

# New Directions from the Field:

## *Victims' Rights and Services for the 21st Century*

### Recommendations for the Mental Health Community

The recommendations below, which appear in the May 1998 *New Directions* Report, have been reformatted for replication and distribution.

**Crime-related psychological trauma is a major public health and mental health problem for our Nation. Violent crime puts a large number of Americans at risk for debilitating problems that can limit their ability to live productive, emotionally healthy lives. Due to the sheer number of Americans suffering from crime-related mental health problems, their treatment is one of the most pressing issues. To find workable solutions, the following recommendations for the Nation's mental health professionals are set forth by the field:**

1. The mental health community should develop linkages with crime victim compensation, victim assistance programs, and criminal and juvenile justice agencies to ensure that victims have access to adequate counseling or mental health treatment at each stage of the justice process, from the time the crime occurs through incarceration, pardon, parole, and appeals. Federal and State laws should be amended to ensure that government covers mental health counseling costs for crime victims throughout the criminal justice process and beyond in cases of long-term psychological trauma.
2. Legislation should be enacted in every State and at the Federal level to ensure that designated victim counseling is legally privileged.
3. Research on the mental health consequences of victimization and treatment of crime-related psychological disorders should be expanded.
4. Initial and continuing education programs for mental health professionals should include education on the crisis, short- and long-term trauma issues arising from victimization and appropriate mental health treatment for crime victims and their families, including counseling options available to them. Training also should include information regarding the cultural diversity of victims, stressing the importance of responding with sensitivity to ethnic and cultural differences.
5. Interventions and counseling services should be developed for victims with multiple mental health problems. Special attention should be given to individuals suffering from repeat or chronic victimization and individuals with limited access to financial, social service, and health care resources.
6. Greater emphasis should be placed on mental health treatment for child victims and witnesses, including preventive interventions that focus on reducing the risk of subsequent mental health problems, antisocial and violent behavior, substance abuse, and revictimization.
7. Insurance companies and managed health care companies should provide coverage for targeted mental health treatment for crime victims.
8. Mental health providers should recognize the healing benefits that participation in support groups can provide for many crime victims and provide referrals to these programs when appropriate.
9. Mental health providers should help victims of crime become involved in community service programs when this type of work can assist in the healing process.
10. Mental health professionals should assist in identifying secondary victims of crime and ensure that they receive appropriate counseling and mental health services.
11. Mental health professionals should work with multidisciplinary teams of other trained crisis interveners, including victim service providers, law enforcement officers, emergency medical responders, and clergy, to respond to violent incidents and help communities prepare crisis response protocols.

12. Reciprocal referral systems should be established among victim service providers, crisis interveners, counselors, mental health professionals, and justice practitioners.
13. Community mental health centers should participate in communitywide networks of victim services and crisis response planning, protocols, and services.