

Victorian Institute of Forensic Mental Health
and
Centre for Forensic Behavioural Science
Swinburne University of Technology

Annual Research Report

1 July 2016 – 30 June 2017



Centre for Forensic
Behavioural Science

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Research in progress 2016–2017	16	Victorian Institute of Forensic Mental Health	
Grant funded research	16	Yarra Bend Road	
Formal service evaluation	24	Fairfield Victoria 3078	
Consultancy	25	Australia	
Staff initiated research	28	Email: info@forensicare.vic.gov.au	
Doctor of Psychology	32		
PhD	44		
Masters	49	Centre for Forensic Behavioural Science	
Honours	50	Swinburne University of Technology	
Scholarly Projects, Royal Australian and New Zealand College of Psychiatrists	51	505 Hoddle Street	
		Clifton Hill Victoria 3068	
		Australia	
		Email: info-cfbs@swin.edu.au	
Completed Research 2016–2017	52		
Formal Service Evaluation	52	ISSN 2206–0804 (print)	
Consultancy	55	ISSN 2206–0812 (online)	
Other staff initiated research	56		
Doctor of Psychology	57		
PhD	62		
Masters	65		
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Report by Professor James Ogloff AM

I am pleased to present the 2016–2017 Annual Research Report for the Centre for Forensic Behavioural Science, Swinburne University of Technology and the Victorian Institute of Forensic Mental Health (Forensicare). This has been a particularly eventful year for our research program. By way of summary, the CFBS continued its success in obtaining research and contract funding. As this report shows, staff have published 40 peer reviewed articles, one book and seven chapters. In addition, a further 25 articles and chapters have been accepted for publication and are currently in press. Core CFBS staff presented 10 keynote addresses and made 46 conference paper presentations at a range of national and international conferences. Given the translational and applied nature of our work, there were also 49 presentations involving research dissemination to professional and clinical groups over the reporting period. The published work of our staff members is cited more than 1500 times per year in publications.



Professor James R. P. Ogloff AM

*Director of the Centre for Forensic Behavioural Science,
Swinburne University of Technology*

*Executive Director of Psychological Services and
Research, Forensicare*

Competing funding priorities, lack of capacity, and the absence of a research culture bedevil the ability of most mental health and forensic mental health services to engage in meaningful research and evaluation. The lack of focus on research and evaluation relegates services to continually play catch-up in the race to ensure practices are evidence-based, providing maximum benefit to our consumers. The World Health Organisation's *Mental Health Action Plan (2013–2020)* emphasises that "evidence and research are critical ingredients for appropriate mental health policy, planning and evaluation" (p.18). Similarly the recent Targeting Zero ("Duckett Review") notes the importance of research and relationships between health services, researchers, and universities.

Since its inception, Forensicare has embedded strong research values, and our research record has continued to strengthen and is recognised worldwide. Through its partnership with Swinburne University of Technology in operating the Centre for Forensic Behavioural Science (CFBS), our research group is among the most productive of any forensic mental health service in the world. The research undertaken by Forensicare and the CFBS translates to service development and evaluation. Our work has transformed people's understanding in a number of areas relating to mental illness and offending. This work is used to continuously improve evaluation and intervention work within Forensicare and in the broader forensic mental health, justice, and mental health fields. In short, it helps ensure better outcomes for consumers and contributes to a safer community.

This year marked the launch of the Catalyst Consortium to Reduce Persistent Violence and Sexual Offending in April by the Honourable Gayle Tierney MLC, Minister for Corrections. The Consortium has been established by a \$1.76 million grant from the Department of Justice and a grant of \$660,000 from Forensicare. The Vice Chancellor of Swinburne University, Professor Linda Kristjanson, Mr. Tom Dalton, the CEO of Forensicare, and Mr. Rod Wise, the Acting Commissioner of Corrections. The Consortium establishes a partnership between leading researchers, clinical leaders, and correctional/forensic mental health partner organisations to systematically address persistent violence and sexual offending. The name Catalyst was chosen for the consortium since it will focus research, clinical and administrative expertise on the problem of violence to precipitate change in those who have engaged, or are likely to engage, in persistent violence and sexual offending, and the agencies that provide services to them. The problem of violence, including sexual violence and family violence, is of national and international significance and requires innovative and transformational research and practice to enhance understanding and assessment, intervention, reintegration and prevention efforts. The aim of the Catalyst Consortium is to enhance our understanding of the causal factors of violence, and to intervene effectively with people who engage in violence in a manner that will increase community safety. We target people who commit interpersonal violence, including those with mental disorders (including personality disorders), substance misuse disorders, and cognitive impairment.

Staff highlights

All of our staff have presented their work at national and international conferences and have made contributions to the scientific literature. Professor Michael Daffern (professor in the CFBS and part-time Principal Consultant Psychologist with Forensicare) delivered the annual Derek Eaves Oration at the 2017 meeting of the International Association of Forensic Mental Health Services in Split, Croatia in June. This is a prestigious lecture that honours Dr. Derek Eaves, the foundation president of the association. Several staff members attended and spoke at the conference.

Dr. Svenja Senkans, who was awarded a Ph.D. this year, was awarded the Lagerspetz Award at the 2016 Bi-annual World meeting of the International Society for Research of Aggression. This award is given to graduate students, postdoctoral fellows and junior faculty for excellent presentations at the meeting.

We have made three ongoing appointments to the CFBS. Dr. Stephane Shepherd, completed a Fulbright Fellowship in the United States and was appointed as Senior Lecturer. Dr. Shepherd has expertise in cross-cultural issues in forensic psychology. Dr. Caleb Lloyd, with expertise in correctional psychology, was recruited into a Senior Lectureship associated with the Catalyst Consortium. His areas of research examine the process of offender change in criminal justice and corrections environments (e.g., prisons, probation offices, mandated rehabilitation). Dr. Margaret Nixon, who held a limited term appointment as Lecturer in the CFBS has been appointed to an ongoing lecturer position. She is convener of the successful postgraduate courses in forensic behavioural science and forensic mental health. Her research is in the area of intellectual disability and offending.

Dr. Justin Trounson was appointed as Swinburne University of Technology's inaugural Aboriginal and Torres Strait Islander Research Fellow. As part of its commitment to Indigenous employment and their Reconciliation Action Plan, Swinburne awards one Aboriginal and Torres Strait Islander Research Fellowship annually to an Aboriginal and/or Torres Strait Islander researcher to increase the representation of Aboriginal and Torres Strait Islander people within the university. Dr. Trounson is a registered psychologist with a PhD in Clinical Psychology who has worked with the Centre for Forensic and Behavioural Science as the project manager and research fellow on the "Enhancing well-being and resilience within prisons ARC Linkage Grant."

Visiting academic appointments

Professor Barry Rosenfeld, Professor and Chair of the Psychology Department at Fordham University in New York and President of the International Association of Forensic Mental Health Services was a Visiting Scholar to the CFBS funded by Swinburne University. During his visit, he spent time with staff and students and presented lectures at Swinburne University of Technology and a public lecture that was co-sponsored by the Australian and New Zealand Association of Psychiatry, Psychology and Law.

Dr. Henning Hachtel joined the CFBS as a Visiting Lecturer for one year in October 2016. He is a senior medical consultant in the Forensic Psychiatric Clinic at the Universitaere Psychiatrische Kliniken in Basel Switzerland with advanced knowledge in treatment and assessment of violent and sex offenders; court expert in German speaking Switzerland. He is collaborating with staff on a range of research projects.

Associate Professor Susanne Strand works in the Center for Criminological and Psychosocial Research at Örebro University. She has had a long association with the CFBS, where she holds an appointment of Adjunct Professor. She visits regularly and collaborates closely with CFBS staff. She plays an active role in training Victoria Police members in the area of family violence risk assessment as part of our ongoing work with Victoria Police in this area.

Our courses

The Graduate Program in Forensic Behavioural Science continues to thrive. We offer six different courses enabling professionals to enhance their knowledge in the forensic realm. We have had than 300 individual enrolments in our courses this year. Students are drawn from all over Australian and New Zealand and the Program was approved in 2016 to enable international students to enrol. To this end, we have entered into an agreement with the Executive Counselling and Training Academy in Singapore to offer one of courses, the Graduate Certificate in Specialist Forensic Assessment and Risk Management, collaboratively to students in Singapore.

Research dissemination

We hold two research dissemination seminars each year for Forensicare staff members. During these sessions, which run for one-half day, research and clinical staff present their work. The events this year, which were held in December 2016 and March 2017 were well attended and covered a range of topics relevant to our clinical staff.

The CFBS hosts seminar series where invited speakers share their work with research staff from the CFBS and clinical staff from Forensicare. This year's presentations included:

- July 16, 2016 – Professor Barry Rosenfeld, Fordham University, USA. Can we treat "stalking"? Development and evaluation of a treatment program for stalking offenders
- August 16, 2016 – Professor Bill Lindsay, Abertay University and Danshell Learning Disability and Autism Services, UK. Working with sex offenders with intellectual and developmental disabilities
- November 16, 2016 – Dr Stuart Ross, University of Melbourne. Research and family violence: Old and new challenges on the path to reform
- March 17 – Associate Professor Susanne Strand, Örebro University, Sweden. How to work with risk assessment and risk management to prevent violence where honour is the motive for the crime
- April 17 – Professor Mirko Bagaric, School of Law, Swinburne University of Technology. Introducing Disruptive Technology to the Prison Sector and Providing an Efficient and Normatively-Sound Solution to America's Incarceration Crisis
- May 17 – Professor Chris Trotter, Monash University. Offender supervision: Worker skills and client outcomes
- June – Professor Monica Miller, University of Nevada, Reno, USA. A cultural perspective on the past, present, and future of specialty courts in the U.S. and abroad

In closing, I want to express my sincere gratitude to the staff, research fellows and students of the CFBS and Dr. Rachael Fullam, the Forensicare Research Lead and Development Officer, for their hard work and dedication to our endeavours. I am grateful to Brett McIvor, the Research Centre Coordinator, and Maree Stanford, my Executive Assistant for more than 15 years, for their commitment and oftentimes extraordinary efforts to support our work.

Research program

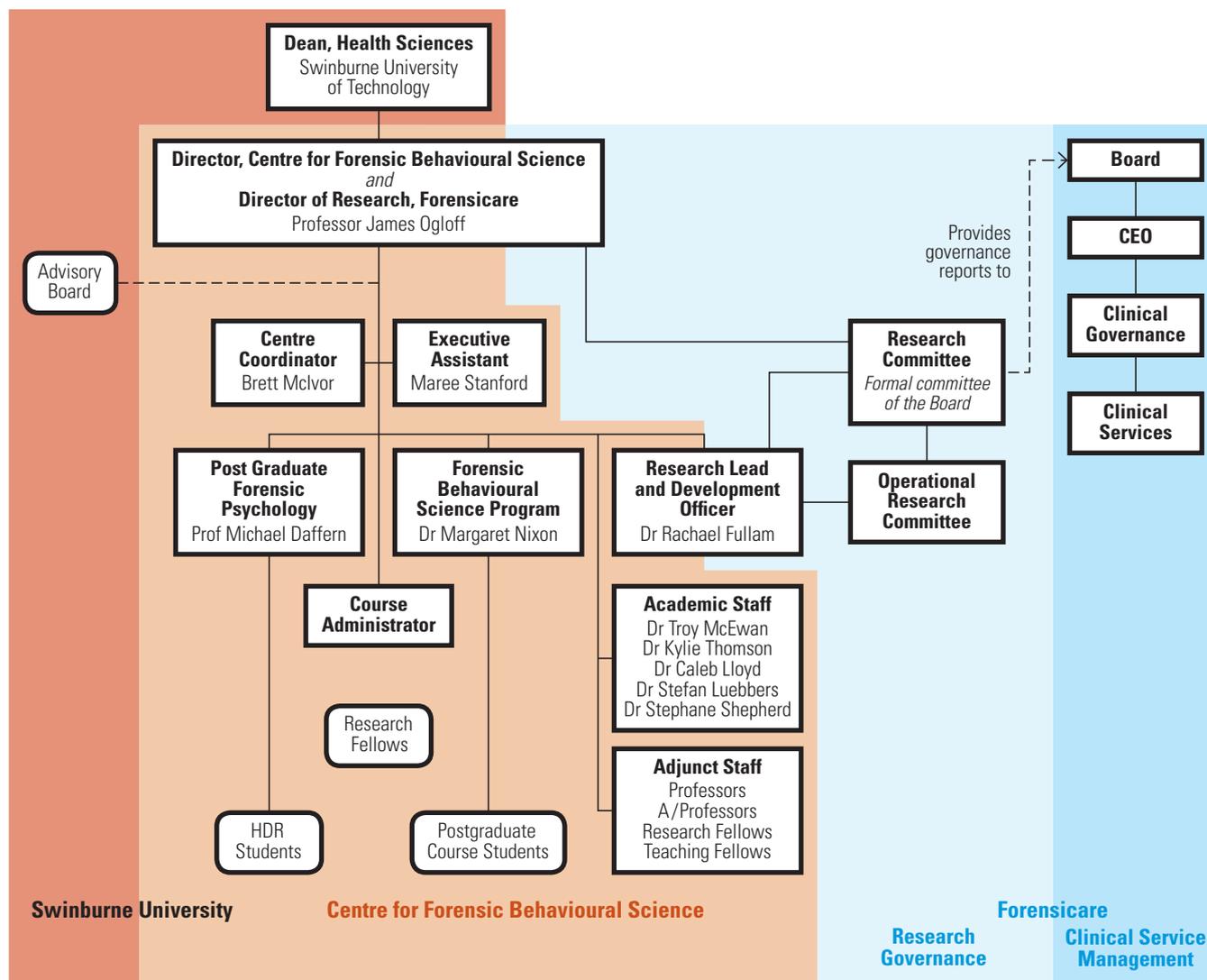
Forensicare has a sound research base and a strong commitment to supporting research throughout the organisation. In addition to providing specialist clinical services through an inpatient and community program, Forensicare is mandated (under the *Mental Health Act 2014*) to provide research, training and professional education.

