of change would be an appropriate time for the YJB to appraise the structure and service the YOS provides and make improvements. Of those improvements, a key aspect that needs to be addressed is the top-down nature of youth justice. This is counter to the ideals on which the YOS was created, and the evidence-based approach which was hoped to be central to practice (Holdaway et al., 2001). By

allowing ideas and change to emerge from the bottom-up; i.e.: from practice, youth justice will be more driven by what young offenders needs are, and how youth justice workers can feasibly meet those needs. This has the potential to make youth justice more efficient and better able to meet its organisational aims.

## *The YOS is Not Balancing Social and Criminal Justice*

All created structures have two aspects: one philosophical, one organisational. The philosophical aspects occur based on the ideas and beliefs that have caused the structure to be created. The organisational aspects are based upon what is perceived to be an efficient way to implement these ideas or achieve set aims. These two aspects impact upon each other, and an ideal version of the system would be aware of the interplay between these two factors (Cavadino and Dignan, 2006). The YOS has a number of issues within practice (Gilling, 2009; Goldson, 2010; Muncie, 2006b; Shaw, 2006; Walsh et al., 2011), and is characterised by change and instability (Cavadino and Dignan, 2006). This is symptomatic of not having considered the relationship between the philosophical and organisational aspects of practice. Cavadino and Dignan call this awareness 'radical pluralism' (2007) and discuss how it has shaped various penal approaches. The dialectic between philosophy and practice is central to the problems currently facing youth justice, and is complicated further by the fact that youth justice has multiple philosophical precedents. This is partially due to the aims of, and actions required for youth justice, but also because of the shifting penal approaches to youth justice. Youth justice displays almost cyclic trends moving between welfarist and retributivist approaches, and various combinations of the two (Smith, 2007). Because of this, those working within youth justice have experience of all these different standpoints, and they all impact the way in which youth justice workers, and other professionals within the YOS, practice and deliver services. Different philosophical viewpoints have been built into practice, but the differences between them, or changes from one to another, are not considered by those in charge of the organisation of the YOS. This means that a philosophical imbalance is inherent in the structure of youth justice. This creates confusion about what standards practice should adhere to, what aspects of practice take precedent over others when conflict arise, and ultimately, how the YOS is trying to achieve its aims. To resolve the issues in practice, the philosophical ideas that are central to the YOS, those of social and criminal justice, need to be balanced.

There are concerns within youth justice at present that there are increasing trends of managerialisation (Cook, 2006; Smith, 2010). Within this is the concern that managers and managerial standards are becoming removed from the realities of practice (Goldson, 2011; Jones et al., 2004; Pitts, 2001). In some of the YOTs participating in the research there was a concern for social justice; the mangers had generally began as youth justice workers or social workers and had moved into management as their career progressed.

> "Most of the senior criminal justice people here are very focused on social justice. They're much more socially focused than they are criminally focused, much more. A lot of them are social workers, so, no, no, they're very focused on alternatives to custody and interventions afterwards. Very focused on it. Which is why I like working here." – William, Woodshire

Having experience and knowledge of the problems that can happen within day to day practice has given these managers a greater perspective of what is necessary for youth justice to be successful on a variety of levels within the service, and thus the ability to implement some of this understanding. This suggests that when appointing managers within the YOS, criteria should require that candidates are experienced as youth justice workers and have some awareness of the issues that impact upon practice. This is likely to increase understanding of social justice and welfare issues that impact upon youth justice work also, which may be beneficial in a management role. Whilst an awareness of social justice amongst managers would be positive, being prescriptive about the types of views and approaches that would be desirable for managers to hold is at best, limiting and at worst, discriminatory. Rawls's approach to social justice guarantees political liberty (Kukathas and Pettit, 1990; Rawls, 1971), applied to this context would mean that professionals should be able to freely choose their approach to practice. This means that the structure and culture of the YOS must allow for different approaches and viewpoints within YOTs, so that youth justice and mental health workers can decide what approach they feel best allows them to meet the needs of young people.

Many of the issues within youth justice can be linked to funding cuts and a lack of resources. This impacts upon social justice within the YOS as a certain level of resources are required to meet need and thus satisfy the Equality principle. When funding is limited, it is understandable for YOTs to focus upon meeting core standards and targets, which are based upon criminal justice aspects, opposed to trying to build social justice into existing practice. That funding and resource levels are at such a premium that thresholds have to rise or certain mental health

problems are not deemed 'serious enough' to warrant attention from the YOS is concerning (*See Page 132 for further detail*). This means that young offender's needs are not being met, and thus they are more likely to re-enter the justice system or require more serious help later in life (Bateman, 2011; Goldson, 2000a; Whitehead, 2011). That funding cuts may be the cause of this is suggestive of the political view of young offenders and the services dedicated to them. It is also a short-term solution to the problems facing youth justice, as funding reductions will lead to needs not being met, and could potentially draw further criticism of the YOS for 'failing' young people (Bateman, 2011; Goldson, 2000a; Whitehead, 2011). Whilst in the present economic climate, reduced funding may be a necessity, to ensure that services like the YOS can still meet their aims and provide desired outcomes, service structures need to be re-assessed as funding cuts occur to ensure that the aims are still achievable with lowered resources. Otherwise neither social nor criminal justice will truly occur.

The likely implementation of payment by results throughout the YOS will also impact upon the interventive abilities of mental health workers. Payment by results supports 'evidence-based' approaches (Burnett and Roberts, 2004; Fox and Albertson, 2011; Yates, 2012) and may lead to highly prescriptive formats for mental health intervention in the YOS. There was a concern amongst interviewees that they would be told not only what form of intervention to utilise with a young person (likely CBT) but how many sessions would be required.

> "But if I start referring kids in with depression I know there's going to come a point where they're going to come back and say "well here's his four sessions". You know, and that's not good." –Liz, Northdale

These concerns show that operational level management, commissioners and the YJB are perceived as being unaware of the reality of mental health practice. Interviewees did not feel they had any agency or power to change this though, and considered it as another structural aspect of the YOS that would have to be worked around when it was implemented nationally. That mental health workers do not have agency regarding aspects of practice suggests that youth justice is minimising the role of professional judgement. This has been suggested in terms of trends towards managerialisation (McMurran, 2003; Steinberg et al., 2004) previously. It does call into question the YJB's reasons for implementing multi-agency practice. Insisting that all YOTs have specialist mental health workers, but then not consulting these specialists regarding changing or improving practice mental health practice seems contradictory. If multi-agency

work is to be successful all those agencies involved need to be able to put across their views and have these views recognised.

The issues that occur in practice that were identified by the findings are largely structural in their nature, and require attention from the YJB before change can occur. Identifying these issues and adding to current knowledge is useful, however, it must be made clear that these are highly unlikely to be changed by those within individual YOTs on a local basis. As practice issues are linked to organisational structures, changes need to occur across the system as a whole, and be orchestrated by the YJB to be effective. If this is not the case, differences between YOTs and approaches will remain and cause further problems. Without making it clear who is responsible for a particular issue within the YOS, the scope for change is limited. Improved systems of accountability would outline these responsibilities, allowing improvements to occur more easily. One of the aims of this work is to identify and understand problems within mental health practice within YOTs, and so issues were found beyond the lager structural problems of the YOS. The use of this is that if issues are also identified on a smaller scale, or on the level of individual YOTs, these are more likely to be able to be changed by those individuals. This gives members of the YOT a greater level of agency and power over their working situation, when contrasted with the larger issues that require a top-down change. Additionally, identifying and finding ways of resolving practice issues may improve practice and promote social justice within YOTs.

