



A SHARING BY THE CENTRE FOR SPECIALIST SERVICES (CSS)

# NOTABLE CDRC CASES INVOLVING PSYCHOLOGICAL AND SOCIAL ISSUES

Goh Jun Yan (JY)

Senior Court Counsellor (Psychologist) (CSS)



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- Teens on the Autism Spectrum
- Elderly man with Dementia

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## 3. Community Resources

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- Samaritans of Singapore (SOS)
- Extraordinary People (EOP)
- Disabled People Association (DPA)

## 4. Self-care when handling emotional cases

- Transference/Counter-transference issues



# A Friendly Reminder

- Sharing on psychological matters
- React to any stories/anecdotes and/or continue to feel upset
- Talk to someone/professional



# STATE COURTS CENTRE FOR SPECIALIST SERVICES (CSS)

- A multi-disciplinary team consisting of psychologists, counsellors, and social worker.
- Our services include:
  - Psychological assessments
  - Brief counselling support
  - Referrals to community agencies



# STATE COURTS CENTRE FOR SPECIALIST SERVICES (CSS)

- Crisis management – distressed/suicidal
- Suspected mental health issues
- Emotional support
- Family violence
- Intimate partner violence
- Social issues – poor social support, homelessness, employment/financial struggles

# REFERRAL TO CENTRE FOR SPECIALIST SERVICES

- Notify registry staff-State the reason for activation
- Email Court Counsellor Activation Request form to [STATECOURTS\\_CENTRE\\_FOR\\_SPECIALIST\\_SERVICES@STATECOURTS.GOV.SG](mailto:STATECOURTS_CENTRE_FOR_SPECIALIST_SERVICES@STATECOURTS.GOV.SG)
- For urgent cases, there is a MS-Teams chat group set up for CDRC and registry staff can utilise it to make the request

\*Note: If court user is violent or expresses threats, activate security.

# KEY CASE # 1

“Lovers’ Squabble/Lady who was suicidal”

- C. got R. pregnant and subsequently ended the relationship. R. then started to harass C.
- R. has mental health issues (anxiety, depression, suicidal tendencies).
- R. incessantly called/emailed C./frontline officer with incoherent content/threats.
- Extensive discussion was conducted with CSS Counsellor, JO mediator and management.
- SOS referral was made-Reached out to R.

# REFLECTIONS

## “Lovers’ Squabble/Suicidal Lady”

- Beneficial for Mediators and frontline staff to have knowledge of mental health issues and how to handle them
- For challenging/risky cases, having prior discussion with CSS Counsellor helps with the case – assessment of risk, establishing safety plans prior to the case (e.g. linking R. to SOS, having additional security officers outside the room, putting A. and R. in diff rooms/ZOOM)
- Anyone who has had previous negative experiences managing suicidal/other cases may wish to recognise how their anxiety may affect the case. It may be best to request a handover/etc
- Counter-Transference issues and how our past experiences may influence our future interaction
- Importance of having self-awareness and self-care

# KEY CASE #2

## “Teens on the Autism Spectrum”

- Both C. and R. are students who are on the Autism Spectrum and studying at Pathlight Special School.
- Harassment by Respondent occurred at school grounds.
- Agreement reached via their parents who promised to communicate to each other on their teen's behavior to mitigate risk of harm/bullying. R.'s father would also engage transport service for his son so that R. do not get to see C. as much.
- CSS referred the Respondent to the Disabled People's Association (DPA) for specialized interventions to address issues of boundaries and anger. The C. is already known to counsellor at Pathlight.
- School counsellor was updated on the mediation outcome so that necessary follow up and support may be provided in school.

# REFLECTIONS

## “Teens on the Autism Spectrum”

- The presence of a court counsellor together with the JO mediator can be seen as a therapeutic platform and viewed by parties as an alternative to costly litigation.
- After mediation was over, a separate session with parties to affirm their willingness to change the problem behaviour allows for assessment and appropriate referrals to address the underlying issue (e.g. anger issues, IQ problems and sexually inappropriate behaviour).
- Beneficial in effecting longer term change than a forced settlement or an order.