Specifically, the statutory functions and powers of Forensicare include the mandate “to conduct research in the fields of forensic mental health, forensic health, forensic behavioural science and associated fields” and to “promote continuous improvements and innovations in the provision of forensic mental health and related services in Victoria” (*Mental Health Act 2014* s.330(g) & s.330(h)). Forensicare’s mandate to conduct research is quite unique among forensic mental health services in Australia. All too often, a tension exists between research and practice in clinical services, and forensic mental health services are typically no different. Within Forensicare, however, there is a critical nexus between science and practice – with each informing the other to ensure excellence and evidence-based practice in our service. Ongoing research in forensic behavioural science and forensic mental health is critical owing to the highly specialised nature of the field as well as the rapidly emerging knowledge in the field.

Despite the legislative mandate that Forensicare conduct research, Forensicare has received very little funding to further this responsibility. From its inception, Forensicare has worked with a range of universities to develop a research capacity in forensic mental health and related

fields. The relationships have ensured that Forensicare attracts academics and research funding to undertake research relevant to Forensicare’s clinical work. The Centre for Forensic Behavioural Science (CFBS) operates under the auspices Swinburne University of Technology in collaboration with Forensicare. The CFBS serves as the research arm of Forensicare, conducting independent research and facilitating the research enterprises of Forensicare. The research program ensures that high quality research is undertaken to better inform clinical practice in the provision of public mental health services. Forensicare is also committed to disseminating research findings to area mental health services and other stakeholders. All staff are encouraged to participate in the research program.

Forensicare and CFBS organisational arrangements



Independent service evaluation

The difficulty in gaining competitive grant funding for basic service evaluation work means that all major healthcare organisations conduct their own service evaluation projects. Forensicare is increasingly contracting formal service evaluation to the CFBS, which has a commitment to producing transparent unbiased evaluation data and interpretation. Although many CFBS staff hold joint Forensicare and Swinburne appointments, when undertaking contracted evaluation work for the CFBS, they do so strictly within a research role. The independence of service evaluation work conducted by the CFBS is strengthened by the inclusion of objective outcome measures. All research conducted at Forensicare is overseen by a number of research governance committees and guidelines that are independent of clinical governance processes. The research governance committees are in place to coordinate and manage research across the organisation, to ensure research complies with national research governance standards and to develop research strategy moving forward. The Forensicare research committees have no mandate to interpret or influence the outcome of service evaluation studies. To ensure ongoing independence and objectivity, all CFBS service evaluation reports from 2016 onwards will be subject to a review as appropriate by an advisory board of Swinburne University Academics who are unconnected with Forensicare.

Research governance at Forensicare

Research coordination and governance at Forensicare is achieved through a hierarchical structure of two committees and a number of key policies, agreements and organisational documents.

The Research Committee is a formal Committee of the Victorian Institute of Forensic Mental Health ("Forensicare") Board established in accordance with s.332 of the *Mental Health Act* 2014. In accordance with its Charter, the Board is responsible for ensuring effective and accountable systems are in place for research governance and that high quality research is undertaken to inform clinical practice, consistent with Forensicare's strategic objectives. The Research Committee's role is to assist the Board to fulfil its research governance responsibilities. The Research Committee is responsible for

- Providing broad oversight of research strategy and forward planning
- Ensuring that Forensicare has an appropriate research governance framework.
- Monitoring compliance with the research governance framework and organisational policies regarding research and related activities.
- Identifying and assisting contact with suitable funding organisations such as foundations, to support the achievement of strategic research goals
- Supporting the dissemination of research outcomes to key contacts within state and federal government and non-government bodies.

The Operational Research Committee supports the Research Committee by providing a formal structure for developing and monitoring research across the organisation. The ORC acts as the main gateway for researchers wishing to gain approval to conduct research involving Forensicare staff, patients, or resources. The ORC reviews all grant applications and research proposals in order to establish operational support for the project before they are submitted to an external Human Research Ethics Committee for approval. In addition, the ORC monitors the receipt of ethical approval for each operationally approved study, and reviews the progress of each approved project against their specified milestones. The Operational Research Committee provides biannual reports to the Research Committee. The key responsibilities of the ORC include:

- Review of all research applications involving Forensicare staff, patients, or resources
- Development and implementation of the Strategic Research Plan
- Providing oversight to research activity within the organisation
- Development and implementation of research governance policies and guidelines
- Identification of service evaluation priorities
- Development of mechanisms to engage Forensicare staff in research
- Development of mechanisms to disseminate research findings and to ensure translation for use within Forensicare.

Research program

2016–2017 Operational Research Committee membership

Professor James Ogloff (Chair)

Director of Research

Dr Maurice Magner

Clinical Director

Dr Danny Sullivan

*Assistant Clinical Director,
Community Operations*

Mr Jonathan Norton

*Executive Director, Community Operations
and Strategic Development*

Mr Ryan Dube

Executive Director, Prison Operations

Mr Les Potter

Executive Director, Inpatient Services

Ms Anthea Lemphers

Assistant Director, Psychology

Ms Marissa Davidson-Blue

Chief Occupational Therapist

Ms Jo Ryan

Director of Nursing

Mr Grant Burkitt

Senior Social Worker

Ms Greta McDonald

Consumer Consultant

Dr Rachael Fullam

Research Lead and Development Officer

Forensicare complies with all standards established to cover research. The Forensicare Research Governance Framework outlines the principles of good governance that apply to all research undertaken at Forensicare and allied organisations. The Framework is informed by, and developed in accordance with, two key Federal publications; Joint National Health and Medical Research Council and Australian Research Council documents, the Australian Code for the Responsible Conduct of Research (2007) and the Joint National Health and Medical Research Council and Australian Research Council. National Statement on Ethical Conduct in Human Research (2007).

All research involving patients, staff or records of Forensicare must be approved by a Human Research Ethics Committee. This should be the HREC of the organisation which would bear liability, and is generally the academic institution to which the principal researcher is attached.

Centre for Forensic Behavioural Science

The Centre for Forensic Behavioural Science (CFBS) was established as a partnership between Monash University and the Victorian Institute of Forensic Mental Health (Forensicare) in 2007. It marked the culmination of 15 years of excellence in the area of forensic mental health and forensic behavioural science in Victoria. Forensic behavioural science concerns the study of factors that underlie offending and human behaviour in the legal system. In January 2014, the CFBS relocated to Swinburne University of Technology. The establishment of CFBS has ensured the sustainability of research in the area of forensic mental health and forensic behavioural science at Forensicare.

The Centre is Australasia's leading centre for excellence in the areas of forensic mental health and forensic behavioural science research, teaching and practice development. It is envisaged that the Centre will evolve and strengthen the field of forensic behavioural science, both in Australia and internationally. A key focus of the Centre is to transfer academic and clinical excellence into practice in the health, community services and criminal justice sectors.

It brings together academics, clinicians, researchers and students from a variety of disciplines. The specialist areas of psychiatry, psychology, social work, law, nursing, occupational therapy and epidemiology are all represented. Additional expertise is available through affiliations established with industry partners, such as Victoria Police and Corrections Victoria, and international experts.

The centre has fifteen Swinburne academic staff members, with six core members, six research fellows, and three associate members. We have included a brief biographical summary of the core members.

Core Members

- Professor James Ogloff AM (Director)
- Professor Michael Daffern (Professor)
- Dr Rachael Fullam (Research Lead and Development Officer, Forensicare and Adjunct Research Fellow, CFBS)
- Dr Kylie Thomson (Senior Lecturer)
- Dr Troy McEwan (Senior Lecturer)
- Dr Caleb Lloyd (Senior Lecturer)
- Dr Stephane Shepherd (Senior Lecturer)
- Dr Stefan Luebbers (Lecturer)
- Dr Margaret Garnsey (Lecturer)
- Ms Tessa Maguire (Clinical Nurse Consultant, Forensicare and Adjunct Research Fellow, CFBS)

Research Fellows

- Dr Lilian de Bortoli
- Dr Dan Shea
- Dr Nina Papalia
- Dr Ashley Dunne
- Dr Justin Trounson
- Dr Benjamin Spivak
- Dr Janet Ruffles

Associate Members

- Associate Professor Jeffrey Pfeifer (Psychological Sciences)
- Dr Jason Skues (Senior Lecturer, Psychological Sciences)

Adjunct Members

Adjunct Professors

- Emeritus Professor Paul E Mullen (Monash University)
- Professor Min Yang (Sichuan University, China)
- Professor Stephen Wong (University of Saskatchewan & University of Nottingham)
- Professor Brian McKenna (Auckland University & Mason Clinic, New Zealand)

Adjunct Associate Professors

- Associate Professor Pat Brown (Director, Children's Court Clinic)
- Associate Professor Andrew Carroll (Forensicare)
- Associate Professor Rosemary Purcell (Orygen Research Centre, University of Melbourne)
- Associate Professor Suzanne Strand (Örebro University)

Adjunct Senior Research Fellows

- Dr Rajan Darjee (Consultant Forensic Psychiatrist at NHS Lothian)

Adjunct Research Fellows

- Dr Michael Davis, Private Practice
- Dr Svenja Senkans, Private Practice
- Dr Danny Sullivan, Forensicare

Adjunct Clinical Associates

- Dr Aleksandra Belofastov (Manager & Principal Psychologist, Mobile Forensic Mental Health Service, Forensicare)
- Dr Rachel Campbell (Senior Psychologist, Forensicare)
- Dr Cristina Cavezza (Senior Psychologist, Forensicare)
- Dr David Curnow (Consultant Psychiatrist, Full time member, Adult Parole Board of Victoria)
- Ms Marissa Davidson-Blue (Chief Occupational Therapist, Forensicare)
- Dr Chris Drake (Senior Psychologist, Forensicare)

- Dr Dion Gee (Principal Consultant Psychologist, Forensicare)
- Ms Anthea Lemphers (Deputy Director of Psychological Services, Forensicare)
- Dr Karla Lopez (Senior Forensic Psychologist, Victoria Police)
- Dr Rachel MacKenzie (Senior Clinical and Forensic Psychologist, Forensicare)
- Dr Jennifer McCarthy (Manager & Principal Psychologist, Problem Behaviour Program, Forensicare)
- Dr Amanda Nielson (Senior Clinical Neuropsychologist, Forensicare)
- Mr Jonathan Norton (Executive Director, Community Operations, Forensicare)
- Dr Chris Quinn (Clinical Nurse Consultant, Forensicare)
- Dr Sophie Reeves (Senior Psychologist, Forensicare)
- Dr Gregg Shinkfield (Senior Psychologist, Forensicare)
- Dr Lisa Warren (Clinical and Forensic Psychologist, Forensicare)
- Mr David Willshire (Principal Consultant Psychologist)
- Lisa Wright (Chief Social Worker, Forensicare)

Adjunct Teaching Fellows

- Detective Senior Sgt Dr Deb Bennett (Consultant Clinical Forensic Psychologist, Victoria Police)
- Dr Sam Calvin (Consultant Psychiatrist, Forensicare)
- Dr Margaret Cutajar (Clinical and Forensic Psychologist, Forensicare)
- Dr Lauren Ducat (Senior Psychologist, Forensicare)
- Dr Lisa Forrester (Clinical and Forensic Psychologist, Forensicare)
- Dr Flora Gilbert (Provisional Psychologist, Forensicare)
- Dr Joel Godfredson (Clinical and Forensic Psychologist, Forensicare)
- Tess Maguire (Clinical Nurse Consultant, Forensicare)
- Dr Clare McInerney (Consultant Psychiatrist, Forensicare)
- Dr Kate Roberts (Psychiatrist, Forensicare)
- Dr Melisa Wood (Senior Clinical and Forensic Psychologist, Forensicare)
- Dr Simon Vincenzi (Clinical and Forensic Psychologist, Forensicare)

CFBS tertiary education programs

One of the objectives of the CFBS is to provide postgraduate training opportunities to people who work in the forensic behavioural science or forensic mental health fields. To this end, we have developed the Graduate Program in Forensic Behavioural Science and the Graduate Program in Forensic Psychology.