*Underlying Principles are needed for Practice*

Following the 1998 Crime and Disorder Act (Home Office, 1998) youth justice was restructured. This led to the creation of the YOS. During the planning and piloting stages of this process it was thought that there would be a clear philosophical approach that would guide practice (Holdaway et al., 2001). This was perceived to be a combination of criminal and social justice approaches, guided by a robust evidence base. It was hoped that this basis would ensure that practice was consistent across the whole of the YOS, and allow young people to be treated in a way that was consistent with social justice, whilst satisfying the needs of criminal justice (Blyth, 2005; Holdaway et al., 2001). This philosophical basis did not appear in the YOS following the national implementation of this approach to youth justice. There may be a number of reasons for why this occurred, however it is not clear why the proposed philosophical

approach to youth justice was quickly lost. It may be possible that political concerns overshadowed philosophical ones, or that the speed with which YOTs were created and implemented allowed philosophical aspects to be overlooked. The result of this is that the YOS did not have a consistent and clear set of unifying principles to underpin or guide practice. Philosophical approaches are important because they shape all the actions and decisions that follow, and give those making decisions a framework to guide them. Having a consistent philosophical approach running through the entirety of an organisation allows all those within the organisation to understand how practice should occur, and reasons why that is. Within the YOS this would ensure that YOTs, which can set standards on a local level, all approach practice on the same basis and understanding, allowing young people to receive an equivalent service regardless of which YOT they attend.

The loss of philosophical principles has impacted upon practice within the YOS. There are regional differences in practice and provision that mean young people in some areas receive a lesser service (Khan and Wilson, 2010), tensions between workers of different approaches (Fergusson, 2007), and confusion and concerns about the future of youth justice. All these problems could be overcome by implementing philosophical principles to guide practice. This would allow youth justice to move beyond issues caused by its own structure and approach, and place a greater focus on achieving its aims.

Underlying principles would contribute to creating balance between social and criminal justice in practice. This would be because the principles would set a precedent which would influence all other aspects of practice. As aspects of both social and criminal justice are present in the aims of the YOS, principles created to fulfil those aims would reflect the need for balance. The Equality and Need principles created within this work relate specifically to mental health practice within the YOS, and so would not be appropriate as a basis for the YOS as a whole, as they were not created with broader youth justice practice in mind, and cite equality only in the ability to access mental health services. However, the process through which the two principles were created could be used to create principles for this context also. If this were to occur, it would not invalidate the Need and Equality principles and their relation to mental health practice within the YOS though. They would build upon the base created by the new principles instead As mental health provision is decided within individual YOTs, there is a need to ensure

there is consistency within the YOS as whole regarding the mental health treatment young people receive. Retaining the Equality and Need principles would ensure this.

The case study identified that differing forms of mental health provision can be linked to differences in practice. Some of these differences are due to varying levels of resources, however others can be linked to the environments created by the differing forms of provision. Lone workers were more likely to be unsupported in YOTs, and thus feel isolated, which impacts upon the relationships they have with youth justice workers and managers within the YOS, and therefore on practice. Health teams within YOTs have built in support, as there are colleagues from a similar background or discipline present, this support allows mental health workers to function better within their role in the YOS. Some of these differences caused varying practices, particularly around access to mental health services. If the Equality and Need principles were used to guide all mental health practice within the YOS, any differences in access to mental health services would have a clear rationale based on the needs of young people, ensuring that young people were treated in a way that is equivalent to social justice.

## Summary

This chapter expanded upon the findings, discussing their applicability to practice, and if they have satisfied the research question. This section also discussed how the findings relate to, and build upon, the existing literature, adding to current knowledge.

The research has investigated the relationship between social and criminal justice in the context of mental health provision within the YOS. It has shown that there is a need for balance between these two philosophical standpoints, as tensions between them have a negative impact on practice. This is particularly so in the case of mental health provision within the YOS because it makes the differences between the two approaches explicit. The case study identified examples where there was an imbalance between social and criminal justice, and these YOTs were less able to overcome issues in practice, and mental health workers in these YOTs were under increased pressures. Other YOTs had created balance between social and criminal justice; this seemed to be due to a convergence of managers with an interest in these issues, a good relationship with local CAMHS which allowed discussions about provision to occur, and a form

of provision being adopted that allowed mental health workers to choose their approach to practice.

To create balance between social and criminal justice within the YOS on a national scale, underlying principles are necessary to guide practice, and also help structure the organisation as a whole. To create these principles, Rawls's theory of justice as fairness is the most applicable approach. Despite criticisms that this theory is unrealistic, Rawls's egalitarian approach, and outlines for how to create principles and build a structure upon them mean that this theory is highly applicable on an institutional level.

## Conclusion

## Justice as Fairness is Applicable to mental health in the YOS

Youth justice has traditionally been established on a criminal justice basis. Throughout its history there have been a variety of approaches used within youth justice, incorporating a number of aspects of both social and criminal justice. The way this has occurred has not been orchestrated or facilitated though, which has led to confusion about how those working within youth justice are to consider their practice, and what place theory or philosophical standpoints have within practice (Ellis and Boden, 2000; Goldson and Hughes, 2010; Smith, 2007). This has contributed to tensions between criminal and social justice within youth justice. These issues are particularly evident when considering the role and function of mental health services within YOS, as these two vocations can be characteristic of social and criminal justice. This work investigated the relationship between criminal and social justice, and how this impacts upon mental health practice within the YOS.

Social justice is a contested term, largely due to how it has been differently constructed throughout the history of political philosophy. One interpretation of social justice that has been underutilised is John Rawls's justice as fairness (1971). Whilst this was heavily influential in politics and academic political philosophy, it has not been applied practically. Libertarianism and neo-liberalism quickly became more popular than justice as fairness, and were applied relatively widely, reducing opportunities for Rawls's work to be applied (Kukathas and Pettit, 1990; Lovett, 2011; Sandel, 2010; Van Soest, 1994). Justice as fairness has been criticised as being impractical and unrealistic (Daniels, 1975; Nozick, 1993; Sandel, 2010). The main thinking behind this is that no one could simultaneously maintain the objectivity and understanding necessary for the original position, which was central to Rawls's idea of how to build societal structures. Arguing that no-one can realistically have the necessary understanding of society, whilst being uninfluenced by their position within it misrepresents Rawls's idea. The original position is a thought experiment, used to derive the central principles of justice. Rawls concedes that it would not literally occur, but could be used to create agreement and shared understanding (Rawls and Kelly, 2001). Critiques of Rawls's theory also often focus on the application to societies in their entirety, which would be extremely difficult. This is despite that Rawls argued that his theory could be applicable to individual institutions as well as entire societies. Applying justice as fairness to a specific institution would be practically possible. In Rawls's discussion of this, he theorised that these applications would largely apply on an

economic and distributive level, relating to the regulation of finances, or sharing of resources. This work has shown that it could also be used to structure an institution, and to clarify the aims and underlying principles of that institution.

Adapted principles of social justice

The Equality Principle: All young offenders have an equal right to access mental health services

The Need Principle: Disparity of access to mental health services should only occur where there is greater need

By adapting Rawls's two principles of social justice to the aims of mental health provision within youth justice, a philosophical basis is created for the service structure. The need and equality principles ensured that all young people would receive mental health care if necessary, and the only reason for disparity in access to services would be greater need. The implications of this in practice are that the primary role of mental health workers within the YOS is to ensure young people can access mental health services, and that there must be some way of assessing need to establish if some young people take priority. This basis also establishes that mental health workers within the YOS are there to provide a specific service related to the welfare needs of young people, as opposed to their criminal behaviour.

Social justice within youth justice could be identified or defined based on a number of factors. A broad definition of social justice within the YOS could be that all young people are granted all the rights available to them, including receiving services if they are in a position of inequality; such as being in a vulnerable or marginalised group. The reason this definition specifically references rights is because the youth justice system is holding young people accountable to the responsibilities of citizenship. Social justice emphasizes enforcing both the rights and responsibilities of citizens (Cook, 2006; Rousseau, 1762); institutions attempting to act in a socially just way should also uphold this ethos. The rights afforded by the YOS may be different from those afforded by societal citizenship (but not impede upon them). When young people become involved with the YOS, a social contract is created between the organisation and the young person. This generally will take the form that a young person will attempt to desist

from criminal behaviour, on the basis that they will be supported or assisted in doing this by their local YOT.