# KEY CASE #3

## “Elderly with Dementia”

- R. was an elderly male who had been going down to his neighbour's house almost daily to shout at her outside the house
- During the mediation the R.'s daughters shared they suspected that R. had dementia and requested for assistance in getting him formally assessed and community and caregiver support should he have a positive diagnosis.
- Referral was made to the Agency for Integrated Care (AIC) and the daughters were provided information on elderly daycare facilities and managed to get him formally assessed.
- R. was started on medication and C. was informed of R.'s condition. C. updated that R.'s disturbance have stopped and C was glad that his daughters were willing to be involved
- R's daughters and C reached an amicable settlement and agreed to communicate more frequently so that R could be better managed.

# REFLECTIONS

## “Elderly with Dementia”

- Counsellors are activated when there is an indication of a mental health issue such as depression, obsessive behaviours, dementia etc.
- This is beneficial as counsellors are able to assess the needs as we observe what parties are saying and offer the support services as necessary.
- When parties understand why the other is acting a certain way and that perhaps treatment and social intervention may stop their behaviour they may be more willing to make concessions.
- Obtaining corroborative information from family members may prove helpful.

# ON-SITE PSYCHOLOGICAL SERVICES (OSPS)

- Cases involving unaddressed mental health conditions often place a huge strain on court resources
- Until and **unless these underlying illnesses or disorders are addressed**, it is frequently **difficult for parties to resolve the ongoing dispute**
- Emerging factors: lack of insight into mental health/family support, stigma, inconvenience, costs etc



# ON-SITE PSYCHOLOGICAL SERVICES (OSPS)

The OSPS allows court users to consult a psychiatrist from the Institute of Mental Health (IMH) via Zoom on their psychological issues and explore treatment options, in a timely and convenient manner and at no cost to court users.



The OSP will:

- Ascertain psychiatric background
- Assess risk level
- Conduct mental health screening



Consultations will aid with:

- Appropriate referrals to community agencies
- Comprehensive diagnosis by IMH
- Subsidised follow-up treatment with IMH



# COMMUNITY RESOURCES

## Agency for Integrated Care (AIC)

- Provides community-based support for:
  - Persons with mental health conditions
  - Geriatric population
  - Caregivers of the mentally/physically ill/disabled
- Links to day-activity centres and residential centres for e.g. nursing homes

## Samaritans of Singapore (SOS)

- 24/7 suicide prevention hotline
- Crisis management
- Counselling and case management

# COMMUNITY RESOURCES

## Extraordinary People (EOP)

- Extraordinary People Limited (EPL)- July 2017 as a registered charity
- Enable and support children and individuals with special needs
- Individual and group programmes (music, educational, occupational, speech & language therapies)
- Caregiver support
- Art Psychotherapy/Counselling services for cases diagnosed with Autism
- Case management and brief updates to CSS



# COMMUNITY RESOURCES

Disabled People Association (DPA)

- Dr Martha Lee
- Psychotherapy/1-to1 counselling services for cases with low IQ/autism (sexual offences, healthy boundaries)
- Regular feedback provided on each case to CSS

# SELF-CARE

- ... because you may feel pain as a result of listening to others' stories
- ....because you might feel helpless that you cannot take action for them
- ....because you might feel frustrated that you are unable to persuade people
- ..... because you need to be the best you can be in order to help others