Graduate Program in Forensic Behavioural Science

Professionals who work in forensic mental health/behavioural science contexts, or with forensic populations (such as offenders) require specialised skills. The Graduate Certificate in Forensic Behavioural Science, Graduate Diploma of Forensic Behavioural Science, and Master of Forensic Behavioural Science are the only courses of their kind in Australia to provide such specialised training to a range of professionals/students who are working in (or are seeking to work in) forensic contexts. The CFBS also offers both a Graduate Certificate and Diploma in Forensic Mental Health Nursing, as well as a Graduate Certificate in Specialised Forensic Risk Assessment and Management course. The courses provide advanced (Grad Cert) through to highly specialised (Master's degree) education and training in the core issues and theories required for effective practice in forensic settings across a range of disciplines. Students will develop both a knowledge base and practical skills to enable them to work with the diverse range of clients and professionals encountered in forensic practice.

Teaching staff in the program have clinical as well as academic responsibilities, ensuring the course content is empirically grounded and relevant to the challenges associated with working in forensic settings.

The program is offered online on a part-time basis, and students can elect to complete individual units, or to graduate with a Post-Graduate Certificate (4 units), Post-Graduate Diploma (8 units) or the Master's degree (12 units). Admission to the program is available to students who possess a relevant tertiary qualification or significant relevant work experience.

Graduate Certificate in Forensic Behavioural Science

The Graduate Certificate provides the necessary basic knowledge and training to enable a range of professionals to work within forensic settings. The course provides a comprehensive introduction to the key principles and work practices in forensic fields, including an overview of relevant legal systems and procedures, and the fundamentals of violence risk assessment and management.

Graduate Diploma in Forensic Behavioural Science

The Graduate Diploma in Forensic Behavioural Science is designed to provide advanced training to enable a range of professionals to work effectively and independently within forensic settings. Graduates acquire in-depth knowledge and skills in various aspects of forensic behavioural science, including legal and correctional system functioning, fundamentals of violence risk assessment and management, and comprehensive understanding of complex systemic, individual and mental health factors that influence offending behaviour.

Master of Forensic Behavioural Science (Coursework)

The Master of Forensic Behavioural Science comprises coursework and research training that enables graduates to work effectively with the widest range of forensic environments and populations, and to deal with complex and challenging issues in an autonomous manner. In addition to acquiring in-depth knowledge and skills in various aspects of forensic behavioural science, graduates gain knowledge of fundamental research methods, and then may elect to complete either the coursework stream, or the research stream, where they develop their ability to conduct a research project independently.

Graduate Certificate in Forensic Mental Health Nursing

The Graduate Certificate in Forensic Mental Health Nursing provides a comprehensive introduction to the principles and practice of nursing in forensic mental health, including key legal principles and legislation, and core clinical skills (such as violence risk assessment and management), enabling graduates to work effectively in forensic contexts or with forensic patients.

Graduate Diploma in Forensic Mental Health Nursing

Building on the graduate certificate program, students in the Graduate Diploma will acquire in-depth knowledge and skills required to work effectively in forensic mental health nursing, including understanding legal and correctional systems, advanced instruction in the complex systemic and individual mental health factors that influence offending behaviour, and how to work effectively with challenging patients and behaviours.

Graduate Certificate in Specialised Forensic Risk Assessment and Management

The Graduate Certificate in Specialised Forensic Risk Assessment and Management provides advanced training in how and when to conduct structured violence risk assessments with a range of clients (e.g., mental health patients, prisoners, detainees), and how to devise appropriate management plans to reduce any identified risks. Graduates will attain specialised knowledge of the principles, approaches and methods relevant to violence risk assessment and management, and at completion of the certificate will be able to apply their acquired skills in their work practice, or transfer them to working in new environments where violence risk assessment and management is relevant (e.g., mental health services, corrections, child protection, etc).

Graduate program in forensic psychology

To become qualified forensic psychologists, the Psychology Board of Australia requires that, following a four year course in psychology, students undertake postgraduate training. The Australian Psychology Accreditation Council requires particular topics be covered in coursework and clinical supervision. Swinburne offers two streams: the Doctor of Psychology (Clinical and Forensic) and the Graduate Diploma in Forensic Psychology.

Graduate Diploma in Forensic Psychology

The Graduate Diploma in Forensic Psychology is a post-graduate course of study, which provides advanced training to registered psychologists who also hold an endorsement by the Psychology Board of Australia in another relevant area who wish to acquire knowledge and skills in the area of forensic psychology. The course comprises coursework and clinical placements. Students engage with forensic mental health and justice agencies in Victoria and complete placements allowing them to acquire expertise in a practical setting under the supervision of a forensic psychologist. They also complete four coursework units, one per semester over two years.

Doctor of Psychology (Clinical and Forensic)

This post-graduate training program combines intensive training in clinical and forensic psychology coursework, clinical placements and a research thesis. It is designed to train highly qualified clinicians and researchers who can work in either or both practical or academic roles in clinical and forensic psychology domains. The course is offered as a four year, full-time program. It is designed for students who have completed a four year degree in psychology.

Key research streams

Aggression and violence

Lead: Professor Michael Daffern

Acts of aggression and violence, including assault and homicide, represent some of the most harmful of all antisocial behaviours. They are associated with substantial personal and social concerns. They also have an enormous financial impact, costing economies billions of dollars each year in health care, legal and justice system costs, absenteeism from work, and lost productivity. Given the extent of the burden resulting from aggression and violence, it is critical we devote attention and resources to the development of violence prevention and intervention programs that can successfully reduce violent behavior.

Our research into aggression and violence focusses on:

- the assessment, treatment and management of violent offenders,
- the assessment of risk for violent offending,
- the relationship between mental disorder and violence, and
- the development of theory and the application of theories and models of aggression and violence to clinical and forensic practice.

Key current projects in this area including studies exploring the relationship between personality disorder and violence, violence risk assessment and management procedures, violent offender treatment evaluation, and the violent offending of people with mental illness.

Faculty and Research Fellows:

Associate Professor Andrew Carroll
Ms. Tessa Maguire
Dr. Troy McEwan
Professor James Ogloff
Dr. Stephane Shepherd

Complex criminal behaviour

Lead: Dr. Troy McEwan

Forensic clinicians have an important role to play in assessing and treating people who engage in criminal acts that are driven primarily by psychological or/and social problems. Such acts include stalking, harmful sexual behaviour, family violence, uttering threats, abnormal complaining and deliberate fire-setting. Over the past two decades, researchers from the Centre have investigated why these behaviours occur (or are sustained) and what approaches are most effective for managing them. Our clinicians and researchers are internationally recognised for their leadership in developing innovative service models for assessing and treating these complex criminal behaviours.

Our research in this area focusses on:

- Development and evaluation of risk assessment instruments appropriate to different complex criminal behaviours
- Clarifying the contributory role of mental disorder in complex criminal behaviours
- Understanding and developing effective interventions for stalking
- Increasing knowledge about deliberate firesetting
- Understanding different forms of family violence, and the links between intimate partner violence and stalking
- Investigating the psychological factors that are common to and differentiate between different types of complex criminal behaviour

Centre researchers have partnered with staff from the Victorian Institute of Forensic Mental Health for over a decade to improve knowledge and practice in this area. Together they established the Problem Behaviour Program, a clinical forensic service in Melbourne that works specifically with people who engage in these behaviours. This close collaboration has underpinned a large body of clinical research into stalking and threatening and, more recently, deliberate fire-setting and family violence. The CFBS has also frequently partnered with Victoria Police in our research in this area, allowing us to evaluate whether structured risk assessment tools are effective in predicting recidivism of complex criminal behaviours.

Faculty and Research Fellows:

Professor Michael Daffern
Dr Ben Spivak
Dr Daniel Shea
Emeritus Professor Paul Mullen
Professor James Ogloff

Forensic mental health

Lead: Dr. Rachael Fullam

Research in forensic mental health addresses questions related to the assessment and treatment of people with a mental disorder and a history of offending, or those who are at risk of offending. The work aims to further understand these relationships, to establish effective treatment models for mentally ill offenders, and to reduce and eliminate offending by people with mental illnesses.

Our research in this area focusses on:

- Understanding the relationship between mental illness and offending
- Developing and evaluating evidence-based interventions to reduce the risk of offending among people with mental disorders
- Development and evaluation of forensic mental health services

Key projects in this area include data linkage studies exploring the rate of offending and violence among people with mental illnesses, identifying the percentage of offenders with mental illnesses, and investigating ways to intervene with mentally ill offenders to reduce their offending and assist in their mental health recovery.

Faculty and Research Fellows:

Associate Professor Andrew Carroll
Dr. Lillian De Bertoli
Dr. Stefan Luebbers
Ms. Tessa Maguire
Professor James Ogloff
Emeritus Professor Paul Mullen

Psychology and law

Lead: Professor James Ogloff

Psychology and law research applies psychological principles to better understand and improve police procedures, laws and the legal system. In general, psychology and law research focuses on non-clinical issues, such as the investigative procedures used by police and the information presented in the courtroom. Beyond its applications to the justice system, Psychology and Law research furthers our understanding of various phenomena by developing and contributing to theories examining people's perceptions of fairness, jurors' decision-making, offenders' approaches to alternative dispute resolution procedures, people's fear of crime beliefs, public support for preventive detention, and eyewitness' memories for events and people.

Our research in this area focusses on:

- Improving eyewitness identification procedures and determining the best way to present various types of evidence in the courtroom
- Applying the principles of procedural fairness to investigate the motivations driving law enforcement officers to determine the fairness and propriety of interviewing procedures
- Evaluating jurors' understanding of the law and developing methods to improve their legal comprehension

CFBS members in the Psychology and Law stream are working with collaborators at research institutions around Australia, including Flinders University, University of Tasmania, Charles Sturt University, and Deakin University. In addition, we have a number of collaborators at leading international research institutions, such as the John Jay College of Criminal Justice (City University of New York), Queen's University, Barnard College (Columbia University), Bates College, and Queen Margaret University. Beyond academic collaborations, researchers in this stream have also worked and consulted with the United States Federal Bureau of Investigation, the Victorian Department of Justice, the Queensland Police Service, attorneys, and the Australian Institute of Judicial Administration.

Associated staff Faculty and Research Fellows:

Associate Professor Jeffery Pfeifer
Dr Ben Spivak
Dr. Stephane Shepherd

The effects of victimisation

Lead: Dr. Stefan Luebbers

Research on the effect of being victimised addresses questions related to adverse outcomes and exposure to violence, abuse, neglect and other forms of maltreatment experienced throughout the life course. Our research aims to improve the understanding of victimisation through the assessment of situations in which victimisation occurs, with a view to enhancing early intervention and prevention strategies, as well as treatment responses to victims of violence and other criminal offences.

Our research in this area focusses on:

- Long-term effects of child sexual abuse and other forms of childhood maltreatment
- Understanding the vulnerability to victimisation in people with mental disorder and disabilities
- Developing and evaluating evidence-based assessment and interventions to reduce the rate of victimisation and the adverse sequelae of victimisation
- Models and predictors of successful child protective intervention

The CFBS has strong partnerships with the Victorian Forensic Paediatric Service, Children's Court Clinic, Victoria Police, and the Office of the Senior Practitioner. Key projects in this area include: data linkage studies involving the largest known sample of confirmed victims of child sexual abuse exploring the rates of mental illness, suicide, medical conditions, offending and victimisation; the nature and prevalence of victimisation in people with intellectual disability and schizophrenia-spectrum disorders; case file review of child protective matters over a period of 10 years to identify risk and protective factors; and investigation of ways to intervene with those who have experienced victimisation to reduce adverse outcomes and foster recovery. Future collaborative studies between the CFBS and the Department of Human Services are in the early stages of development.