The conceptual model created in the analysis shows what provision based upon these principles could look like (See Diagram 4.2). The conceptual model has a more transparent and coherent structure than what is currently used in practice, with built in structures of accountability. This would allow those working within the system greater agency, and increased ability to utilise professional judgement. By creating a well-defined structure for practice to occur in, with a clear philosophical basis and principles, individuals would have a greater understanding of what their role is supposed to do, and what the service is working towards overall. This would reduce the tensions between professionals from different occupational backgrounds, and the conflict between social and criminal justice would be reduced, as the philosophical principles underlying the system would have reconciled the two positions, creating balance within the structure as a whole.

Ideas of transparency and accountability are important, as they are key markers of social justice according to Rawls (1971, 2007). Recalling the ideas of Rousseau, Rawls believed that any principles that were used to guide a society should be known by, or accessible to, everyone within that society. When applied to institutions or organisations, this would refer to all persons affected by that institution or organisation. If this were not the case, then those with power could take action that would negate or invalidate the underlying principles. Transparency means that those governing a society can be held to account by the citizens. On an institutional level this means that accountability is not a top-down only process, and that all those within the institution have an equal ability to question the actions of those running the institution.

Whilst the conceptual model was created for the purposes of this research, this does not necessitate that it could not also be applied to practice. Some of the YOTs participating in the research displayed features of the conceptual model, and these aspects were beneficial within practice. An example of this is the ability of staff in Woodshire YOT to enforce the boundaries of their roles, and the procedures built into practice to ensure accountability. The conceptual model progressed throughout the research process, and was impacted by the findings. Initially, the conceptual model was created based upon procedures outlined by Checkland (Checkland, 2000a), and the Need and Equality Principles. The initial purpose of this exercise was to create a model of what mental health practice would look like in the YOS if the needs of social and criminal justice were balanced. This was then affected by the findings of the case study, which

highlighted what was possible within youth justice, and what already occurs in terms of socially just practice. Considering what is possible in the conceptual model is important, as if it were unrealistic, or impossible given the resources and function of the YOS, it would neither serve as a valuable point of comparison or ideal standard as no YOT would ever be able to match it. The conceptual model needed to be possible, however, could still be perceived as an ideal. By combining the SST processes outlined by Checkland, the Need and Equality Principles, and the examples of positive practice from the case study, the conceptual model was created. The result is an idealised version of mental health provision within the YOS, that could be practically achievable given a number of conditions. These being the adoption of the Need and Equality principles to underlie practice, acknowledgement from the YJB that philosophical issues require consideration within practical work, and a balance between social and criminal justice.

Using philosophical principles as the basis of agencies like the YOS is positive as often the aims of social organisations are vague or simplistic. Having a philosophical basis can clarify the purpose of an organisation, and creates suggestions for how this purpose can be achieved. Reduced offending is the main aim of the YOS (Youth Justice Board, 2011a), but it is unclear from this aim how this would or should be put into practice. What level of reduction would be viewed as acceptable is not described, nor how this reduction could be brought about. Whilst the work of the YOS does impact upon young people, reducing risk factors for offending is not necessarily a guarantee that a young person will desist from offending. The work of the YOS is thus based upon an assumption that reducing risk factors and meeting needs will reduce offending. The aims of the YOS (as described by the YJB) relate to reducing reoffending and public protection. These aims are not clearly linked to the structure of the service, or the guidelines for practice, meaning that it is unclear how they are meant to be achieved. This contributes to the tensions that have emerged in practice, as professionals' different constructions of the aims and guidance occur and conflict (Goldson, 2000b; Smith, 2005). If in addition to having a set aim, the YOS also had an underlying philosophy and an ideal to work towards, this would be more useful in showing what actions are needed to meet the aim. The philosophical principles could act as a guide for practice, allowing individuals to use their professional judgement in applying those principles. An ideal would create a fixed point to aim towards, and specific steps could be outlined on how to achieve this, depending on how different current practice was from the ideal. Additionally, if practice was similar, the ideal can either be reformed for further improvement, or maintained as a point of comparison in checking accountability. The conceptual model created in the analysis of this work could act as an ideal

for mental health practice within the YOS. Using justice as fairness ensured that the conceptual model of the YOS was based in social justice, and that if used in practice, the results would be equitable not only for young offenders, but also for those working within the YOS.

## Problems in mental health practice are barriers to social justice

The different forms of mental health provision identified by Khan and Wilson (2010) are still present in practice. The lone worker format was found in two YOTs, with risks being that mental health workers are unsupported and isolated. The foot-in-foot-out format was found in one YOT with one mental health worker. How this type of provision would occur with two mental health workers was not found, but would be a point of interest. The health team within a YOT format was found in two YOTs, it offered adequate support, but issues surrounded 'ownership' of mental health workers. One external one-stop-health-shop was found working with two YOTs, in the same area Khan and Wilson first recognised this type of provision. It has not been expanded beyond this single instance. The outreach consultative form was found in one YOT, and offered mental health workers flexibility in their practice, but required adequate resources. The virtual locality format was found in one YOT. This did not match Khan and Wilson's description exactly, but retained enough features of this type of provision for the label to apply. Each of the differing forms of provision presented differing abilities to address and overcome issues within practice.

This work evaluated each of the six forms of provision in terms of their ability to facilitate social justice to be present within YOTs, and thus increase the likelihood of social justice being balanced with criminal justice within the YOS. All of the six forms of provision were identifiable in practice, with some conforming very closely to Khan and Wilson's (2010) descriptions, and others differing somewhat, but still fitting the major descriptive features. Whilst previous work has not evaluated these forms of provision, this research has considered their effectiveness in promoting social justice. Each of the forms of provision were considered in terms of their similarity to the conceptual model created based upon the Need and Equality principles. Additionally, themes that arose from the analysis of the data were used to assess the forms of provision in their ability to overcome issues. The thematic analysis of the interviews highlighted issues within practice that act as barriers to social justice. Once these issues had been identified, the examples of each form of provision could be considered in terms of their

ability to overcome or avoid these issues. The findings showed that there were differences across the forms of provision in their ability to promote social justice, which was identified based on a number of factors.

The ability to recognise issues in practice and act upon them in a way that would satisfy the Need and Equality principles was considered to be a marker of social justice. This was chosen because it means the system is being held to a standard of accountability, and control action is being taken which is consistent with the conceptual model created for the analysis. Initially issues were identified in the literature relating to assessments, referrals, and interventions within mental health practice in the YOS. These issues were confirmed by the interviewees as having a negative effect upon practice, supporting the literature. The interviewees also identified further issues that impacted their practice, or acted as barriers to social justice that had not previously been discussed widely in the literature. That these issues could hinder or prevent young people accessing services that could be beneficial to them means that they are counter to the first of the adapted principles of social justice in this work, and thus these issues could be causing social injustice. Using the issues identified in the literature as a starting point for discussions of social justice in practice allowed other signifiers of social justice to be identified. The interviews brought to light other issues and problems within practice, and by considering each of these in terms of the Equity and Need principles it could be seen how prevalent social justice was within practice, and thus how able each form of provision was to promote it.

Some of the issues discussed in the interviews were not directly considered to be issues of social justice, but could impact upon it. These were gaining access to services, time scales, understanding service pathways, and resistance from others within the YOS. Giving young people access to mental health services through assessment and referral is supposed to be the main aspect mental health work within the YOS. However, this is often difficult, or not practically possible and so mental health workers have adapted their roles to ensure that young people access services, even if this does not follow the service pathways outlined in YJB guidelines. The outcome of this has been that mental health workers within the YOS often carry out interventions and work directly with young people beyond assessment and referral. Whilst this may seem to be a socially just action, in that it grants young people access to services, over time this has become a standard of mental health practice within the YOS, meaning that mental health workers time is stretched over a large number of tasks. By having less time to carry out

assessment and referrals due to doing intervention work, fewer young people will be able to access mental health care through this route. If accessing CAMHS services was easier, mental health workers within the YOS would be able to utilise the Need principle, referring high priority cases to CAMHS where they could receive more specialised care, and carry out assessments and interventions for those with a lower level of need, or less complex problems. This would spread the overall level of young people requiring access to services over a greater number of mental health workers, allowing more equitable access.

