



poses for breaking the law? Do you understand the best way to deal with that risk? Are you aware of the many "tipping points" your child may have in his or her life that you can anticipate? What will you do if it all goes wrong, the phone rings, and "Hello, it's the local police. We have your child in custody" is what you hear? Groundbreaking work in the United Kingdom can help you to answer these questions.

In 2003, as police officers from the Lancashire Constabulary, we were asked to look at new ways to prevent young people from entering the criminal justice system. Our focus was drawn toward mental health, in particular AD/HD.

Upon discovering that five percent of the population have AD/HD but twenty-five percent of the prison population displayed the symptoms of AD/HD, we realized that the U.K. police service did not recognize the importance of this mental health disorder on crime and antisocial behavior. Only when we researched AD/HD did we become aware that those with AD/HD have a greater risk of entering the criminal justice system. In the United Kingdom, we found that

- People with AD/HD are twice as likely to commit a crime.
- People with AD/HD commit three times as many offenses as those without the disorder.
- People with AD/HD are more susceptible to problematic drug use.
- People with AD/HD are more likely to attempt to take their own lives.

A problem-solving approach

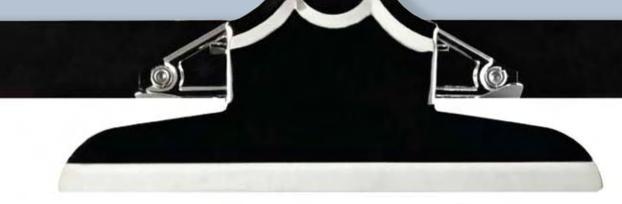
There are many routes into the criminal justice system for people with AD/HD. Offenses such as criminal damage and violence are prevalent in this cohort, whereby typically the offender is inappropriately encouraged to commit crime by peers. Young people with AD/HD are poor at making appropriate friendships. They feel committing these acts will help cement friendships and lift their personal esteem. People with AD/HD are nearly three times more likely to commit arson, a particular crime that offers immediate gratification and reinforcement, as the child and peers can literally see the crime taking place.

When challenged with low self-esteem and withdrawal or rejection from peer groups, young people with AD/HD are observed through case studies

migrating to "hanging out" with older, dysfunctional gangs and groups. These groups often present opportunities for smoking heavily, underage drinking, and generally behaving in ways that are age-inappropriate for the AD/HD sufferer. Being drunk presents similar feelings of acceptance and calm as described for unlawful substances, but this is not sustainable in the longer term. Most participants move, impulsively, under either duress or encouragement from the new "friends" into what are often termed "harder" drugs, which despite the inherent medical risks are more sustainable over time than excessive drinking.

The transition from "soft" to "hard" drugs is proven to be quicker in people with AD/HD, as is the development from user, through abuser, to total dependence.

We decided on a problem-solving approach to help these young people. The key challenge for the criminal justice agencies was to focus on improving services for the AD/HD population. We challenged our partners to understand





Phillip Anderton, PhD, and Stephen Brown

The new approach to mental health and criminal justice championed by Phil Anderton and Steve Brown has seen widespread changes in the management of AD/HD throughout England and Wales. Recently the British government published its Youth Crime Action Plan, recognizing in it for the first time that AD/HD is a risk factor for young people entering the criminal justice system. Here is the "Parental Checklist" of advice Anderton and Brown give parents in their country to keep on hand in case their child with AD/HD comes into contact with the criminal justice system.

Tell the police

- what AD/HD is.
- not to ask long, multiple, complicated, or leading questions.
- to expect the use of swear words and strong language, especially if Tourette syndrome is a co-occurring condition.
- to expect their body space to be compromised.
 Lack of body- and self-awareness are common in people with AD/HD.
- the following example to explain AD/HD:
 People without AD/HD see a "stop" sign in their brain when they start to misbehave; people with AD/HD have no "stop" signs.

Tell the court

- if your child is taking medication and at what time of day the medication is working best. Ask that hearings be scheduled during that time, if possible.
- that your child will have difficulty answering complicated, leading, and multiple questions.
- to try not to judge guilt or alter sentencing decisions based on the AD/HD-related behavior of the defendant in the courtroom.
- that regular breaks would help your child to refocus his or her attention beyond its naturally short span.

For Parents

- When the police ring, are you the most suitable person to answer?
- If you have AD/HD yourself, can you advocate for your child effectively? If not, get another adult to attend.
- Can you explain AD/HD to others coherently?
- If your child is your child on medication, do you understand its limits and effectiveness?



Robert M. Tudisco, Esq.

For people affected by AD/HD, the situation with regard to law enforcement and the justice system in the United States is very different from that in the United Kingdom. Attention turned to attorney Robert M. Tudisco for advice for parents in this country.

Whether it is a legal or cultural issue, the approach in England is such that the police try to intervene before arrests to identify what Anderton refers to as 'tipping points' and put these kids back on track. That is unfortunately not the case in the United States, though I hope someday it will be. When the police get involved, it is rare in the states that they will understand the child's special needs and decide not to arrest or prosecute.