Faculty and Research Fellows:

Dr. Lillian De Bertoli
Emeritus Professor Paul Mullen
Dr. Margaret Nixon
Professor James Ogloff

Catalyst Consortium

The Catalyst Consortium establishes a partnership between leading researchers, clinical leaders, and correctional/forensic mental health partner organisations to systematically address persistent violence and sexual offending. The name Catalyst was chosen for the consortium since it will focus research, clinical and administrative expertise on the problem of violence to precipitate change in those who have engaged, or are likely to engage, in persistent violence and sexual offending, and the agencies that provide services to them. The problem of violence¹, including sexual violence and family violence, is of national and international significance and requires innovative and transformational research and practice to enhance understanding and assessment, intervention, reintegration and prevention efforts. The aim of the Catalyst Consortium is to enhance our understanding of the causal factors of violence, and to intervene effectively with people who engage in violence in a manner that will increase community safety. We shall target people who commit interpersonal violence, including those with mental disorders (including personality disorders), substance misuse disorders, and cognitive impairment.

The objectives of the Catalyst Consortium are to:

- Consolidate an understanding of the psychological and related factors that contribute to persistent violent crime and sexual offending, including the complex and inter-related effects of mental illness, substance misuse, and personality dysfunction;
- Refine and validate assessment methods to ensure that they measure factors related to violence and that changes in measurements correspond with actual changes in behaviour;
- Systematically develop and test innovative psychological intervention strategies that draw upon new technologies to produce positive behavioural change;
- Validate and implement mechanisms to assist in the assessment of readiness for community release in those detained in prisons, forensic psychiatric hospitals and other secure facilities.
- Model community environments and strategies that support people to sustain these positive changes; and
- Focus on solutions and mechanisms to reintegrate people back into society in ways that ensure public safety.

Research and program development foci

The research program comprises three interrelated areas of focus:

- Understanding and Assessment
- Prevention and Intervention
- Desistance and Reintegration

In addition to the areas of focus, seven substantive themes cut across each of the research programs and will be considered within the research program development undertaken in each area:

- Social, contextual and criminological factors
- Complex criminal behaviour
- Diversity
- Disability
- Mental illness
- Personality dysfunction
- Substance misuse
- Human rights, ethics, law and policy
- Training and workforce development
- Use of technology

Funding

The Centre for Forensic Behavioural Science, Swinburne University of Technology, has received a grant from the Victorian Corrections Minister to establish the Catalyst Consortium. The Victorian Institute of Forensic Mental Health has contributed additional funding to ensure the work extends to forensic mental health consumers and forensic mental health services.

Progress

The Catalyst program of work will start in July 2017.



¹ The focus of Catalyst will be on persistent violence broadly speaking, including all manifestations of interpersonal violence (e.g., aggression and physical harm, sexual harm, family violence). Although the focus of the research must be on violent presentations across offence types, offence specific attitudes, social cognition, and behaviour must also be addressed (e.g., sexual, stalking, family violence).

Research strategy

The Research Strategy for this period identifies seven key research outcome areas, associated objectives and strategies to achieve each outcome. The key research outcome areas align with the Forensicare strategic directions for the period 2015–2017 as follows.

Forensicare Strategic Plan Goals and Outcomes	Key Research Outcome Area
<p>Greater Accessibility to services Evidence based forensic mental health services are delivered to a wide range of consumers in the forensic mental health area.</p>	<ul style="list-style-type: none"> • Evaluating existing clinical programs and interventions • Dissemination of Research findings.
<p>Innovation in everything that we do Our services are based on best evidence and deliver contemporary best practice to our consumers and stakeholders.</p>	<ul style="list-style-type: none"> • Evaluating new services and novel clinical programs/interventions • Determinants of health and health outcomes • Research Leadership, collaboration and Governance • Research capacity • Sustainable research program.
<p>Meet new challenges and drive change Forensicare participates in the ongoing development of mental health services.</p>	
<p>Outstanding organisational performance Forensicare is acknowledged as an effective, innovative service that is accountable, transparent and supports safety and continuous improvement.</p>	

Progress against key research outcome areas – June 2017

Key research outcome area	How are we doing?
1. Evaluating existing clinical programs and interventions	<ul style="list-style-type: none"> ✓ Completed formal evaluations of the Problem Behaviour Program, Community Integration Program and Breathe Easy Smoke free policy implementation. ✓ Completed internal evaluations of the prison mental health services Nurse Practitioner Program and the Court Liaison Service. ✓ Formal program evaluations include an examination of program activity, client engagement, and mental health/criminogenic outcomes over time and across cohorts. ✓ Completed Social Work honours project examining social work service models for women in forensic mental health systems. ✗ Examination of clinical recovery or person-centred recovery are limited by clinical data recording and accessibility and minimal evaluation resources. ✗ Some existing community clinical programs remain to be formally evaluated and evaluation of inpatient therapeutic interventions is limited. ✗ Improvements to clinical data recording for other inpatient and community services require resources that are not currently available. ✗ Evaluations often remain discipline-centric with domination by Psychology.
2. Evaluating new services and novel clinical programs/interventions	<ul style="list-style-type: none"> ✓ Evaluation funds were prospectively built into the Mobile Forensic Mental Health Service budget. The evaluation includes an examination of program activity, client engagement, mental health/criminogenic outcomes over time and across cohorts. Examination of clinical recovery and person-centred recovery is limited by evaluation resources and clinical data recording and accessibility. ✓ Completion of a number of evaluations of new clinical initiatives and interventions including, the Safewards implementation on Canning, the use of sensory rooms and sensory trollies at the Thomas Embling Hospital (TEH), the smoke free policy at TEH. ✗ No prospective evaluation allocation in the Ravenhall Correctional Centre Forensic Mental Health Service budget or the TEH Secure Psychiatric Intensive Care Unit budget – we are now working to find funds to cover formal evaluations. ✗ Evaluation of the new clinical initiatives at TEH are often hampered by difficulties in the consistent collection of outcome data, small sample numbers and problems with isolating treatment effects. ✗ A number of service oriented projects are ongoing including, the effectiveness of the electronic Dynamic Appraisal of Situational Aggression (eDASA) and related nursing interventions, and the relationship between imminent risk of aggression and PRN medication use at TEH. ✗ Liaison between the Forensicare Research Lead and a number of new or expanding clinical services to improve clinical data recording for future evaluation efforts. However, for a number of service initiatives, the required resources to improve clinical data recording are not available. ✗ Pressure to implement new clinical interventions/initiatives prevents robust evaluation with a baseline component and forces evaluation efforts towards retrospective designs.

Key research outcome area	How are we doing?
3. Determinants of health and health outcomes	<ul style="list-style-type: none"> ✓ An examination of cardiovascular and metabolic changes in TEH patients was included in the evaluation of the smoke free policy. ✓ Data regarding cognitive function is being collected as part of the Mobile Forensic Mental Health Service evaluation. ✓ Exploring mechanisms to screen for intellectual disability at Ravenhall. ✗ Limited resources to examine health status, contributors to poor health outcome, or to develop and evaluate health improvement interventions in the wider Forensicare patient/client population.
4. Research leadership, collaboration, and governance	<ul style="list-style-type: none"> ✓ Well established links with Swinburne University via the Centre for Forensic Behavioural Science – primarily a psychology focus. ✗ Occupational Therapy have existing links with key OT course providers e.g. Monash, research links are limited to Honours projects. ✗ Social Work have links with Monash and LaTrobe for the provision of training placements but limited research is built into these placements. ✓ Forensicare and Corrections Victoria are key funders of the CFBS Catalyst Consortium. ✗ No establishment of a Lecturer position in Forensic Psychiatry although efforts are ongoing. ✗ No establishment of an academic position in forensic mental health nursing. ✗ Research Governance procedures have been revised and a new research approval policy has been ratified. However, the Research Governance Framework requires revision and updating to produce a user-friendly set of documents. ✓ Research project tracking systems are in place to monitor the ethical approval and progress of approved projects.
5. Research capacity	<ul style="list-style-type: none"> ✓ Staff who meet criteria are granted regular leave or an extended leave of absence to complete a relevant post-graduate research course. ✗ Staff are allowed 5 days paid leave for professional development activity which can include research. ✗ Currently no direct financial support for staff engagement in research. ✓ A research clinic has been established to provide support to staff who would like to engage in research. Since commencement, in February 2014, over 120 research consultation and planning meetings (i.e. on average 1 per week) have been conducted across the organisation. ✗ Funding opportunities for staff engagement in research are limited by the inaccessibility of many funding sources to staff with minimal research track record and the difficulty in gaining funds for service oriented research. Resources are required to investigate and develop state government funding resources. ✓ Occupational Therapy Honours students are being actively assigned to relevant evaluation projects at TEH.
6. Research translation	<ul style="list-style-type: none"> ✓ Research dissemination seminars for Forensicare staff are now held bi-annually ✓ Researchers are required to complete a "Clinical Implications and research translation" section in final project reports ✓ The Forensicare Annual Research Report has been extensively revised to provide annual progress reports for each study and to more clearly communicate the outcomes for each completed project. The Annual Research Report now also captures research dissemination and translation activity over and above publication and presentation at peer reviewed conferences. ✗ Research news stories on the Forensicare intranet are used to communicate the outcomes of completed projects to Forensicare staff. Current resource limitations have precluded any extensive communications of key research findings from external groups. ✗ There is limited communication of research outcomes to Forensicare consumers ✓ Since the beginning of 2015 the CFBS and Forensicare staff have published more than 100 articles in peer reviewed publications and given more than 120 conference presentations. ✗ The Forensicare internet has been revised to include publications, abstracts and summaries of current research activity. The intranet has had some revision however it needs to mirror the new internet content.

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Research directions 2016–2017

Projects aligning with CFBS research streams and key research priorities as identified in the Forensicare Strategic Research Plan include:

Forensic Mental Health

- An evaluation of the effectiveness of the 'Occupational Function and Performance' therapeutic programs in a forensic psychiatric hospital
- Co-occurring mental disorders and behavioural disturbances among prisoners
- Community volunteers working with correctional populations
- Enhancing well-being and resilience within prisons: a psycho-educational approach for Correction Officers
- Evaluating the introduction of the Safewards model and interventions to a medium to long-term forensic mental health unit
- Evaluation of the Mobile Forensic Mental Health Service
- Evaluation of the Port Phillip Prison Indigenous Education Support Program
- Exploring the perceptions of well-being and workplace adversity in Indigenous corrections employees
- Forensic Mental Health Services Restrictive Intervention Benchmarking
- Social work service models for women in forensic mental health systems
- Still not getting it? Are the cultural competency expectations of healthcare providers and minority patients aligned?
- The effect of cognitive remediation for working memory deficits in schizophrenia
- Wellbeing, distress and coping in Indigenous and culturally and linguistically diverse prison populations

Aggression and Violence

- Assessing psychopathy in forensic settings: Towards contemporary diagnostic and conceptual clarification
- Assessing schema modes using self- and observer-rated instruments: Associations with aggression
- Attending to dynamic risk factors within a continuum of care prison model environment: Implementing the structured Dynamic Assessment Case Management-21 (sdac-21)
- Beyond prediction: A prospective validation study of a clinical decision making application of the Dynamic Appraisal of Situational Aggression
- Developing an understanding of the General Aggression Model's knowledge structure, aggressive script rehearsal, to inform intervention strategies
- Enhancing risk assessment and nursing interventions to prevent and reduce violence and the use of restrictive interventions in forensic mental health units
- Establishing the predictive validity of the VP-SAFVR for fatal family violence
- Evaluating the introduction of the Safewards model and interventions to a medium to long-term forensic mental health unit
- Extending the utility of the General Aggression Model
- Improving community corrections practice with use of a case management tool: the Dynamic Risk Assessment for Offender Reentry (DRAOR)
- Intimate partner violence risk assessment and management in an Australian policing context
- Investigating a group treatment for violent offenders with aggressive scripts
- Is there a relationship between imminent risk of aggression and utilisation of prescribed p.r.n (as needed) medication in acute psychiatric inpatients?
- Offender change within in-prison rehabilitation programs
- Protective factors and their relationship with risk factors when predicting recidivism
- Psychosis and violence: adverse outcomes and effective intervention
- The Development of the Forensic Mental Health Nursing Competency Assessment Tool (FMHN-CAT)
- Understanding children who abuse: What constitutes child-to-parent violence and why does it occur?
- Understanding predictors of imminent offending: Which risk domains signal short-term recidivism?
- Using dynamic risk to predict violent reoffending in 'real time': Applying a framework for proximal assessment of risk of general recidivism to predict violent outcomes
- Violent offenders' treatment change in dynamic risk and protective factors: Associations with violent recidivism
- Which risk factors may 'flag' imminent violence? Exploring 'real time' risk assessment to improve correctional practice
- Youth intimate partner violence in an Australian sample

Complex criminal behaviour

- An analysis of offence paralleling behaviour in a custody-based sex offender treatment program: Can this behaviour be used to predict risk of reoffending?
- An investigation into whether the reassessment of dynamic risk and protective factors improves the prediction of imminent criminal recidivism
- Consequences of Intimate Partner Violence: Physical Health, Psychological Health and Service Utilisation in Victims and Perpetrators
- Enhancing police responses to family violence by improving risk assessment and management
- Keeping the network alive: What characterises Australian child exploitation material offenders?
- Motivation-ideology-capability risk assessment and treatment management (MICRA) for preventing ideology-based terrorism recidivism in Indonesia
- Offender decision making and desistance from crime
- Understanding subgroups of firesetters
- Understanding thinking and emotions associated with difficult interpersonal behaviour: An investigation of psychological differences between stalkers and other offenders
- Wrinkles in Sexual Behaviour: What is the risk of sexual abuse in an aged population?