Problems regarding time scales was another issue that did not directly hinder social justice, but could have an effect upon it. The criminal sanctions placed upon young offenders have given time scales. This is a necessary and central aspect of criminal justice, and is immutable. That mental health work carried out within the YOS would have to conform to these time scales is a practical aspect of working within this system and not a breach of social justice, as it does not prevent young people accessing mental health services whilst they are involved with the YOS. However, what happens at the end of these time scales does impact upon social justice. If access to mental health services is revoked for the reason of criminal sanctions being lifted, this is not socially just, as it means a young person is being denied service for reasons that are not based on need, and this is against the second adapted principle of social justice. Of the YOTs involved in the case study, many had not found sufficient ways to overcome this issue. Sarah, the lone worker at Brookshire YOT, continued working with young people beyond their involvement with the YOS, which raised issues of safeguarding. Working with young people beyond their order when they had not been formally referred to CAMHS means that this work is not accountable. If there were problems within this work, such as disclosure of further crimes, harm to either a young person or Sarah, or simply a need for further specialist support, this could not be acted upon by either the YOS or CAMHS, leaving both Sarah and the young people vulnerable. As there were not pathways in place for continuing provision in Brookshire, the other option for Sarah would be to withdraw all services at the end of a young person's order. This approach occurred in Westley and Midcaster. Mental health workers at Newkirk, Edgeham, and Northdale YOTs mentioned referring young people to CAMHS when their time with the YOS came to an end. This was not always sufficient though as waiting lists for CAMHS are often very long, meaning that service has effectively been withdrawn from those young people for a period of up to several months. The working contract between the YOT and CAMHS in Woodshire had considered this, and agreed how referrals were to occur to prevent great disruption to young people using services.

Other issues identified in the interviews have a clear impact upon social justice within the YOS, in some cases for mental health workers as well as young people. All of the interviewees mentioned that either currently, or at some point of their experience within the YOS, there was a lack of knowledge about mental health amongst youth justice workers, YOT managers, and commissioners. This lack of knowledge means that young people are not receiving an equal access to mental health services, as referrals may not always be appropriate, or there is not the sufficient level of knowledge to identify mental health need. Whilst an ideal solution to this would be for mental health workers to carry out assessments with all young people who enter the YOT, this is not practical, particularly as a lack of resources is already a problem for many YOTs. If mental health workers in the YOS assessed every young person who entered the YOT, this would take up the majority of their time, meaning that other work such as referrals or interventions could not take place to the level that is necessary. Additionally, not all young offenders will have a mental health need. Allowing youth justice workers to refer to the mental health professionals when they have concerns can meet the Equality principle, as long as young people can also request mental health care if they desire it also. This approach assumes that youth justice workers all have adequate knowledge of mental health needs to recognise them and refer to mental health workers.

Youth justice workers have a variety of professional backgrounds; primarily social work or youth work. This does not guarantee that youth justice workers have received any formal training or instruction regarding mental health. Some of the YOTs in the case study carried out regular training with staff within the YOT regarding mental health, to create clear guidance for when referrals should be made, what constitutes a mental health need, and how to discuss mental health with young people. In Newkirk, mental health workers included similar training in the induction process for new staff. This not only benefited practice due to improved referrals, but also reduced tensions between the two approaches, as there was greater understanding of what the role of mental health workers was. Some of the interviewees also said that there had been reductions in negative or stigmatic attitudes towards mental health and mental health work following these training events. Negative attitudes had previously caused problems within practice, with some youth justice workers being unwilling to make mental health referrals even when there was strong recommendation to do so. Changing or challenging this means that young people are more likely to be able to access mental health services.

Unclear service pathways were another social justice issue identified through the interviews. In Westbury, Dan had difficulty finding the appropriate services for young people, and negotiating access to them. In Newkirk, the mental health workers discussed how they had greater access to other services, acknowledging the disparity between YOTs. That this disparity means that there is an inequality of access to services, and that this inequality is due to structures rather than increased need, shows how unclear service pathways can create social injustice. Additionally, unclear service pathways mean that the structure in which mental health services are provided to young offenders is not transparent. Rawls discussed the resonance of transparency within socially just structures (1971), stating that transparency implies that the owners of a system recognise that those affected by the system are rational beings deserving of respect, and thus the need for them to understand fully what they are involved with (Lovett, 2011; Rawls, 1971). That young offenders cannot have a clear understanding of the pathways of mental health services is concerning due to the voluntary nature of this support, and the contrast between the mandatory wider context in which it takes place.

Mental health services are entirely voluntary, with this being an important aspect of the practice, individuals are there willingly, and are active participants in their treatment with a sense of power over the choices that are available to them. The only exception to this is if a person is at risk of harming themselves or others, and may be given involuntary care under the Mental Health Act (Department of Health, 2007). This is in direct contrast to the criminal justice system, in which the majority of actions are mandatory, and individuals have little control or agency regarding what they can or cannot do. Both of these positions are reconcilable with the philosophical underpinnings of each system, however, when placing aspects of one within the other, this creates questions of how the voluntary and mandatory characteristics of each practice will be balanced. It is possible that the balance could simply occur by explicitly stating which aspects are voluntary and which are not. Giving young offenders this information would recognise their ability to understand this information and make decisions based upon it. It would also satisfy the Equality principle, as all young people involved with the YOS would be aware that they could access mental health services if they wished to. If the service pathway for mental health services within the YOS is unclear, it would be logical to assume it is similar to that of the YOS as a whole, as that is the overarching organisation in which it takes place. This could lead to young people not recognising the voluntary nature of the mental health services offered

to them within YOTs. This creates an ethical concern, as mental health services may be entered into without fully informed consent. It is also problematic in the context of social justice, which promotes equality of access to services and opportunities, but recognises the agency of individuals in their ability accept or decline these opportunities (Fourie, 2006; Sandel, 2010).

Within the six forms of mental health service provision (Khan and Wilson, 2010), there were differences in how issues like those discussed above were identified and approached. This implies that differing provision can impact social justice, as the ability to recognise and prevent or overcome issues is a marker of socially just practice. The examples within the case study of the lone worker form of provision displayed the lowest levels of social justice. Some of the forms of provision displayed similar levels of social justice, so there is not a singular 'best' type of provision, but the health team within a YOT, outreach consultative, and virtual locality forms of provision most effectively delivered social justice (*see Page 131 and Diagram 4.1 for further discussion*). It is not currently clear if this is purely due to the form of provision, or if the persons within these YOTs had a greater impact. However, the persons within these YOTs were involved in the creation of mental health provision, meaning it is possible the relationship between these two factors is reciprocal. As members of the external one-stop-health-shop withdrew from the research there was not enough information to fully gauge the level of social justice within this form of provision, just that it is still existent, supporting Khan and Wilson's theory (2010).

## Social justice is beneficial for professional practice in the YOS

Of the YOTs that participated in the research, those who considered social justice, or worked in a more socially just manner reported fewer issues in practice and less difficulty in integrating youth justice and mental health. Whilst the causality of this is unclear, establishing that there is a relationship between social justice in the YOS and improved practice is useful as there is a need for improved practice in the YOS (Bradt and Bouverne-De Bie, 2009; Easley, 2011; Goldson, 2011). Additionally improving practice and ensuring practice is socially just is positive for those who work within the YOS. Whilst the impact upon young people is the main concern of YOS practice, ensuring that those working within the system and achieving the desired outcomes are treated fairly is representative of social justice. Considering individuals as having worth in their own right, and not as a means to an end is socially just (Kant, 1785;

Sandel, 2010). Rawls also considered recognising the rational abilities of individuals as a mark of respect of their humanity (1971). Those who are employed by the YOS sign a literal contract (opposed to an implicit social contract), which guarantees them certain legal protections and rights within the organisation (in addition to payment) in exchange for carrying out specified work. The legal protections largely relate to equality and fair treatment, in effect, that employees are treated in a socially just manner.