The parents should immediately contact an attorney who has experience with AD/HD and the contact and communication should come through [the attorney] as a conduit. If parents are informed that their child is in custody, they should advise the police about the disability. An attorney should follow up that conversation and get involved immediately. It is important that the child is protected by an attorney who has a working knowledge of AD/HD and/or your child. Such an attorney is the perfect person to advocate for your child's rights and to explain his or her particular struggles.

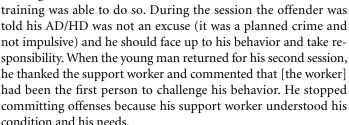
Be willing and prepared to sign authorizations so that your child's attorney and the court can get information from your child's mental health provider. This is especially important when it comes to medication management. It is important to get those "agents of change" involved in this process. While many courts will have social workers and people to screen defendants, no one knows your child like his or her mental health care provider.

None of this advice will make an encounter with the law not happen, but it can greatly minimize its impact. The metaphor I always use is that it may simply mean the difference between navigating a minefield with a map in your hands versus being chased through it blindfolded.

An expert on special education law and disability advocacy, **Robert Tudisco, Esq.**, is a former prosecutor and criminal defense attorney specializing in representing individuals with AD/HD and co-occurring conditions in the juvenile and criminal justice systems. Tudisco is a former member of CHADD's board of directors and a current member of Attention's editorial advisory board.

AD/HD and how they could support those young people with a diagnosis. Our question to them was, "As a police officer/judge/social worker, do you understand AD/HD and how it affects a young person?"

We trained all our youth-offending workers in understanding AD/HD and quickly had an experience of success. One youth charged with shoplifting claimed it wasn't his fault, as he had AD/HD. The support worker would not normally have challenged this, but after the



The tipping points

Concentrating on the events that make a young person with AD/HD vulnerable to entering the criminal justice system, we continued to develop our work. These events are outlined in Anderton's book *The Tipping Points*. When we first started we had little knowledge, but through our association with CHADD in the United States, and ADDISS in the United Kingdom, we talked with many parents and young people and heard their life stories. Some of them have been uplifting, but without a doubt, some of them have been wasted lives. We believe if we work with young people from their perspective, we can prevent their outcomes from being so poor.

Tipping points are those times in a young person's life when, if an appropriate and timely intervention is not made, the person with AD/HD has a higher than average chance of going forward into a life that has negative and harmful outcomes.

Appropriate interventions at these critical points can help to steer the young person in a more positive direction. While it's not a police responsibility to intervene in some of these areas, organizations such as CHADD chapters could take on a vital role. When we visit CHADD we are overwhelmed by the strength of the chapters and the support offered to parents. We would encourage all chapters to talk with their local police departments and offer training sessions to officers. Our biggest success has come through telling people about the disorder and getting them to change their work practices. It is amazing the difference it makes once an officer understands that the behavior is not a choice but due to a mental disorder.

Within the criminal justice system those with AD/HD are disadvantaged. In the first interview with the police, a suspect who



What are the Tipping Points?

Appropriate interventions at critical tipping points can help to steer the young person in a more positive direction. Typically these occur with

- > rejection and group exclusion at school;
- > transition from junior high to high school;
- > exclusion, whether temporary or permanent, from school;
- > mixing with older children;
- > early and continued smoking of cigarettes;
- > first contact with the criminal justice system;
- > difficulties with achievement; and
- > the first job.

cannot focus or concentrate or is easily led might not be able to answer long or complicated questions correctly or in his or her best interests. In court proceedings, judges admit to forming opinions regarding defendants based upon their demeanor and behavior in the court setting. But are such judgements appropriate if the inattention, inability to sit still and concentrate, and inappropriate outbursts are biologically driven by a medical condition, rather than "chosen" disruptive behavior? One can only question the fairness of the trial and the relevance of proceedings if the disability of the defendant is not accounted for accordingly.

Most parents are not prepared for the phone to ring and the police to ask them to come to the police station because their son or daughter has been arrested. It's a shock, and it is wise to prepare a list of actions should it happen to you. We encourage parents to keep this information in a safe place should they need to refer to it. As police officers, we developed straightforward advice on how to navigate the criminal justice system. Some of that advice pertains to the United Kingdom, however, and will not apply at present in the United States. Refer to the sidebar that accompanies this article for more information.

Young people with AD/HD can be prevented from entering the criminal justice system. The support of parents cannot be underestimated. Groups such as CHADD are also vital; they provide support for families and individuals and advocate for change with local, state, and federal governments. We all have a role to play to ensure young people achieve their potential. •

Phillip Anderton, PhD, served over 27 years in the police force in the United Kingdom, working locally and nationally on many aspects of policing. He is the author of numerous papers on ADHD and the criminal justice system, as well as the book The Tipping Points: What professionals should recognise as the social impact of ADHD (Middlesex, UK: ADDISS, 2007). Anderton recently began a second career at PriceWaterhouseCoopers as a management consultant, focusing on performance improvements within policing.

Stephen Brown, a police sergeant, specializes in neighborhood policing and youth engagement and has been a police officer for 23 years. Anderton and Brown have spoken at several CHADD conferences and will speak at the conference in Cleveland in October 2009.