Psychology and Law

- Asking the right questions: Improving juror comprehension of instructions
- Assessing fitness to stand trial in Australia and New Zealand
- Effective judicial supervision of offender rehabilitation project
- Presentence reports and sentencing comments: An examination of expert reports in sentencing decisions
- The consideration of culture in pre-sentence reports

Victimisation and its effects

- Assessing the health and socioeconomic burden of child sex abuse
- Pathways from maltreatment to offending: Exploring the mediating factors
- There is always a backstory: Trauma histories in a multicultural population of adult female offenders
- Tuning in to kids: A pilot study of the intensive delivery of an emotion-focused early intervention program for children with emerging conduct disorder.



Research in progress 2016–2017

Grant funded research

A Prospective Cohort Study of Ex-Prisoners with a History of Injecting Drug Use: Examining Health Service Utilisation, Physical and Mental Health and Blood Borne Virus Trajectories

National Health and Medical Research Council project grant scheme 2014–2019 (\$956,020)

Mark Stoove, Stuart Kinner, Tony Butler, James Ogloff, Paul Dietze, Campbell Aitken

Rationale and aims:

- This cohort study offers an innovative and unique opportunity to track the post-release trajectories of a large sample of prisoners in Victoria who have a history of injecting drug use.
- Because people who inject drugs are vastly over-represented in prison populations, frequently transition in and out of prison and often experience very high levels of physical and mental health morbidities, this study will inform ways to reduce crime and the social, health and economic costs of incarceration.
- Data linkage will allow the tracking of prisoner outcomes in key health and criminal justice areas well beyond the period of direct follow-up. The combination of these elements is considered internationally unique and innovative.

Methodology:

- The study will recruit Victorian male prisoners with a history of injecting drug use in the 4–6 weeks prior to their release.
- Follow-up of these study participants will occur three, 12 and 24 months' post-release. At each point, participants will undertake in-depth interviews and provide blood samples to examine outcomes related to blood borne virus transmission.
- Consent will also be sought from participants to link this information with justice and health-related databases, including LEAP, Medicare and mental health data

Progress:

- In-prison baseline and recruitment of participants is now complete
- Follow-up data collection is continuing. Rates of three-month follow-up are currently over 75%.

2016–2017 project outputs

- Winter RJ, Young JT, Stoové M, Agius PA, Hellard ME, Kinner SA. Resumption of injecting drug use following release from prison in Australia. *Drug Alcohol Depend.* 2016 Nov 1;168:104–111. doi: 10.1016/j.drugalcdep.2016.08.640

Asking the right questions: Improving juror comprehension of instructions

Australian Research Council Linkage Grant (\$230,444)

James Ogloff, Jonathan Clough, Rudy Monteleone

Rationale and aims:

- In the modern institution of trial-by-jury, the jury's role is limited to determining the facts in the case. This requires jurors to decide the issues in a case in light of relevant substantive, procedural and evidentiary law. Numerous studies have reported that jurors struggle to adequately fulfil this task.
- This research project considers the extent to which jurors comprehend the judge's charge and the effect of so-called 'integrated' or 'fact-based' directions on the jury decision-making process. The project aims to evaluate:
 - The extent to which standard form judicial directions place unrealistic cognitive demands on jurors that make it difficult for them to comprehend and apply judicial directions;
 - Whether an alternative method of directing jurors, specifically 'fact-based' directions, significantly improves juror comprehension;
 - Whether the use of modified delivery of judicial directions significantly improves juror comprehension of judicial directions in either standard or fact-based form; and develop and evaluate 'model' processes for jury directions, based on the outcomes of the above questions, to maximise juror comprehension.

Methodology:

- Study 1 consisted of a large scale highly realistic controlled simulated jury experiment.
- Study 2 consisted of a large scale international field study comparing jurors who received fact-based directions in New Zealand against jurors receiving a range of instructional types in Victoria.

Progress:

- Data collection for Study 1 has been completed and analysed and has resulted in a PhD thesis which has been passed by Monash University. An article has been written and submitted to the journal *Psychology, Public Policy, and Law* and is currently being revised for resubmission after initial reviews. A second article intended for publication is being written at the moment.
- Data collection for Study 2 has been completed and the data has been analysed. Publication of articles will begin shortly.

2016–2017 project outputs:

- Paper presentation (2017) 'Improving Communication with the Modern Jury: The Role of Fact-Based Directions in Improving Juror Comprehension', *Law and Courts in an Online World International Conference*, Melbourne, Australia.

The consideration of culture in pre-sentence reports

Swinburne University Faculty of Health, Arts and Design Research Development Grant (Early Career Researcher) (\$9,940)

Stephane Shepherd, Thalia Anthony, Elena Marchetti, Justin Trounson, James Ogloff, Victorian Aboriginal Legal Service

Rationale and aims:

- This study aims to ascertain if and how Aboriginal cultural and community issues are addressed in Victorian pre-sentence reports.
- It will identify differences in the nature of pre-sentence reports between the conventional County Court and County Koori Court.
- It will evaluate the emphasis placed on issues of risk and reoffending (based on criteria relating to offending history, substance abuse, psychological deficit) as opposed to issues that would be relevant to cultural identity and strengths (including where the person grew up, relationships in community, support networks, availability of Aboriginal programs).

Methodology:

- A total of approximately 60 County Court (30 Koori Court) pre-sentence reports will be obtained from the Department of Justice and Regulation (Vic.). All reports will be for Koori offenders. The reports will be qualitatively and quantitatively analysed in partnership with research assistants from the Victorian Aboriginal Legal Service. Qualitative analyses will identify common themes and references to Aboriginal cultural considerations. The qualitative program NVivo will be utilised for this analysis.
- A comparison with a prototypical Gladue report employed in Canadian courts will be conducted to ascertain areas of inattention to culture. The incidence of references to cultural themes and placement of those references in the report (i.e. in sections pertaining to the client's mental health issues, violence risk, environmental circumstances, demographics only) will be tallied.
- The study will then examine whether incidence and placement impact the likelihood of cultural issues being referred to in the reports' recommendations section and whether these findings differ by offence type.

Progress:

- This project is currently awaiting ethics approval.

Effective judicial supervision of offender rehabilitation project

Victorian Legal Services Board and Commissioner (\$47,893)

James Ogloff, Benjamin Spivak, Stephane Shepherd, Diane Sivasubramaniam, Pauline Spencer

Rationale and aims:

- Reforms to Victorian sentencing law offer a number of mechanisms for magistrates to supervise offenders, including deferral of sentences and judicial monitoring as part of a community corrections order. Judicial supervision allows for an accused/offender to appear before the same magistrate on multiple occasions to encourage and monitor engagement in rehabilitation programs.
- The project seeks to address the lack of information around magistrates' use and perceptions of judicial supervision.

Methodology:

- The project seeks to address the lack of information around magistrates' use and perceptions of judicial supervision by a series of structured interviews with magistrates, court observations and surveys.
- With these it is hoped to determine:
 - how widespread judicial supervision is
 - who is being targeted and why
 - what types of supervision are being used (e.g. pre-plea, post plea, post sentence)
 - what, if any, barriers to judicial supervision are perceived by magistrates, and
 - what techniques are being used by magistrates in court review hearings when undertaking supervision.

Progress:

- The first stage of the project (structured interviews) has been completed.
- The second stage of the project is due to start in October 2017.

2016-2017 project outputs:

- Spivak, B., & Spencer, P. (2017, April). Examining magistrates' perceptions and use of judicial supervision. Paper presented at the Second International Conference on Non-Adversarial Justice, Sydney, Australia.

Research in progress 2016–2017

Grant funded research

Enhancing police responses to family violence by improving risk assessment and management

Medicare Local, Department of Health and Human Services (Vic.), Victoria Police and Forensicare (\$589,433)

Troy McEwan, Susanne Strand, James Ogloff, Daniel Shea, Melisa Wood

Rationale and aims:

- This project continues a program of research in collaboration with Forensicare and Victoria Police aiming to improve risk assessment and management of family violence.
- The 2016–2018 project aims to:
 - implement a new system for risk assessment of family violence by police
 - evaluate risk management by family violence teams, and
 - improve the overall health and safety of family violence victims through changes to police intervention.

Methodology:

- The project involves multiple separate research studies with different methodologies.
- A new actuarial frontline risk assessment instrument, the VP-SAFvR, was developed by the CFBS and implemented in two police divisions from July 2016, with an evaluation using police LEAP data finalised in March 2017. This project involved police members applying the instrument in every family violence report and then following up subsequent family violence incidents over three months to evaluate the predictive validity of the tool. In addition, a range of qualitative and quantitative research was conducted examining the implementation of and opinions about the VP-SAFvR
- A structured professional judgement instrument was implemented in Family Violence Teams (FVTs), accompanied by embedding a Forensicare psychologist to provide guidance and supervision around risk assessment and management. The efficacy of this approach will be evaluated in a 2018 follow-up of health and reoffending outcomes for victims and perpetrators, comparing cases dealt with by the project FVTs with those dealt with in a control police division.
- Overall health service usage and health issues of family violence victims and perpetrators will be examined using a sample of 6000 individuals whose health data will be collected from Victorian and Federal health databases. This will allow the development of a cost estimate of the health impacts of family violence, and the identification of where these health concerns have the greatest impact on the community.

Progress:

- The VP-SAFvR evaluation was provided to Victoria Police and the Department of Premier and Cabinet (Vic.) in March 2017. The recommendations of the evaluation were largely accepted by Victoria Police, with the decision to implement the VP-SAFvR more widely waiting on announcements around statewide policies on family violence risk assessment and management in early 2018.
- Four risk assessment workshops were delivered by CFBS and Forensicare staff to FVT members during 2016 and 2017, and the structured professional judgement risk assessment and management process ran in two police divisions between July 2016 and June 2017. Data collection at police sites was completed on 30 June 2017 and follow-up data will be collected in February 2018 from police and health service databases. Victoria Police has chosen to continue the new risk assessment and management process in one police division while the outcomes of the project are still pending.

- Permissions have been obtained from Victorian Health Departments to access local mental health service usage data. Applications are submitted for equivalent permission to access Federal data (Medicare and PBS). Additional funds (\$30,000) were awarded by the Department of Health and Human Services (Vic.) to cover the costs of health data collection.

2016–2017 project outputs:

- Bateson, S., & McEwan, T. (2016, October). How a partnership between police and forensic mental health services is trying to change outcomes for victims of family violence. Paper presented at the Law Enforcement and Public Health (LEPH) 2016 Conference, Amsterdam, The Netherlands.
- McEwan, T. E., Bateson, S., & Strand, S. (2017). Improving police risk assessment and management of family violence through a collaboration between law enforcement, forensic mental health and academia. *Journal of Criminological Research, Policy and Practice*, 3(2), 119-131. doi: 10.1108/JCRPP-01-2017-0004.
- McEwan, T. E., Spivak, B., Luebbers, S., Shea, D., & Ogloff, J. R. P. (2017). Evaluation of the Victoria Police Screening Assessment for Family Violence Risk (VP-SAFvR). Report prepared for Victoria Police. Melbourne, Australia: Centre for Forensic Behavioural Science Swinburne University of Technology.
- McEwan, T. E., Spivak, B., Wood, M., Letic, G., & Ogloff, J. R. P. (2016, October). Implementing evidence-based family violence risk assessment in a police setting: The challenges of high volume, high risk, and rapid change. Paper presented at the Australian and New Zealand Association of Psychiatry, Psychology and Law (ANZAPPL) Annual Congress, Auckland, New Zealand.
- Wood, M., Strand, S., Spivak, B., & McEwan, T. E. (2017, February). Evidence-based risk assessment to improve policing practice in family violence in Victoria. Paper presented at the Asia Pacific Association of Threat Assessment Professionals (APATAP) Annual Conference, Singapore.

Enhancing wellbeing and resilience within prisons: A psycho-educational approach for the missing middle

Australian Research Council Linkage Grant (\$778,000)

James Ogloff, Michael Daffern, Jeffrey Pfeifer, Jason Skues, Justin Trounson, Dennis Roach (G4S)

Rationale and aims:

- Many prisoners experience mental illness and psychological distress, and these symptoms may increase the risk of reoffending.
- Prison officers also experience high levels of anxiety and distress, which can have a detrimental effect on their work performance and satisfaction.
- This project aims to identify the mental health needs and factors that lead to psychological distress among prisoners and prison officers and then to test novel brief interventions for prisoners and prison officers suffering sub-clinical levels of distress.