Within the case study the YOTs that created fairer and more socially just conditions for both mental health workers and youth justice workers exhibited more efficient and useful practice when compared to YOTs that did not display high levels of social justice. This was demonstrated through a number of factors, such as the levels of support and supervision, the ability to raise and discuss issues with colleagues, and particularly, the ability to express and utilise professional judgement. Professionalism is a particular issue within youth justice at present, with concerns about unqualified youth workers and prescriptive practice guidelines acting as a 'de-professionalising' force upon youth justice workers (Ellis and Boden, 2000; Fournier, 2002; Pitts, 2001). The main impact of these developments is that professional judgement could be limited within youth justice (Baker, 2005; Ellis and Boden, 2000; Pitts, 2003). In this context the phrase 'professional judgement' relates to the ability of individuals to use their training and experience to understand and evaluate a situation, and come to a conclusion about what the most appropriate actions would be (Baker, 2005). For mental health workers within the YOS, this could relate to choosing the appropriate assessment tools, interpreting these assessments and determining the level of need, deciding on an appropriate course of action to meet that need, and how to administer this.

The ability to express professional judgement is of importance for mental health workers within the YOS not only because it shows that they are being treated fairly and respected by the system that they are working within, but also because of the importance of judgement within mental health work. Mental health needs are not often explicit, and require specialist knowledge to be understood and identified (Leon, 2002; Newnham and Page, 2010). There is not a consensus within mental health as a discipline about how mental health needs should be approached, with different schools of thought and contrasting forms of practice (Timimi, 2014; Wakefield, 1988; Walker, 2006). Being able to understand how these differ, and which is the most applicable in a given context requires training and expertise on a professional level. Additionally, that mental

health workers have this level of expertise and are able to exercise their professional judgement has a strong impact upon the service that young people receive. If a mental health worker was limited in their choices of what actions to consider by the structures of the YOS, then the second adapted principle of social justice would be being violated, as decisions about how to address mental health would not be dictated by need, as this can only be judged by those with knowledge and experience of mental health work. The differing approaches to mental health work are not inherently just or unjust, however, that an appropriate approach is accessible is an issue of social justice. Some of the interviewees were concerned about the move towards payment by results within youth justice, as this may limit their capacity to use professional judgement, and certain approaches may be advocated over others based upon 'what works' frameworks, opposed to what may be best for a young person in a specific situation.

Of the differing forms of provision within the research some were more conducive to promoting professional judgement than others. Those YOTs which practice in a more socially just manner, and were more considerate of achieving social justice for young people, were more likely to allow mental health workers to use professional judgement relatively freely. This may be due to structures built into practice, such as the working contract in Woodshire (*See Page 176*), or individuals who are concerned with these issues such as Luke in Edgeham, who was specifically interested in reducing the tensions between social and criminal justice. These YOTs also reported fewer problems within their practice, and had often created solutions to issues when they occurred. This allowed those within these YOTs to carry out their work more easily, increasing their sense of satisfaction. In contrast to this Sarah, the lone worker in Brookshire, faced many issues within practice, had little capacity to create change within the YOT, and felt frustrated and unhappy, despite maintaining optimism for the future (*See Page 156*). If those within a system are able to exercise their professional judgement in their work, it is more likely that this work will be successful. Whilst direct causality cannot be claimed, this work does display a link between social justice and improved mental health practice within YOTs.

## Promoting social justice may help achieve the aims of youth justice

The social contract between young people and the YOS does not imply that a young person is justified in committing further crimes if they are not adequately supported by the YOS, but it does acknowledge that desistance is a process, and requires support to have a greater chance of

being successful (Barry, 2010; Maruna, 2001). As mental health is a need for a significant number of young people in the YOS (Anderson et al., 2004; Barrett et al., 2006; Kessler, 2002; Nicol et al., 2000; Patel et al., 2007; Townsend et al., 2007, 2010; Young and Thome, 2011), providing mental health care contributes to satisfying the social contract between the YOS and young people, means that young people are being treated in a socially just manner, and may indirectly contribute to meeting the aims of reducing reoffending.

The aims of the YJB and YOS discuss preventing offending and re-offending (Youth Justice Board, 2011a). Within this is the assumption that offending and re-offending *can* be prevented. The YOS focuses on re-offending, as identifying the causes of offending in order to prevent it has been a historically difficult issue (Duncan Smith, 2007; Jones and Baker, 2009; Muncie, 2010). Preventing reoffending, or desistance, is a difficult task, which within the YOS has largely been carried out through reducing risk (Commons Select Committee, 2013; Phoenix, 2009). There are problems with this approach, as it takes a generalised framework of what correlates with offending, and applies it to individuals when it may not always be appropriate (Mallett et al., 2011; Putnins, 2002; Wilson, 2011). Additionally, many of the risk factors linked to offending behaviours imply that a young person is vulnerable, or has additional needs (Armstrong et al., 2005; Jones and Baker, 2009; Liebenberg and Ungar, 2014; Pettitt et al., 2013). Mental health needs are a particular example of this, and discussing it as a possible precursor to offending, suggests that all persons with mental health needs could have a greater potential for criminal behaviour than those without. Not only is this potentially stigmatising for those who have mental health needs, but also is counter to the purpose of youth justice. If criminal behaviours are framed as the result of an illness, this raises questions as to whether it is ethical to punish criminals, as their illness (and the results of it) is not their fault. However, the YOS does not suggest that there is a causal relationship between mental health need and offending behaviour. These underlying assumptions of the aims of youth justice need to be questioned and considered though, as they inform the work of the YOS as a whole. If the aims are indicative of stigma towards mental health needs, this will invariably make it more difficult for mental health work to be carried out successfully within the organisation.

The link to re-offending is not the only reason for the YOS to consider mental health needs. The organisation also has a duty to provide care for the young people it serves (Home Office, 2004). This 'care' is generally considered to be promoting and maintaining the health, wellbeing, and

safety of individuals (Department of Education, 2003). This includes mental health care. This is beneficial for the YOS as in maintaining its duty of care, it may also be reducing the risk of reoffending, and thus satisfying its organisational aims. For CAMHS, the organisation that provides a majority of mental health care within the YOS, it is beneficial as it allows access to a population of young people that have not traditionally engaged with mental health services, thus addressing unmet need (Crossley, 2012; McMurran, 2003). However, meeting the mental health needs of young offenders is not simply a case of making the services available. Young offenders tend to have particularly high level and complex needs, making meeting them difficult (Anderson et al., 2004; Nicol et al., 2000; Patel et al., 2007; Young and Thome, 2011). The YOS has previously had problems with achieving this, which are complicated further due to issues within practice and tensions between organisations.

This work has found evidence to suggest that there is a link between improved mental health practice within YOTs and social justice. This relationship is complex, with the structure and form of service provision, working cultures, individual personalities, approaches, and identities all acting as factors in the level of social justice present. However, that this link has been established is important, as it can inform how to improve practice within YOTs, thus meeting the needs of young people, and potentially meeting the aims of the YOS through reduced risk of re-offending. The suggestions for change identified through the case study can be applied to improve practice in the short-term, at the level of individual YOTs. However, for a larger change to occur within the YOS as a whole, changes need to be considered on a long-term basis. There have been suggestions that short-term politics affect a number of institutions, essentially politicising the field of practice (Coughlan, 2015). This can also be said of the YOS, meaning that the issues found within this work may have a broader application. The YJB institutes frequent changes to youth justice, many of which are not necessarily welcomed by those working within the YOS (Smith, 2007). This is linked to political changes and the need to be 'seen to be doing something' (Hope, 2005). The YJB may be more particularly affected by these pressures since it was moved into the Ministry of Justice, as opposed to being independent (Puffett, 2013). Since that has occurred, changes instituted have included reformed practice guidance (Youth Justice Board, 2013a, 2014b), changes to assessment tools (Baker, 2014; Youth Justice Board, 2014a), new national standards (Youth Justice Board, 2014c), moves towards payment-by-results including pilot schemes, and the "transforming youth custody" initiative (Youth Justice Board, 2014d). This creates questions and criticisms about what these

changes are designed to achieve overall, and what the long-term plans are for youth justice (Yates, 2012).

