Summaries

_Justitiële verkenningen_ (Judicial explorations) is published eight times a year by the Research and Documentation Centre of the Dutch Ministry of Security and Justice in cooperation with Boom Lemma uitgevers. Each issue focuses on a central theme related to judicial policy. The section Summaries contains abstracts of the internationally most relevant articles of each issue. The central theme of this issue (no. 4, 2013) is _Recent developments in forensic care._

**Seven years after the Commission-Visser: a new equilibrium?**
_M.J.F. van der Wolf and L. Noyon_

Since 1988 the Dutch entrustment order for dangerous mentally disordered offenders (TBS) is organised around three basic principles: treatment, legal protection and social security. In 2006 the Parliamentary Inquiry Commission ‘Visser’ reviewed the TBS order and made seventeen recommendations. This article seeks to investigate to what extent the implementation of these recommendations contributed to developments like the increasing restraints on leave permits and a lengthened average stay. Since 2006 there has been a strong emphasis on security. For a balanced execution of the TBS order more attention is needed for treatment and legal protection.

**Forensic care anno 2013 and the position of the TBS order within**
_A.A. van Gemmert and N.H. Tenneij_

The organization and execution of forensic care in the Netherlands has changed considerably over the last six years. In this paper the authors define forensic care as all mental health care for adults under the criminal law, including care for the intellectual disabled, and addiction care. Before 2007 the Ministry of Security and Justice sole responsibility was the financing and execution of the measure detention under a hospital order (the so-called TBS-measure). All other forms of forensic care were then provided under the responsibility of the Ministry of Health, Welfare and Sports. Nowadays, the Ministry of Security and Justice is responsible for all forensic care. The main reasons for this change were the increase observed in the number of patients detained under a hospital order and an increase in the length of stay necessary for the successful completion of the treatment,
which resulted in an overload of the TBS-system, an observed lack of care possibilities for the detained, and a lack of transition between forensic and regular care.

**Forensic psychiatry and the search for balance between various interests**

*E. Bulten and J. Groeneweg*

Policies within forensic psychiatry can be characterized by the ongoing search for balance between the interests of stakeholders. These interests vary in a lot of cases. The interest of society, the patient and the professional differs within a complex framework of political, ethical and juridical guidelines and scientific evidence. These differences are illustrated from a management’s point of view by describing the treatment issues in regard to forensic psychiatric inpatients with substance abuse disorders. Treatment policies on drug use during treatment balance between treatment guidelines and restrictive measures. These restrictions have to be adjusted to the necessary treatment programmes for developing new pro social lifestyles. The treatment policy on relapse and leave should balance between patient needs and the needs of society. The result of this interesting but also challenging and complex quest depends on the sensitivity of stakeholders for the interests of the others.

**Reducing the length of stay of forensic psychiatric patients in high security hospitals: a way out of the crisis?**

*M.H. Nagtegaal*

The economic crisis in the Netherlands forces the Ministry of Security and Justice to cut expenses. In the forensic psychiatric sector, the main savings are expected from reducing the length of stay of forensic psychiatric patients (TBS-patients) in high security hospitals. Currently, over 70% of all TBS-patients do not reach the now set goal of successfully terminating their treatment program within eight years. The present article questions whether it is plausible that this goal will be reached. Research has shown that there are several possible measures that can be undertaken to reduce the length of stay. Examples of these are identifying subgroups of patients who take particularly long to complete their treatment and setting up interventions for those patients, reducing the focus on risks in society and in forensic prac-
practice, and the inclusion of protective factors in risk assessment. These factors may help in finding a way out of the crisis.

**From disorder to neurocognition in forensic psychiatric treatment**

*K. von Borries, E. Bulten and Th. Rinne*

Psychology, psychiatry, criminology and sociology provide scientific knowledge for the forensic psychiatry about disorders, the behaviour of offenders, offenses and the influence of the environment. In recent decades the What Works principles (risk, need, responsivity) became theoretical cornerstones of forensic psychiatry. However, additional theories have gained popularity: models addressing protective factors and the well-being of the delinquent. As in general psychiatry neurobiological research about the relationship between the brain and behaviour is influencing forensic psychiatry more and more. The translation of these results into regular assessment and treatment seems a matter of time. The development of a comprehensive neuropsychological test battery is an attempt to bridge the gap between this basic neurobiological-neurocognitive research and forensic psychiatric practice. This article describes the influence of the neurocognitive, neuropsychological knowledge in general and in particular the construction of this battery and its usefulness in daily practice. Whether this development is the beginning of a fundamental paradigm shift or an addition to the current approach, remains to be seen.

**Long-term extramural supervision on sex offenders**

*H.J.M. Schönberger*

The Dutch Ministry of Security and Justice intends to change legislation enabling long-term community supervision. Since it initially focused on sex offenders, the main focus of this article is on effectiveness of supervision programs and legislation for this group. Supervision programs that combine elements of control and treatment, guidance or social support are found to be the most effective in reducing reoffending. In addition, possible underlying mechanisms of effective supervision, such as social support, electronic supervision and treatment, are elaborated upon. Dutch initiatives are partially shaped by these elements, although up to this date their effects on reoffending have not yet been determined. The effects of legislation that enables supervision are more differentiated than expected, and their practical applicability is found to be crucial. In conclusion, aspects concerning
(dynamic) risk assessment, balancing community and offender interests, and tailoring supervision to subgroups are discussed. Study results could be of use to further shape and refine upcoming legislation on long-term supervision.