Methodology:

- Prisoners
 - Research Phase 1: A quantitative survey of prisoner wellbeing at Port Phillip Prison.
 - Research Phase 2: A qualitative study of prisoner wellbeing at Port Phillip Prison.
 - Research Phase 3: Development, implementation and evaluation of wellbeing intervention for prisoners.
- Prison Officers
 - Research Phase 1: Development, implementation and evaluation of wellbeing intervention for prison officers.
 - Research Phase 2: Focus groups with intervention participants and semi-structured interviews with relevant operational staff
- The programs will be evaluated to determine whether they are preventing mental health deterioration among participants and whether the results reduce repeat incarceration for prisoners and increase job satisfaction and performance for officers.

Progress:

Prisoners

- Research Phase 1:
 - Over 500 prisoners have completed the prisoner wellbeing survey.
 - Data collection is now complete.
- Research Phase 2:
 - 40 participants have completed the prisoner wellbeing and experiences focus groups.
 - Data collection is now complete.
- Research Phase 3:
 - CopE-Well prisoner wellbeing program has been developed
 - Program evaluation will commence on 10 August 2017

Officers

- Research Phase 1:
 - AMStrength officer wellbeing program has been developed.
 - Program evaluation will commence on 5 July 2017
- Research Phase 2:
 - Focus groups with AMStrength program participants will commence on 30 August 2017.

2016–2017 project outputs:

- Ogloff, J. R. P., Daffern, M., Pfeifer, J. E., Skues, J., Trounson, J. S., Connor, J., & Evers, T. (2016, October). Well-being in contemporary correctional settings: New perspectives and new approaches for prisoners and prison officers. Paper presented at the Annual Meeting of the International Corrections and Prisons Association (ICPA), Bucharest, Romania.
- Oliva, A., Roach, D., & Owens, R. (2016, October). Managing the well-being of staff and inmates: An industry based perspective in regard to the promotion of wellbeing and the effective management of research collaborations. Paper presented at the Annual meeting of the International Corrections and Prisons Association, Bucharest, Romania.
- Pfeifer, J. E., Ogloff, J. R. P., & Trounson, J. S. (2016, October). Technology and prison officer wellbeing: Thinking outside the box. Paper presented at the Annual meeting of the International Corrections and Prisons Association, Bucharest, Romania.
- Skues, J., Connor, J., Daffern, M., Trounson, J. S., Pfeifer, J. E., & Ogloff, J. R. P. (2016, October). Identifying the 'Missing Middle' and establishing the need for service provision. Paper presented at the Annual Meeting of the International Corrections and Prisons Association (ICPA), Bucharest, Romania.
- Trounson, J. S., & Pfeifer, J. E. (in press). Correctional officer wellbeing: Training challenges and opportunities. Practice: The New Zealand Corrections Journal.
- Trounson, J. S., & Pfeifer, J. E. (2017, July 21). Correctional officers and workplace adversity: Identifying interpersonal, cognitive & behavioral response tendencies. Journal of Correctional Health Care. Advance online publication. doi:10.1177/1078345817720923.
- Trounson, J. S., Ogloff, J. R. P., & Pfeifer, J. E. (2016, October). The development of the Advanced Mental Strength and Conditioning (AMSAC) training program for correctional officers. Paper presented at the Annual meeting of the International Corrections and Prisons Association, Bucharest, Romania.
- Trounson, J. S., Pfeifer, J. E., Skues, J., & Ogloff, J. R. P. (2016, October). How an officer responds to adversity matters: Informing preventative training programs. Paper presented at the Annual meeting of the International Corrections and Prisons Association, Bucharest, Romania.

Research in progress 2016–2017

Grant funded research

Exploring the perceptions of well-being and workplace adversity in Indigenous corrections employees

Swinburne University Indigenous Studies Research Grant (\$5,000)

Justin Trounson, Jeffrey Pfeifer, Stephane Shepherd

Rationale and aims:

- Little research to date has explored the unique stressors that are faced by Indigenous Australian correctional staff.
- The study aims to:
 - gain a deeper understanding of the workplace adversity factors that face Indigenous Australians working within the correctional industry
 - work with Indigenous Australian correctional staff to identify which of these adversity factors are of particular concern to Indigenous Australians working in corrections, and
 - expand on the findings of Trounson and Pfeifer by working collaboratively with Indigenous Australian correctional staff to better understand how they manage these challenges effectively and how these skills/strategies might be passed on to other Indigenous employees through the development of relevant training.

Methodology:

- This project will take a mixed method approach using qualitative and quantitative research methods.
- Focus groups with Indigenous Australian Corrections employees will be undertaken.
- Self-report surveys will be distributed to Indigenous Australian Corrections employees.

Progress:

- Research support funds have been obtained.
- Letters of support from corrections partners have been received.
- The ethics application has been prepared for submission.

Evaluation of the Port Phillip Prison Indigenous Education Support Program

Swinburne University Indigenous Studies Small Research Project Grant (\$4,000)

Justin Trounson, Andrew Peters

Rationale and aims:

- The Indigenous Education Support Program has been implemented to assist Indigenous inmates engage, or consider engaging, in educational pursuits while incarcerated.
- The program pairs volunteer student tutors with Indigenous inmates to provide educational support and positive role modelling and encourage connection to culture and community.
- This study aims to evaluate the program to establish the effectiveness of the initiative.

Methodology:

- This project includes the following components:
 - pre/post program evaluation
 - pre/post quantitative survey, and
 - post-program qualitative examination of effectiveness (focus-groups and semi-structured interviews).

Progress:

- Data collection and analysis has been completed.
- Program evaluation is being written up for submission to the Journal of Australian Indigenous Issues.

2016–2017 project outputs:

- Boyce, C. A., Trounson, J. S., & Pfeifer, J. E. (2016). Examining the role of connection to culture and community in promoting Indigenous inmate engagement with education in prison. *Advancing Corrections*, 2, 79-90.
- Munro-Harrison, E., Trounson, J. S., & Ironfield, N. (2017, March). Indigenous youth mental health. Workshop. Delivered to Youth Advisory Council of Victoria. Melbourne, Australia.
- Munro-Harrison, E., Trounson, J. S., & Ironfield, N. (2016). A culturally safe education engagement model for Aboriginal and Torres Strait Islander Men in prison. *Aboriginal & Islander Health Worker Journal*, 40, 34-35.
- Penovic, T., Trounson, J. S., & Munro-Harrison, E. (2017, February). Students and inmates: Practical internships behind bars. Paper presented at the 7th Annual Human Rights Tertiary Teachers' Workshop, Melbourne, Australia.

The impact of micro-aggressions on the distress levels of Indigenous university students

Swinburne University Indigenous Studies Research Grant (\$5,000)

Stephane Shepherd, Yin Paradies, Scott Lilienfeld, Diane Sivasubramaniam, Benjamin Spivak

Rationale and aims:

- A growing body of Australian research has demonstrated associations between racism and poor mental health outcomes. Yet, remarkably, there is no scientific research on micro-aggressions in Australian settings.
- This study provides a novel opportunity to investigate both the perceptions and impact of micro-aggressions on Indigenous Australian university students.
- Prior research has indicated that many Indigenous Australians endure experiences of explicit racism which have detrimental psychological consequences. It is of interest to determine if the perception of micro-aggressions directly prompts similar adverse psychological reactions and, additionally, what factors induce (or mitigate) the likelihood of an individual taking offence from micro-aggressions.

Methodology:

- A total of 600 Swinburne University students (200 Indigenous Australian; 200 Anglo-Australian; 200 Culturally and Linguistically Diverse) will be recruited to participate in the study.
- Students at Swinburne complete the Research Experience Program (REP), in which they participate in research as a learning exercise and in exchange for course credit. Participants will be invited to complete an anonymous online survey, and complete four questionnaires and additional demographic information.
- This is the first project to ascertain how multicultural university students interpret micro-aggressions, what factors underpin these interpretations, and what impact micro-aggressions have on their wellbeing. Information from the study will also inform us as to which particular types of micro-aggressions students find inappropriate.

Progress:

- This study is awaiting ethics approval.

Offender decision making and desistance from crime

United States Department of Justice National Institute of Justice Research, Development, and Evaluation Grant Award (\$458,950)

Caleb D. Lloyd, Ralph C. Serin

Rationale and aims:

- Multiple theories of criminal behaviour emphasise thinking styles as a key factor that underlies offender motivation to commit crime.
- Research rarely attempts to integrate and compare these explanations.
- This study employs comprehensive assessment of offender thinking styles using a multi-theoretical approach.
- The first aim of this study is to conduct focus groups with offenders to elicit their thoughts about what leads them to decisions to commit crime, or resist crime.
- The second aim of this study is to observe offenders' thinking styles across time.
- To inform offender rehabilitation and management, analyses will examine the relationship between thinking styles and re-offending.

Methodology:

- First, this study utilises a focus-group design, employing a semi-structured interview with small groups of offenders on community supervision.
- Focus group participants are nominated by their supervision officers as successfully completing the requirements of their probation.
- Second, this study employs a prospective, longitudinal, multi-wave questionnaire design.
- In two US jurisdictions, a large sample (450 in total) of offenders on community supervision are self-reporting their thinking styles across a six-month period.

Progress:

- One focus group has been conducted and audio-recorded.
- The first wave of data collection at one of the two jurisdictions has begun.
- Commitment from the second jurisdiction has been secured, and project launch planning is occurring.

Research in progress 2016–2017

Grant funded research

Research and evaluation of traffic and pedestrian stops

San Jose Police Department Research Contract (\$190,360)

Michael R. Smith, Robert Tillyer, Jeff Rojek, Caleb D. Lloyd

Rationale and aims:

- In the United States, there are concerns that individuals identifying as ethnic minorities have disproportionate contact with law enforcement compared to White individuals, such that they are stopped, detained, questioned, and/or ticketed by police officers with greater frequency.
- This study was commissioned to evaluate the nature and degree of disparity across race groups in traffic and pedestrian stop data routinely collected by the San Jose Police Department.
- The core aim of the study is to quantify any observed disparities across race groups in traffic and pedestrian stops, with the secondary aim to understand and describe the potential reasons why observed disparities may be occurring, using focus groups and field observations.

Methodology:

- Using data on over 80,000 stops police officers made with citizens that were recorded by the San Jose Police Department between 2013 and 2016, analyses compared stop rates categorised by ethnic group to a variety of 'benchmarks' that estimate the true rate of stops which should occur for each group. Benchmark data were drawn from non-police city-wide datasets.
- In addition, analyses examined the differential likelihood of post-stop outcomes (e.g. arrest, search, handcuff, etc.) across ethnic groups. Data about the citizen, the nature of the stop, the officer conducting the stop, and the location of the stop were used to understand what features may contribute to post-stop outcomes.

Progress:

- The primary statistical analyses have been conducted, and additional analyses and presentation of results are underway.
- Two key reports describing the data and analytic results have been delivered to the San Jose Police Department.

2016–2017 project outputs:

- Smith, M. R., Rojek, J., Lloyd, C. D., & Tillyer, R. (2017). San Jose Police Department traffic and pedestrian stop study. El Paso, TX: University of Texas at El Paso Center for Law and Human Behavior.
- Tillyer, R., Lloyd, C. D., Smith, M. R., & Rojek, J. (2016). Limited detention data audit prepared for the San Jose Police Department. El Paso, TX: University of Texas at El Paso Center for Law and Human Behavior.

Still not getting it? Are the cultural competency expectations of healthcare providers and minority patients aligned?

Swinburne University Faculty of Health, Arts and Design
Research Development Grant (\$3,000)

Stephane Shepherd, Diane Sivasubramanian, Cynthia Willis-Esqueda, Yin Paradies, Juanita Sherwood

Rationale and aims:

- The aim of this pilot study is to broadly investigate the state of cultural competence in Australian and United States health care systems by ascertaining both health care professionals' self-reported levels of cultural competence and community perspectives and experiences of culturally competent care.
- It seeks to identify if community perceptions of culturally competent health care align with those of service providers.

Methodology:

- Semi-structured interviews have been conducted with community members and health professionals in the United States. Questions enquire about patient–clinician experiences in cross-cultural settings, self-reported importance of cultural competence, service provider knowledge of different cultural norms and efforts to provide culturally responsive care, alongside suggestions for improved service.
- The Australian component of the study was abandoned due to insufficient funds.

Progress:

- Data is currently being analysed.