There is a need for structural change within the YOS. When YOTs were being piloted, it was planned that there would be a strong ideological base within youth justice, allowing those working within it to exercise professional judgement, and for understanding and evidence about what was successful in helping young people maintain desistance to guide practice (Holdaway et al., 2001). This approach was quickly altered, with YOTs being instituted nationally before the pilot scheme could be completed (Holdaway et al., 2001). Prior to the 1998 Crime and Disorder Act (Home Office), youth justice was perceived to be heavily influenced by social justice, potentially to the detriment of criminal justice, as welfare processes and diversion were valued more than concepts of punishment (Smith, 2007). This is no longer the case, and there is the risk of losing the balance between social and criminal justice, and the potential to treat young people unfairly. This is particularly concerning in light of work showing the 'responsibilisation' of young people; the perception that young people are aware of and thus fully responsible for their actions with welfare factors not acting as mitigating forces (Kemshall, 2010; Pitts, 2003; Such and Walker, 2005). The perceived 'punitive turn' in youth justice also adds to these concerns that criminal justice is being enforced at the expense of social justice (Bateman, 2011; Crawford and Newburn, 2013; Muncie, 2008). The YOTs in the case study have shown whilst there is socially just practice occurring, it is within individual YOTs rather than on an organisational scale. Within the specific case of mental health practice within the YOS, promoting social justice could prove to be highly beneficial, with the potential to better meet the aims set out by the YJB, better meet the needs of young people, and potentially to reduce the risk of re-offending.

Mental health work within the YOS, whilst the focus of this work, is not an isolated example. The issues that have been identified through the interviews and analysis as impacting mental health work within the YOS may also apply to other aspects within youth justice. Many of the issues that have been identified are linked to the underlying structures within youth justice, and the ways in which provision has been created and organised. The YJB has tended to focus upon practice and the applied aspects of youth justice, potentially to the exclusion of theoretical and philosophical issues that surround the discipline. Whilst there have been arguments that understanding and consideration of underlying theory is not always necessary to successfully

carry out work (Thyer, 2001), when there are problems occurring within an organisation as a whole, reconsideration of these standpoints can be useful to create change (Gomory, 2001; Haslam, 2014; Van Soest, 1994). There have been numerous commentators, researchers, and interested parties who have criticised the current youth justice system, with concerns that it is not working as desired (Bottoms and Dignan, 2004; Fergusson, 2007; Goldson, 2010; Muncie, 1999; Pitts, 2003; Smith, 2010; The Howard League for Penal Reform, 2011a). Initiatives to improve practice have not been effective, and so reconsideration of the underlying structure and approach of the YOS may be necessary.

Justice as fairness is theoretically applicable to institutions (Lovett, 2011; Rawls and Freeman, 1999; Rawls, 1971). Whilst proponents of other theories of social justice have been sceptical of the practicality of this (Kukathas and Pettit, 1990), given a clear context, organisational boundaries, and stated aims, organisational structures such as the conceptual model used in this work can be created based upon Rawls's theory. These guiding principles and structures can then ensure practice occurs in a way that is compatible with social justice. This work created a conceptual model of the YOS based upon social justice using the stages outlined by Rawls for creating guiding principles (Rawls, 1971), frameworks for achieving purposeful action from SST (Checkland, 1999), and information found within the case study. Whilst within this work this model was purely conceptual, the YOTs participating in this work that were structured or operated similarly to the conceptual model reported better results, displayed more efficient working, and happier staff. From this a connection can be made between using social justice within organisational structures, and improvements within the YOS.

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**Appendix**

## 8.1: Participant Recruitment Materials

The following were sent to YOTs during the participant recruitment phase, with the participant information sheet (Appendix 8.2).

Dear [Head of Service];

I am a researcher at De Montfort University and currently working on research focusing upon mental health provision within the Youth Offending Service. I am writing to you as [AREA] YOT uses an interesting approach to mental health which is not used by many other YOTs. The aim of the research is to discover which form of mental health provision is most appropriate within Youth Offending Teams to act as a standard for the service as a whole. As [AREA] YOT employs a novel and successful form of provision that I would like to include in the research I would like to speak to the mental health workers within your team.

These discussions would be focused upon common issues within mental health practice and how the current form of provision helps team members to overcome them. I appreciate that you are all very busy, so these discussions will be arranged in a way to best accommodate you and your team. This means discussions could take place over the telephone or skype if it is inconvenient to meet personally; discussions can also take place individually or in groups depending on when individuals are available. Ideally, each discussion would be no more than an hour, however, shorter sessions will be fine if this is too long.

The research is being funded by the Economic and Social Research Council (ESRC) and I am currently seeking the support of the Youth Justice Board. It is hoped that the completed research will be published and add to the discussion and debate around mental health within Youth Justice. If you are happy to be involved, please pass this letter and the accompanying information to the mental health staff within your team. I will be in contact again within a week to arrange a meeting.

I am very appreciative of your time and hope this opportunity to discuss mental health provision is of interest to you.

Many thanks,

Jessica Urwin

Dear [Head of Service];

Last week you should have received a letter regarding an opportunity to take part in a research project being carried out by myself at De Montfort University. The focus of this project is upon the provision of mental health services within the Youth Offending Service. I am contacting you as a follow up to this to schedule interviews with those from your team willing to take part. If you could pass on this message and the attached consent form to the mental health workers within your team I would be appreciative.

Please let me know if you would like to take part and when would be a convenient time for an initial discussion. I am very happy to come to your offices for interviews, however, if there is another venue you would prefer please let me know. Also if a face to face meeting is inconvenient, interviews can happen over the phone or skype. I'd like to start initial discussions within the next two weeks. If you do not wish to take part, please let me know and I will not contact you further.

If you would like more information about the research or have questions, please do not hesitate to contact me at: yotresearch@hotmail.co.uk

Many thanks,

Jessica Urwin

Research Opportunity: Mental Health Provision Within Youth Offending Teams

Mental Health is a significant issue within Youth Justice, with high numbers of service users needing some form of provision. This research aims to look at existing forms of provision to see which approach best allows workers to overcome problems.

The research is being funded by the Economic and Social Research Council, has been approved by the De Montfort Ethics Committee and the YJB.

This research aims to include a number of different models of provision so that the realities of practice can be understood and each model can be compared on the basis of ability to overcome problems.

All those who take part are guaranteed confidentiality, anonymity and the right to withdraw at any time. All consent is voluntary.

Participants would be asked to take part in three, one hour discussions, spread over a few weeks and can be done in person, over the phone or on skype. Discussions can be held individually or in groups.

For this I am looking to discuss common issues and solutions within practice with mental health workers within youth offending teams.

It is hoped that the research will be published and add to the current discussion and debate around mental health within Youth Justice.

If you wish to be involved, contact yotresearch@hotmail.co.uk for further details

## 8.2: Participant Information Sheet

This information sheet was sent to YOTs during the participant recruitment phase of the research. It was accompanied by the materials in Appendix 8.4

What is the Project About?

This project is investigating which models of mental health provision are best able to promote social justice within the Youth Offending Service and why.

Who are you?

I am Jessica Urwin, a PhD student at De Montfort University. I recently completed a Master's degree in Social Work research and in 2008 gained a BSc in Psychology. The current project is being supervised by Dr. Jean Hine and Dr. Nick Flynn who are both members of the Criminology department at De Montfort University.

Who approved this project?

I am receiving a studentship from the Economic and Social Research Council (ESRC), which is the funding source for this project. Ethical approval has been gained from De Montfort University's ethical committee, and the Youth Justice Board has expressed their support for the project.

What are you going to do?

I am constructing a case study based upon varying forms of provision. The data informing this case study will come from audio recorded interviews with mental health workers within the youth justice system. This will allow me to see what the benefits and advantages of each model are in relation to social justice and what works best in specific contexts.

How much time would I have to give?

Initially I'm hoping to conduct three interviews with each individual. The first interview will likely be around an hour long, and if possible, I'd like this to be a face to face discussion. Further interviews will focus upon issues of importance from the initial interview and so may vary in length. However, these may take place over the phone or via skype if this is easier.

What do I get for taking part?