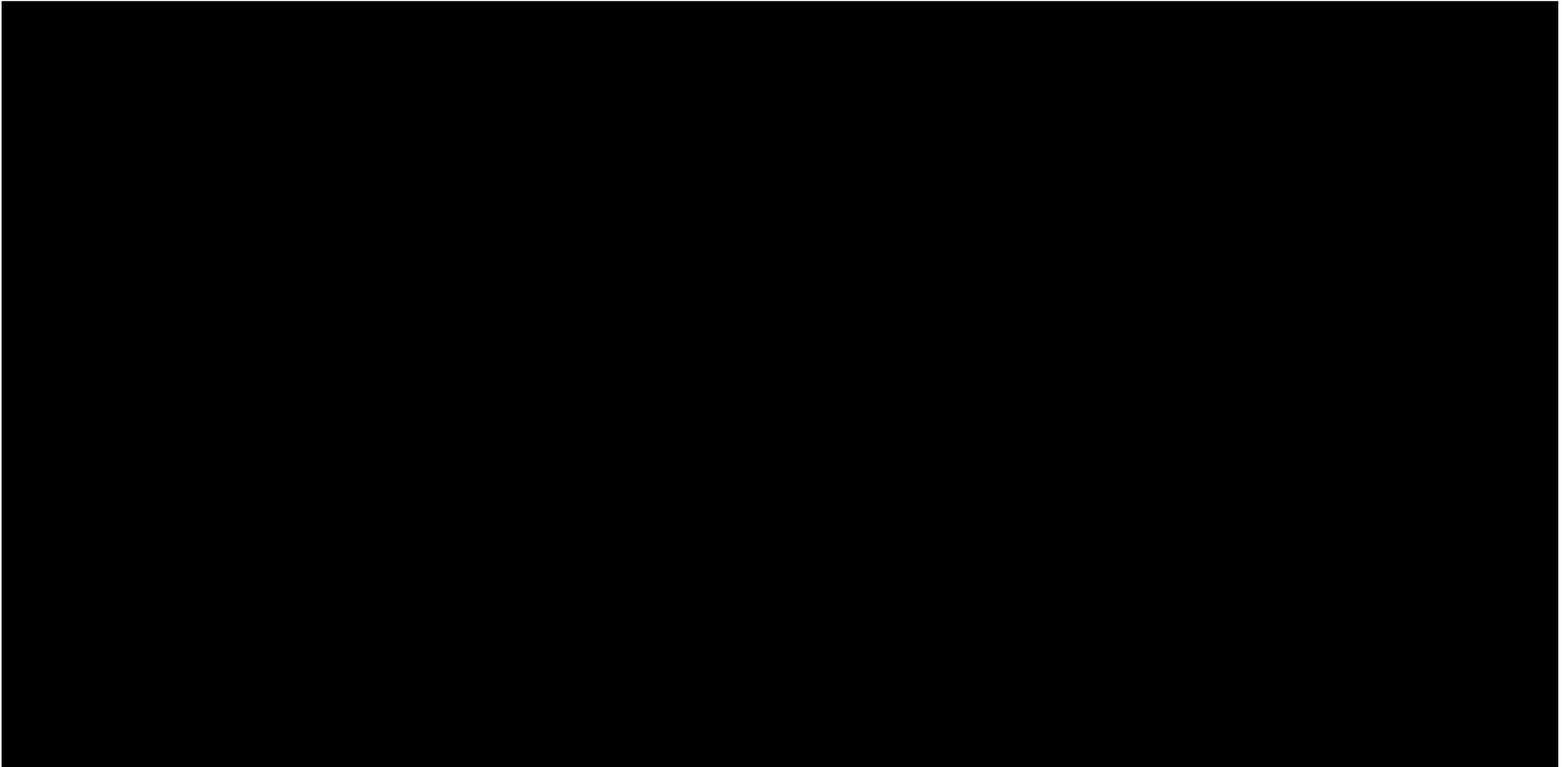
*"Self care is a part of daily living. It is the care taken by individuals towards their own health and well being, and as they extend to others who need and seek it, whether in their homes, communities, or elsewhere." NHS (UK) 2005*

# SELF-CARE





# SELF-CARE





# SELF-CARE

## Transference (Psychodynamic/analytic)

- Phenomenon in which one direct feelings/desires related to an important figure in one's life (such as a parent) toward someone who is not that person.
- Feelings transferred may be positive or negative, and often occurs without awareness
- Examples:
  - Court user displaces anger onto you during a session when talking about an unpleasant experience
  - Court user admires you and over-values your opinion as you may remind them of a significant person in their life

# SELF-CARE

## Counter-transference

- When you, as a judge/mediator, project your feelings onto the court-user
- Typically occurs subconsciously when the court user reminds you of someone you know currently or in the past, or the situation reminds you of a similar experience in the past
- Examples:
  - When you find yourself empathizing a lot with a court-user or wanting to go out of your way (bending over backwards) to assist the court user; blurring of professional boundaries
  - Or you previously had a very bad experience with a court user with similar presentation/issues and you react a certain way to this new court user



# SELF-CARE

How to manage transference/counter-transference?

- Increase self-awareness
- Take time to reflect on cases (How does the case impact you? Do the parties remind you of anyone you know?)
- Acknowledge transference/counter-transference and actively maintain objectivity
- Consult a trusted colleague or supervisor on the matter



THANK YOU!  
Q & A