**Which risk factors may 'flag' imminent violence?
Exploring 'real time' risk assessment to improve
correctional practice**

Swinburne University Faculty of Health, Arts and Design Research Development Grant (Early Career Researcher) (\$9,944)

Caleb Lloyd, Michael Daffern, James Ogloff

Rationale and aims:

- Research on assessment of violence risk has begun to move toward seeking 'real time' risk assessment, whereby risk estimates are continually updated to assess short-term risk for violence.
- Using existing assessment data, we will analyse how corrections staff may best predict imminent violence, so that violent-prone offenders exhibiting key risk factors may be triaged toward immediate preventative management strategies.
- These preliminary analyses are intended to provide justification for corrections agencies seeking to implement a brief risk assessment tool (that can predict short-term violence) in community corrections practice.

Methodology:

- Preliminary analyses will capitalise on our access to an existing dataset from an offender population. Data are available to explore how re-offending may differentially relate to both long-term predictors (i.e. criminal history items) and potential imminent predictors (recorded by community corrections staff during supervision sessions with offender clients).
- Dr Lloyd has partnered with US Federal Probation in South Dakota to analyse recidivism data from community-supervised offenders (n = 519) who were also repeatedly measured on the Imminent Assessment Instrument (IAI).

Progress:

- Software necessary for analyses has been purchased.
- Dr Lloyd has continued communicating with the site in South Dakota who will provide the data. Data is scheduled to be delivered by mid-August 2017.
- A research assistant has been hired to organise the data after it is delivered.



Research in progress 2016–2017

Formal service evaluation

Evaluation of the Mobile Forensic Mental Health Service

Justice Health, Department of Justice and Regulation (Vic.) (\$229,525)

James Ogloff, Rachael Fullam, Lillian De Bortoli

Rationale and aims:

- The Mobile Forensic Mental Health Service (MobileFMHS) has been funded by the Department of Justice and Regulation (Vic.) to provide assessment, intervention, and clinical management services to clients (both remanded and sentenced prisoners) with significantly impaired mental functioning, as they transition through the various custodial environments within Victoria.
- The service will include psychological and psychiatric assessment of clients with impaired mental functioning who also engage in seriously challenging behaviours that involve subjective distress and suffering, for example through self-harming and aggressive behaviours. The focus will be on targeted clinical intervention, not just assessment. The service will also maintain a strong focus on identification of clients with psychotic illness, major mood disorders, and other high prevalence mental health disorders, with an emphasis on consolidation of recovery post the acute phase of illness.
- The MobileFMHS is a novel service based on interventions for offenders with complex mental health/mental impairment issues. A formal, prospective evaluation of the service is required to assess whether the specified service outcomes are being achieved. In addition, very little is known about the effectiveness of custodial mental health interventions in reducing ongoing mental health crisis care and offending related to mental illness/mental impairment issues.
- The aims of the evaluation are to examine:
 - the efficiency of the MobileFMHS over time
 - the impact of the service on the clearance (downgraded psychiatric rating and subsequent transfer) and acute service re-engagement (transfer back for assessment and treatment following deterioration in mental state) rates of offenders with mental impairment within Melbourne Assessment Prison (MAP)
 - the effectiveness of the service at reducing ongoing crisis-based mental health care, incidents of suicide and self-harm, incidents of aggression while incarcerated, and recidivism post release, and
 - the characteristics of ongoing mental health service use by offenders following separation from the MobileFMHS.

Methodology:

The rolling evaluation of the MobileFMHS has a number of components and as such is being achieved through a series of related studies.

- Study 1: Efficiency, impact and effectiveness of the service – uses data linkage to link clinical and demographic information on patients receiving treatment from the MobileFMHS with Corrections Victoria data regarding behavioural outcomes in prison (e.g. aggression and self-harm), data from Victoria Police regarding post release offending and data from the Department of Health regarding ongoing mental health service use. It also uses KPI and Correction Victoria data to track the efficiency of the service and the impact on clearance rates at MAP.
- Study 2: Consumer and stakeholder views regarding the MobileFMHS – uses survey, interview and focus group methodology to collect information on offenders' opinions regarding the treatment that they received from the MobileFMHS, and stakeholder awareness and opinions of the MobileFMHS amongst staff working at MAP and the Melbourne Remand Centre (MRC).
- Study 3: Effectiveness of the MobileFMHS group treatment programs – focuses on the impact of the brief, psycho-education based group treatment programs being offered by the MobileFMHS on mental health symptoms in offender participants. Group treatment related change on measures of mental illness symptom severity and on psychological measures related to the content of the group treatment program will be assessed on completion of the group treatment program and at one and three months post completion. Offenders who fail to complete the group programs will act as a control arm for the study.

Progress:

- Data collection is ongoing
- As at 30 June 2017:
 - 210 prisoners have consented to take part in the study 1
 - 14 prisoners have been interviewed (Study 2)
 - 78 prisoners have completed surveys (Study 2), and
 - 114 prisoners have consented to Study 3.
- Progress reports were completed in August 2015, February 2016, June 2016 and October 2017.
- The final project report will be completed by March 2018 (data analysis and writing – in progress).

Consultancy

Evaluation of programs for Serious Violent Offenders

Department of Justice and Regulation (Vic.) (\$267,437)

James Ogloff, Michael Daffern, Kylie Thomson, Andrew Day, Caleb Lloyd

Rationale and aims:

- The CFBS has been invited by the Department of Justice and Regulation (Vic.) to evaluate group intervention programs designed for prisoners classified as violent offenders. These include the Violence Intervention Program (VIP), Making Choices, Maintaining Change, See Change and Talking Change.
- Program efficacy will be gauged based on focus group feedback, degree of treatment change, and recidivism (violent and non-violent). This research also seeks to determine whether the intensity of violence interventions corresponds to the level of risk/need identified during assessment.

Methodology:

- The project will feature 1) focus group and 2) file review and data linkage components. Separate focus groups with facilitators and incarcerated participants will explore strengths and weaknesses of each program, selection and assessment procedures, integrity and quality of delivery, and content relevance for each program.
- File review data collected for the current project will be used to supplement that collected for the Department-funded Validation of the Violence Risk Scale (VRS) project. The combined database will include demographic, offending, treatment and other information. This will be de-identified and used for matching purposes.
- Follow-up will involve criminal charge and conviction data held in the Victoria Police Law Enforcement Assistance Program (LEAP) database, to be extracted up to 10 years following incarceration, until a census date to be determined based upon timelines for project completion and deliverable dates.

Progress:

- Data from VRS validation project and linked LEAP data has been integrated.
- Ethics approval has been received for reviewing final files to gather information on program participation and focus groups with participants of group treatment programs and facilitators.

Evaluation of the CV case management model for serious sex offenders

Department of Justice and Regulation (Vic.) (\$257,752)

Michael Daffern, James Ogloff, Chris Trotter, Andrew Day

Rationale and aims:

- The aim of this review is to provide advice to Corrections Victoria (CV) on options available to strengthen case management outcomes of serious sex and/or serious violent offenders who are under CV supervision in the community.
- Furthermore, it is to evaluate the current case management model, with a particular focus on the Good Lives Model (GLM), to assess its efficacy as the optimal case management model for correctional management of serious sex offenders in Victoria.

Methodology:

- A review of extant literature on GLM and its application to case management, with a particular focus on serious sexual offenders, was undertaken.
- Interviews and focus groups will be conducted with stakeholders to discuss the merits and issues associated with the use of the GLM framework for the supervision of serious sexual offenders.
- A file review to explore the application of GLM to the case management of serious sexual offenders will be conducted.

Progress:

- Literature review has been completed and submitted.
- The interview and focus group stage of the study has been completed and submitted to the funding body.
- File review is underway and due for completion at the end of July.

Research in progress 2016–2017

Consultancy

Forensic Mental Health Services Restrictive Intervention Benchmarking

Office of the Chief Psychiatrist, Department of Health and Human Services (Vic.) (\$20,000)

Brian McKenna, Tessa Maguire, Jo Ryan

Rationale and aims:

- The aim of this study is to develop benchmarks that will assist services to reduce the use of restrictive interventions across FMHS in the states and territories of Australia and in the five regional FMHS in New Zealand.
- This study will assist Victoria to lead the way in establishing performance goals for forensic services to improve service performance and quality, and effect practice change.

Methodology:

- A Delphi Method will be used to gain consensus across forensic mental health services for agreed benchmarks for restrictive interventions. The Delphi Method is a structured communication technique, originally developed as a systematic, interactive forecasting method which relies on a panel of experts (the Directors of Nursing in Australia and in New Zealand or nominated delegates). The experts answer questionnaires in two or more rounds of emails on projected benchmarks with a rationale for using them. The process is stopped after an achievement of consensus and the benchmarks have been set.

Progress:

- Round 1 questionnaires have been sent out to the participants and responses received.
- Data from Round 1 are being analysed.
- Preparation has commenced for Round 2 questionnaires.

2016–2017 project outputs:

- Maguire, T., Ryan, J., & McKenna, B. (2017, June). Forensic mental health services restrictive intervention benchmarking. Paper presented at the International Association of Forensic Mental Health Services Conference, Split, Croatia.

Use of Restrictive practices on males released from prison and entering acute mental health services

Department of Health and Human Services (Vic.) (\$25,000)

Chris Quinn, Lillian Debortoli, Jo Ryan, Brian McKenna, Rachael Fullam

Rationale and aims:

- The research aims to understand whether the use and type of restrictive practices, and the length of hospital stay for males admitted on an Assessment Order from prison is different to that of other admissions involving males on Assessment Orders from non-prison localities.

Methodology:

- A cross-sectional, comparative case control study research design was used to meet the aim of this project

Progress:

- Data collection and analyses are complete
- Report to DHHS in progress
- Manuscript for publication in development

Validation of the Violence Risk Scale (VRS) and the Violence Risk Scale-Screening Version (VRS-SV) in a Victorian offender sample

Corrections Victoria, Department of Justice and Regulation (Vic.)
(\$173,222)

James Ogloff, Michael Daffern, Daniel Shea, Gabrielle Klepfisz

Rationale and aims:

- The assessment, prediction, and prevention of violent behaviours are key activities for criminal justice and forensic mental health services.
- The Violence Risk Scale (VRS; Wong & Gordon, 2003) is an actuarial violence risk assessment tool developed in Canada to assess the risk of violence, particularly for individuals being considered for release from custody into the community (Wong & Gordon, 2003).
- The VRS is designed to appraise static and dynamic risk factors relevant to violent offending, with the dynamic items representing targets for intervention. Research suggests that change in these risk factors is associated with reduced offending, consistent with the view that reductions in criminogenic needs is the main mechanism of change in criminal offenders.
- Use of the VRS is widespread internationally, and it is used by Corrections Victoria to:
 - assess risk for violent reoffending
 - identify targets for intervention, and
 - gauge treatment change.
- Few studies have evaluated the predictive validity of the VRS.
- A study was commissioned to validate the VRS in a Victorian context. The study aimed to:
 - evaluate relationships between the VRS and established instruments (the HCR-20V3 and PCL:SV)
 - establish the accuracy of the VRS for predicting violent reoffending
 - investigate whether changes measured by the VRS were linked to risk for violent reoffending, and
 - identify procedural issues preventing optimal assessment and intervention.

Methodology:

- Collect pre- and post-treatment VRS scoring information by reviewing clinical files of prisoners.
- For a subsample of prisoners who have completed offence-specific treatment violence intervention programs:
 - Collect demographic information, and
 - Score additional instruments (pre- and post-treatment HCR-20V3 and PCL:SV at pre-treatment only).
- Evaluate file quality and identify possible procedural issues.
- Collect offending data from the Law Enforcement Assistance Protocol (LEAP) database.
- Collect custody data from the Prison Information Management System (PIMS) database.
- Analyse relationships between instruments and evaluate predictive validity for reoffending.

Progress:

- Data collection is complete.
- Data analysis is complete.
- Interim progress report has been delivered to Corrections Victoria
- Draft final report has commenced.



Staff initiated research

Attending to dynamic risk factors within a continuum of care prison model environment: Implementing the structured Dynamic Assessment Case Management-21 (sdac-21)

Caleb D. Lloyd, Ralph C. Serin

Rationale and aims:

- Preparing offenders for eventual release from incarceration to a community context arguably requires attention to dynamic risk factors from the beginning of the prison sentence.
- The ongoing assessment of dynamic risk factors is important for identifying rehabilitation targets and case management strategies, and gauging the success of these interventions.
- Assessing dynamic risk factors in a prison context can help ensure that offenders are prepared for a successful reintegration process at release.

Methodology:

- A structured case management tool designed to assess dynamic risk factors in prison (the SDAC-21) is being implemented in the Ravenhall Prison.
- This implementation project is an opportunity to gather data on dynamic risk factors on a repeated schedule among offenders in an institutional setting, prior to release.
- Analyses will examine the nature of change in risk factors throughout the prison term.

Progress:

- An agreement has been set up with Ravenhall Prison to implement the SDAC-21, and study the data that is collected.
- Training of Ravenhall staff is scheduled for September 2017.