Aside from my thanks, I am afraid there are no incentives for taking part. However, it is an opportunity for you to discuss your work in relation to social justice and have your views listened to. Often discussing challenging issues is rewarding of itself.

What are my rights as a participant?

As a participant you have the right to:

Fully informed, voluntary consent

Anonymity and confidentiality

The right to withdraw

This means you don't have to take part if you don't want to, anything we discuss is confidential, I won't refer to you in my report in any way that makes you identifiable, and if you want to leave the project at any time, you are free to do so.

I want to take part, what's next?

I will be contacting you shortly to arrange a time for interview and gain written consent (see attached sheet). If you do not wish to take part, please email me and I will not contact you further about this research.

I still have questions.

Please contact me, I'll be happy to try and answer any questions you may have about the project.

Contact Details

Researcher- Jessica Urwin, email: yotresearch@hotmail.co.uk

Project Supervisors- Jean Hine, email: jhine@dmu.ac.uk Nick Flynn, email: nflynn@dmu.ac.uk

**8.3: Consent Form**

This project is investigating how different models of mental health provision can improve levels of social justice within the Youth Offending Service. This involves using audio recorded interview discussions around these topic areas as the basis for case studies. Each case study will focus upon a particular form of provision and its ability to promote social justice.

All participation is voluntary and all data will remain anonymous and confidential. If at any point you wish to withdraw from the study, regardless or reasons why, you may and this will not be questioned. If you do wish to take part, I would like to request around an hour of your time for an initial interview, with no more than three follow up interviews.

I have read and understood the above information                ❑

I am aware of my rights as a participant             ❑

I consent to participate in this project                   ❑

Signed..................................................        Date...........................................

### 8.4: Interview Prompt Questions

The following are questions that were used as prompts during the interviews. Some of these were used in follow-up discussions and so relate to specific factors that had already been discussed, or specific aspects of provision in a particular area.

What is your role?

Who are the other members of your team?

How do you interact with the YOT?

Do you work as part of another agency?

Do you have links to other agencies? (Voluntary Sector)

What are the common problems within your work?

What are the successes within your work?

Do you have the resources you feel are necessary?

Who manages you?  Do they understand the duality of the role?

Do you feel you are working towards a criminal aim or a welfare aim and are there any issues with the two different approaches within the YOS?

Is mental health generally understood by the team here?

Do you feel you are able to work with a mental health ethos at the YOS?

Do you feel mental health is being criminalised?

Do you think there is a better way of working to help these young people?

How does working in a large rural area affect provision?

Is there a difference in need compared to urban areas?

Does covering such a large area create issues with young people being able to access services?

What is the approach to problems that may be "stock and trade" for YOS such as conduct disorder? Do they get treated as mental health issues?

Do you feel YOS workers tackle issues around conduct disorder within their own work?

How do you deal with issues of culture?

Does class or socioeconomic status play a role in dealing with different young people?

Does having a social justice ethos make working with these issues easier?

How do you feel that the working culture here was achieved?

Do you feel it's important that managers have a caseload in their particular area?

What elements of the set up here do you think would be applicable to other teams?

The aim of the YOS is to prevent youth crime, how are you working towards prevention?

Can mental health play a significant part in prevention and how?

How do you deal with "risk", often work in this area can be about covering risk, is that a concern for you?

Have there been any changes with the structure of the YOT due to funding cuts? Have any roles been replaced or changed?

How do you view yourself and your role? Would you say you identify as a YOS worker or a health worker?

It seemed that you sometimes overcompensate for lack of resources within the team by doing more than you would expect, how do you feel about this?

Do you feel there are clear boundaries to your work? Do you often have people asking what you do?

Do you feel there are high levels of accountability in your work? Do you have to justify what you do often?

Do you get any kind of feedback from co-workers or the young people you work with? How do you rate what you're doing?

Would you say there's a particular attitude or ethos within the team here? Is there a large focus upon welfare?

Do you feel supported within your role here? Do you have opportunity do fully discuss your thoughts/feelings about your work and what it's achieving?

Do you feel respected as a professional by other members of the YOT?

## 8.5: Debrief

Thank you for giving me your time and talking to me, it's a great help. Now your active participation in this project has come to an end, I'd like to remind you that all your rights as a participant still remain. If you have any concerns or questions about confidentiality, anonymity or withdrawing from the project, please do not hesitate to contact me at the below addresses.

If taking part in this project has interested you in social justice or mental health provision within the context of youth justice, please refer to the organisations listed below, they are informative and useful on these topics. Also, please feel free to email me if you'd like to discuss these issues further, in a non-research capacity.

When analysis of the data is complete I will be contacting you with my findings, please feel free to let me know what you think of them, as this feeds back into the research. Once again, thank you for taking part in this project.

Related Organisations

The Howard League for Penal Reform - http://www.howardleague.org/

A charitable organisation that campaigns for change in methods of crime prevention and lessening custodial sentences. They often adopt a social justice approach to their work.

The Centre for Mental Health - http://www.centreformentalhealth.org.uk/

A mental health charity which aims to improve service provision particularly for young people and in the criminal justice system.

The Centre for Social Justice – http://www.centreforsocialjustice.org.uk

A think tank working to promote socially just policies to government, they also highlight the work of small community, charitable and voluntary organisations.

Contact Details

Researcher- Jessica Urwin, email: jess.urwin@googlemail.com

Project Supervisor- Jean Hine, email: jhine@dmu.ac.uk

**8.6: Interview Transcript Excerpt**

The following is an excerpt from the 1st interview with William, from Woodshire YOT. It is presented here to give the reader an understanding of the style of the interviews and how the questions were presented.

RESEARCHER: Ok. Erm, Beyond the ASSET, once it's been referred, would you use your own assessment tools for that?

WILLIAM: Well it depends what, it depends, really the kind of, it really depends on the context, that's why I'm really not, I'm not a fan of imposing a particular tool on any, on any type of group. Each client is very different, for example, the SQUIFA, as you know, is a very small screening tool, so that's, that's an issue around potentially making referrals or not. Erm, the SIFA I almost never use because it's almost completely irrelevant to young kids, it's irrelevant to families, it's very medical, medicalised, specifically pathologising tool that I don't find is terribly helpful. So I would rather use, and often do use a CAMHS general, kind of, if you like kind of assessment format which is not very strict, it's kind of loose. [pause] Erm, and I know about the new forms that they're thinking about bringing in the CHAT, comprehensive health assessment tools, and I've made, I've got very strong opinions about that as well. [laughs] But that's another story! Erm, so actually we don't use any specific assessment tools, we use whatever we need at the time we need to use it.

R: So you prefer a more flexible approach to that. And is that the way things are set up here? Are you happy with that?

W: Oh yes, I'm completely happy with that, completely happy. I see absolutely no value in placing an assessment across the board that may not fit half the client group, so no, they're absolutely fine with that.

R: So being able to use the assessment that's most appropriate to that individual, does that mean you use a more person centred approach here or...?

W: Well, it's a more eclectic approach definitely, I think it's erm, I think it's, my background's very much kind of family oriented, I'm trained as a family therapist so, it's erm, I'm hoping it

takes account of potentially family issues seriously, peer issues, we've got a couple of problems emerging with gangs and that kind of stuff so we're looking at peer assessments, that kind of stuff. So it's a general, eclectic approach really. There might be a medical focus if required, there might not, it depends on the circumstances.

R: Ok. Aside from the flexible approach and being able to work well with other agencies, what do you think has been successful about this new provision?

M: I think basically, it kind of, erm, what's really important about it is that it has, made it very clear, between health and the youth justice service, exactly what health provision should look like. So health have signed up to it and the youth justice service have signed up to it, and the partnership board has signed up to it. And on the partnership board, there's probation, police, public health, substance misuse commissioners, that kind of thing. Everyone is signed up to this agreement. So I think with a strategic commissioning agreement, I think you have a very powerful, if you like, advocate for what a service should look like. And on that basis I think everyone who, everyone who is working towards the agreement knows that, and I think that helps to cement and consolidate the service, make it much more coherent.

R: Ok. So, it's really about delineating what provision you need, what should be done, what the services DO, within that.

