

Immigrant, Racialised and Ethno-Culturally Diverse Communities and Community Treatment Orders: A Scoping Review



camh
Centre for Addiction and Mental Health

Hira Ahmad¹, Dr. Alasdair Forrest², Dr. Martin Rotenberg³
University of Aberdeen¹, NHS Grampian², The Centre for Addiction and Mental Health³

Background

Community Treatment Orders (CTOs) are legal frameworks compelling individuals with mental health conditions to engage in treatment to reduce hospital readmissions and enhance treatment adherence post-discharge (1,2).

Research indicates disparities in CTO placements, particularly for racialised and immigrant communities (3, 4).

This review aims to scope the literature and synthesise findings relevant on the association between these groups, and the use of Community Treatment Orders (CTOs) and related forms of compulsory community treatment.

Methods

Adhering to the PRISMA extension for Scoping Reviews guidelines (6), five databases were searched.

Forward and Backward searching was conducted using citationchaser (7).

The first ten pages of Google Advanced was also searched.

Reviewed articles were assessed against eligibility criteria.

Results

From a comprehensive literature search across five databases, and supplementary searches on Google Advanced and citationchaser, 43 full-text articles were deemed eligible for inclusion in this review.

Geographically, Australia (8 – 29), New Zealand 10, 25, 30 – 34), the U.S. (35, 37 – 41), Canada (42 – 44), the U.K. (36, 45 – 49), and Switzerland (50) were represented

Findings were mixed; multiple studies indicated a higher likelihood of CTOs for immigrants and racialised groups (8 – 11, 13, 17, 24 – 27, 36, 30, 46, 47, 51), while others found no association (19 – 21, 23, 26, 34, 35, 37, 39, 45, 48, 49), or even a higher rate of CTOs among non-minority individuals (18, 21, 45, 50).

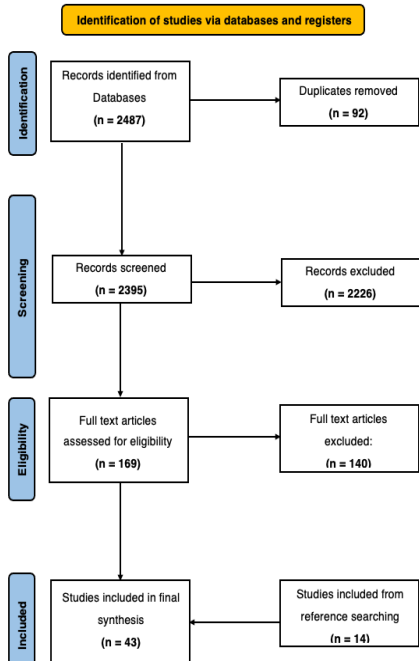
Three qualitative studies highlighted both positive (e.g., improved safety) and negative (e.g., perceived control loss) views on CTOs among Māori in New Zealand and ethnic minorities in Canada, with some participants feeling that racial bias influenced CTO administration (30, 32, 42).

Outcomes for ethnic and immigrant groups under CTOs varied, with some studies noting differences in hospital admissions (29, 31), or mortality rates by ethnicity (33), while others found no significant differences in clinical outcomes (15), or service access based on ethnicity or immigrant status (16).

Keywords Used

Concept	Keywords
Ethnicity	Ethnic* OR Nationality OR Minorit* OR Race OR Immigr* OR Culturally and Linguistically Diverse
Community Treatment Order	Community Treatment Order OR Outpatient Commitment OR Assisted Outpatient Treatment OR Community Treatment Plan OR Compulsory Community Treatment OR Involuntary Outpatient Commitment OR Extended Leave OR Supervised Community Treatment OR Community Management Order

PRISMA 2020 Flow Diagram (5)



Discussion

Strengths and Limitations of this review

- ✓ Breadth and diversity of the literature that has been included
- ✓ Inclusion of both qualitative and quantitative research
- ✓ Comprehensive terminology was used for compulsory treatment
- ✗ Eligibility criteria – limitation of studies included
- ✗ Restriction to English language studies
- ✗ Heterogeneity between studies as various jurisdictions included

Strengths and Limitations of the literature

- ✓ Adjustment for ethnicity or immigrant status as a potential confounding variable
- ✓ Examined whether ethnic minority status under a CTO affected outcomes
- ✗ Only three qualitative studies included
- ✗ Limited data on specific ethnic groups
- ✗ No explicit mention of ethnicity, immigrant status, or racialised groups
- ✗ Risk of Table 2 Fallacy

Future Directions

Research should examine the complex link between ethnicity and CTOs, focusing on underrepresented groups like South and East Asians or Hispanic/Latino populations.

More quantitative studies are needed outside Australia and New Zealand.

Future studies should consider structural factors, such as discrimination and ethnic density, in CTO use.

Conclusions

This review mapped existing literature on the relationship between ethnicity and CTOs.

Findings on the relationship are mixed, with significant heterogeneity between studies.

Future research could broaden focus to diverse minority ethnic groups and countries.

References available upon request