W: Yeah and to meet the needs of your particular client group. I mean we're working in a predominantly rural area that would be quite different to a city wide provision so, it's different, so, our agreement actually came out of the health needs analysis from our client group.

R: Ok. So where was the drive for that change in provision? Did that come from yourselves in kind of a bottom up way or?

W: No it was actually, I wasn't involved in it at the time. They had here, a number of years ago, they had some very experienced psychologists, four, part time psychologists but they were costing the service an absolute fortune so I think they were banded about 8C, 8D, so maybe, I don't know if you know what the banding comes up, but their pro rata equivalent salaries were something like 70 odd thousand each. They couldn't really afford it. And also, actually there were issues, there were problems around, for example, opening up files in CAMHS and opening up files here, there were problems about sharing information, so whilst they had a very experienced team, doing some great work here on the ground, it didn't fit. It didn't really fit into a wider context, so nobody, and nobody really knew what they we're doing, because they

weren't accountable. [pause] So it partly came out as a result of a reduction of funding for the whole service, it then had to look at what do we really need and what can we afford, so it then emerged out of multi-levels of different kind of problems. So the service at that point was then de-commissioned and the new service was commissioned.

R: So it really was seen as a need because of problems in the old form of provision.

W: Yeah.

**8.7: Asset Form Section 8; Emotional and Mental Health**

The following have been taken from the Asset form which is used by youth justice workers to assess young offenders. Section 8 relates to emotional and mental health and is the main factor in deciding to refer to a specialist. Also presented here is the guidance given to youth justice workers for this section of the assessment.

## 8. Emotional and mental health

Is the young person's daily functioning significantly affected by emotions or thoughts resulting from the following?   Yes   No   Don't know

*Coming to terms with significant past event/s (e.g. feelings of anger, sadness, grief, bitterness)   ☐   ☐   ☐

*Current circumstances (e.g. feelings of frustration, stress, sadness, worry/anxiety)   ☐   ☐   ☐

*Concerns about the future (e.g. feelings of worry/anxiety, fear, uncertainty)   ☐   ☐   ☐

Evidence (Please explain reasons for any 'Don't know' responses.)

| | Yes | No | Don't know |
|---|---|---|---|
| *Has there been any formal diagnosis of mental illness? | ☐ | ☐ | ☐ |
| *Any other contact with, or referrals to, mental health services? | ☐ | ☐ | ☐ |

Evidence (Please explain reasons for any 'Don't know' responses.)

*Are there indications that any of the following apply to the young person?

   Yes   No   Don't know

*S/he is affected by other emotional or psychological difficulties (e.g. phobias, eating or sleep disorders, suicidal feelings not yet acted out, obsessive compulsive disorder, hypochondria).   ☐   ☐   ☐

*S/he has deliberately harmed her/himself.   ☐   ☐   ☐

*S/he has previously attempted suicide.   ☐   ☐   ☐

Details (Specify type of illness, medication, whether she/he co-operates with treatment etc. Please explain reasons for any 'Don't know' responses.)

*Rate the extent to which the young person's emotional and mental health is associated with the likelihood of further offending.
(0 = not associated, 4 = very strongly associated)

| 0 | 1 | 2 | 3 | 4 |
|---|---|---|---|---|

279

# 8. Emotional and mental health

Mental and emotional well-being will be influenced by issues such as personal relationships and social environment as well as medical factors. Different cultural groups will vary in their views about what constitutes emotional well-being and this needs to be borne in mind. The following three factors, however, may provide a useful framework for understanding the young person's mental health needs within the context of his/her particular situation.

- **Events/circumstances**

  Events which are unpredictable and which the young person feels they have no control over are likely to be particularly stressful. The research literature also makes a helpful distinction between 'normative' events which all young people experience at some time (e.g. peer pressure, puberty, changing from primary to secondary education) and 'non-normative' events which affect particular individuals at specific times (e.g. family breakdown, illness, bereavement, abuse). A young person facing a cluster of these events is more likely to have difficulties in managing the resulting emotions.

- **Support networks**

  What help and support (either formal or informal) is available to the young person?

- **Coping abilities**

  The young person's age, gender and maturity will all affect the range and type of coping strategies used. Some common approaches include 'problem-focused coping' (e.g. trying to remove or reduce the cause of the stress), 'emotion-focused coping' (e.g. trying to change the emotions associated with a problem) and 'withdrawal' (e.g. denying the existence of a problem). Young people will vary in the way that they perceive stressful situations and those who have a realistic understanding of a difficult situation will be better placed to cope with any ongoing stress. Having some sense of control will also help the young person to feel that s/he can cope.

Focusing on the connections and interactions between these three factors helps to ensure that assessment of the young person's emotional and mental health is rooted in the context of his/her ongoing life experiences.

This section may raise some issues which cannot be fully assessed here (e.g. issues about mental illness or suicide attempts). *Asset* should act as a 'trigger' to highlight areas where further specialist assessment may be required (e.g. the Youth Justice Board's standardised mental health assessment tool).

### Coming to terms with significant past event/s

This question looks at the impact of different events on the young person's emotional well-being. It can include events affecting the young person directly and problems faced by family members, carers, or friends who have an impact on him/her. Some of the events will have been identified in earlier sections (e.g. abuse, loss). The focus here is not on the events themselves, however, but on the way in which they currently affect his/her thoughts and emotions. Tick 'yes' if there are thoughts and feelings that have a persistent and powerful impact on his/her everyday life.

**Current circumstances**

This question looks at the impact of current circumstances on the young person's emotional well-being. It can include circumstances affecting the young person directly and problems faced by family members, carers, or friends who have an impact on the young person. The focus here is not on the events themselves, however, but on the way in which they currently affect his/her thoughts and emotions. Tick 'yes' if there are thoughts and feelings that have a persistent and powerful impact on his/her everyday life.

**Concerns about the future**

This question looks at the impact of the young person's concerns about the future on their emotional well-being. Tick 'yes' if there are thoughts and feelings that have a persistent and powerful impact on his/her everyday life.

## Has there been any formal diagnosis of mental illness?

If the answer is 'yes' it is essential to give as much information as possible in the evidence box. If there has been a formal diagnosis, please specify the nature of the illness, the particular symptoms that s/he experiences and details about any medication.

## Any other contact with, or referrals to, mental health services?

If the answer is 'yes' it is essential to give as much information as possible in the evidence box. If you are aware of any previous referral to mental health services, please indicate when this occurred and the reasons for it. If the information is unavailable, please indicate this in the evidence box.

## Are there indications that any of the following apply to the young person?

It is important to be clear about the wording of this section. It is not asking whether the young person has definitely harmed him/herself or attempted suicide. Instead, the question asks whether there are indications of psychological difficulties, self-harm or suicide attempts. In order to tick 'yes', you must have some information to denote difficulties in one or more of these areas. This does not necessarily mean having full details – a comment made by the young person or their carer, information from a GP or from a case record could all be indications. The key point is that a 'yes' response must be based on something tangible.

A 'no' response here does not necessarily mean that these issues are not relevant to him/her, but means that there is no evidence of them at the moment. If new information comes to light later on, the form can be updated to reflect this. The 'don't know' option might be appropriate in cases where you have an intuitive feeling that s/he has experienced difficulties in some of these areas, but where there are no other clear indications. It is a way of noting a concern which can be explored more fully later on.

**S/he is affected by other emotional or psychological difficulties.**

This could include phobias, hypochondria, eating or sleep disorders and obsessive compulsive behaviour. Suicidal thoughts and feelings which the young person has not yet acted on should be recorded under this question.

**S/he has deliberately harmed her/himself.**

If there are indications that s/he has self-harmed it is essential to give details in the evidence

box. Please say where the information has come from and how much weight you attach to it (e.g. do you think s/he is quite likely to have self-harmed or are you sure that this has happened?).

### S/he has previously attempted suicide.

If there are indications that s/he has previously attempted suicide it is essential to give details in the evidence box. Please say where the information has come from and how much weight you attach to it (e.g. do you think s/he is quite likely to have attempted suicide or are you sure that this has happened?).