Community volunteers working with correctional populations

Caleb D. Lloyd, Cole A. Higley, Ralph C. Serin, Sarah Lazzari

Rationale and aims:

- The purpose of this study is to explore demographic information and personal motivations among community volunteers who spend time with individuals in the criminal justice system (e.g. those who teach courses to inmates in prison or assist individuals on parole as they re-enter the community).
- Individuals who volunteer with offender populations are an under-studied group, especially ex-offenders who seek to return to the system to provide volunteer rehabilitative services.
- There are reasons to suggest volunteers may be more effective agents of rehabilitation, compared to criminal justice employees.
- However, volunteers may not have the skills or training to effectively assist individuals who are incarcerated or being supervised in community corrections.

Methodology:

- Community participants who regularly volunteer with a state Department of Corrections in the US were required to complete an online training module to maintain their volunteer status.
- Individuals were randomly assigned to receive one of three e-learning interventions. Each of these interventions outlined a different approach to motivating individuals to stay crime-free (i.e. risk avoidance, strengths-based and community building approaches).
- Embedded within the training, participants were asked to self-report information about their volunteer experiences, motivations for volunteering with offenders and demographic information.

Progress:

- The primary analyses have been conducted, and additional analyses and presentation of results are underway.
- Two academic manuscripts describing these results are in preparation.

Evaluating the introduction of the Safewards model and interventions to a medium to long-term forensic mental health unit

Brian McKenna, Tessa Maguire, Jo Ryan, Rachael Fullam

Rationale and aims:

The study aims to evaluate the impact of Safewards on Canning unit, Thomas Embling Hospital, by:

- using audit survey data that is routinely collected from staff and patients about ward atmosphere
- identifying to what extent ward atmosphere and perceptions are changed as a result of the introduction of the Safewards model and the ten interventions
- determining if rates of conflict and containment reduce after the introduction of Safewards, and
- disseminating the findings in refereed journals and at conferences.

Methodology:

- The following three sets of data will be collected:
 - data related to incidents of conflict and containment
 - data related to the ward atmosphere (EssenCES), and
 - data related to the implementation of the Safewards interventions (Fidelity checks)
- These data will be collected in order to evaluate the impact that the introduction of Safewards might have on reducing conflict and containment, the ward atmosphere and the degree to which it has been implemented.

Progress:

- Workshops were held in the second half of 2016 to refresh all Canning staff on the Safewards model and introduce the remaining five interventions.
- The remaining five interventions were introduced.
- EssenCES data was collected again at the end of 2016.
- A total of four Fidelity checks were conducted during 2016.
- Data analysis is underway.

2016–2017 project outputs:

- Maguire, T., & Ryan, J. (2016, August). Safewards and EssenCES. Paper presented at the Victorian Collaborative Mental Health Nursing Conference, Moonee Ponds, Melbourne.
- Maguire, T., Ryan, J., Fullam, R. S., & McKenna, B. (2017, May). Safewards: Making a difference in forensic mental health. Paper presented at the Towards the Elimination of Restrictive Practices, Perth, Australia.
- Maguire, T., Ryan, J., Fullam, R. S., & McKenna, B. (2017, April). Evaluating the introduction of the Safewards model to Canning unit. Presentation. Delivered to Forensicare research dissertation seminar. Melbourne, Australia.

Improving community corrections practice with use of a case management tool: the Dynamic Risk Assessment for Offender Reentry (DRAOR)

Caleb D. Lloyd, Ralph C. Serin

Rationale and aims:

- Community case management practice inherently raises several important questions about offender clients, for example:
 - a) How can supervision officers best assess and manage the actively changing (and volatile) nature of offender transitions to the community?
 - b) What are a client's 'triggers' to re-offend?
 - c) Has the client demonstrated gains from their prior rehabilitation experiences, and are these gains being maintained or lost?
 - d) Is there a way to orient clients toward long-term success?
- The Dynamic Risk Assessment for Offender Re-entry (DRAOR) is a 19-item case management tool that assists the assessment of stable risk factors, acute risk factors, and protective factors in the post-release, community context.

Methodology:

- To date, our database includes DRAOR assessments on over 10,000 offenders, representing several 100,000s of repeated assessments.
- Primarily, these assessments have been drawn from two jurisdictions that implemented DRAOR into their standard community corrections practice: Iowa (United States) and New Zealand.
- In these jurisdictions, at every meeting with an offender client, a community corrections supervision officer will rate the 19 DRAOR items to assess whether important case management-relevant changes have occurred in the client's life.
- From a risk assessment viewpoint, these data have allowed us to conduct a variety of statistical analyses, and conclude that DRAOR scores:
 - a) predict recidivism
 - b) change in the expected direction across time
 - c) predict recidivism to a greater degree when re-assessed, and
 - d) flag short-term future violent recidivism.

Progress:

- Data collection and assisting front-line officers to conduct DRAOR assessments with fidelity is ongoing.
- Recently, a new community corrections site in the United States (Edinburgh, Texas) implemented DRAOR into their practice. Another site is scheduled to implement shortly (Oklahoma City, United States).
- Multiple academic manuscripts describing these data are in preparation.

2016–2017 project outputs:

- Stone, A., Lloyd, C. D., & Serin, R. C. (2017, March). Using dynamic risk to predict recidivism for violent offenders. Poster presented to the American Psychology-Law Society Annual Convention, Seattle, WA.
- de Roos, M., Lloyd, C. D., & Serin, R. C. (2017, March). Using dynamic risk factors to predict reoffending among sexual offenders. Poster presented to the American Psychology-Law Society Annual Convention, Seattle, WA.
- Candelaria, F., Lloyd, C. D., & Serin, R. C. (2016, August). An investigation of substance abuse and its association with recidivism among offenders returning from prison. Poster presented to the Summer Symposium of the Campus Office of Undergraduate Research Initiatives (COURI) at the University of Texas at El Paso (UTEP).
- Serin, R. C., Lloyd, C. D., Chadwick, N., & Prell, L. (2015, July). New developments in dynamic risk assessment. Paper presented to the International Academy of Law and Mental Health International Congress, Vienna, Austria.

Research in progress 2016–2017

Staff initiated research

Offender change within in-prison rehabilitation programs

Caleb D. Lloyd, Cole A. Higley, Ralph C. Serin, Laura J. Hanby

Rationale and aims:

- The purpose of this study is to explore motivation and engagement in rehabilitation among offenders attending psychosocial programs while incarcerated in prison.
- Past research has shown that evidence-based rehabilitation programs are the most effective way to reduce future criminal behaviour. Yet, most research is conducted at the program level, and less is known about which individual features are associated with successful program completion, and reduced recidivism following program attendance.
- This research is designed to contribute to a better understanding of pathways through prison rehabilitation to offending outcomes in the community.

Methodology:

- Archival data routinely collected by Correctional Service of Canada were provided for analysis, representing over 10,000 individuals.
- This dataset is unique for providing data at the following three points in time:
 - a) background features at prison intake
 - b) pre- and post-rehabilitation ratings of program engagement, and
 - c) post-release recidivism.
- Research questions involve examining the relationship among:
 - a) demographic variables
 - b) offending history
 - c) psychosocial variables assessed during prison intake
 - d) attendance and engagement during programs
 - e) assessments of program engagement rated by program providers, and
 - f) official records of reoffending.

Progress:

- The primary analyses have been conducted, and additional analyses and presentation of results are underway.
- One academic manuscript describing these results has been published, and another two are in preparation.

2016–2017 project outputs:

- Higley, C. A., & Lloyd, C. D. (2017, March). The 'risk principle' paradox: Exploring which high-risk offenders successfully change during rehabilitation programs. Paper presented to the American Psychology-Law Society Annual Convention, Seattle, WA.

Protective factors and their relationship with risk factors when predicting recidivism

Caleb D. Lloyd, Ralph C. Serin, Nick Chadwick, Simon Davies, Devon Polaschek

Rationale and aims:

- Clinicians and clients typically prefer a strengths-based approach to risk management. Many researchers and clinicians have adopted strengths-based language into their offender management practice.
- However, the definition, meaning, and function of protective factors is debated in the literature. The key debate centres on whether proposed protective factors are truly independent from risk factors.
- The purpose of these series of studies is to describe and test the inter-relationships between protective factors, risk factors, and reoffending.

Methodology:

- To date, three datasets from community corrections jurisdictions have been used to examine the statistical nature of protective factors.
- This has included the use of factor analysis to test whether protective items represent a separate latent construct, compared to risk factors.
- Also, we have examined how the presence of protective factors may moderate the relationship between risk and criminal recidivism.

Progress:

- The primary statistical analyses have been conducted, and additional analyses and presentation of results are underway.
- An academic manuscript describing these results is in preparation.

Supervision officer/offender client relationships: The role of officer skills, alliance, and client perception of officer interventions

Caleb D. Lloyd, Jennifer Eno Loudon, Tamara Kang, & Elijah Ricks

Rationale and aims:

- This study aims to examine whether there is an association between the techniques that supervision officers use in sessions with offender clients (on probation) and the clients' perceptions of (a) their relationships with their officers, and (b) the content and helpfulness of their mandated meetings.
- The overarching goal of the project is to explore the nature of offender-officer relationships, and describe how offender clients view their supervision officers' attempts to manage their risk to re-offend and support them in attaining crime-free lifestyles.
- This study is exploratory and observational, and hopes to understand:
 - a) how offender clients' perceptions of their relationships with their supervision officers vary
 - b) whether officers have similar relationships with all clients on their caseload
 - c) how offender clients perceive management techniques used by their supervision officers, and
 - d) which techniques and relationship qualities are related to offenders reporting a high degree of investment in staying crime-free.

Methodology:

- The project involves a mixed method approach.
- Offender clients living in the community under correctional supervision will be asked to self-report their experiences of supervision sessions. This includes self-report questionnaires presented on hand-held computer touch-screen tablets, through which offender participants will be asked to self-report their perceptions of the session meeting they recently completed with their supervision officers, their overall sense of relationship with their supervision officers, and their investment in attempting to stay crime-free.
- Audio recordings will also be collected and coded, to provide observational records of session content.
- Questionnaire responses collected after a recent training attended by supervision officers will be used to explore how officer beliefs may be related to alliance and client perceptions.

Results:

- Partnership with the community corrections agency has been secured.
- Supervision officers have received new training in evidence-based practices, which will result in variation across officers in new adoption of important offender supervision skills.
- Supervision officers have completed post-training questionnaires about their beliefs regarding supervision skills.
- Pre-training audio recording of sessions have been completed, and post-training audio recordings are underway.

Understanding predictors of imminent offending: Which risk domains signal short-term recidivism?

Caleb D. Lloyd, Melanie Simmons

Rationale and aims:

- Research on assessment of violence risk has begun to move toward seeking 'real time' risk assessment, whereby risk estimates are continually updated to assess short-term risk for violence.
- This review of the existing literature will provide guidance regarding which risk factors show most promise for predicting short-term offending in a community corrections context.
- The goal of this literature review is to summarise the existing knowledge toward identifying the necessary features that would be rated in a threat assessment that shows promise for predicting imminent violence.

Methodology:

- A review of the academic and government literature will identify the studies that have examined re-assessment of risk factors in a community context.
- A discussion of research methodology will highlight how to best study change in risk, imminent risk, and short-term prediction of recidivism.
- A synthesis of the existing literature will point to the risk domains that show most promise as signals or 'flags' for imminent recidivism.

Results:

- An initial draft of the paper has been prepared.
- Additional literature is being reviewed and incorporated into the existing narrative.
- A 'fact sheet' style brief for non-academic readers is being prepared, in addition to an academic journal article.

Research in progress 2016–2017

Doctor of Psychology

Psychological distress: Identifying and treating distress among incarcerated offenders

Jacinta Connor

Michael Daffern, Jason Skues

Rationale and aims:

- Compared with the general population, mental illness occurs at a disproportionately high rate among incarcerated offenders. Additionally, the nature of the prison environment introduces stressors likely to elevate an inmate's level of distress. Many prisoners are not psychologically equipped to manage these stressors effectively and become vulnerable to deterioration in their mental wellbeing. Unfortunately, mechanisms to identify and treat sub-clinical levels of distress that impact on a prisoner's psychological wellbeing are limited.
- This research aims to:
 - investigate the prevalence and correlates of psychological distress, and
 - evaluate the utility of brief interventions targeted at reducing psychological distress with the aim of improving offender wellbeing.

Methodology:

- Approximately 1100 prisoners were invited to complete an anonymous survey, with the anticipated response rate expected to 60%.
- The first study will examine rates of elevated distress among offenders and associations between salient factors that contribute to prisoner wellbeing, particularly those who are not receiving mental health treatment services.

Progress:

- Ethics approval has been received (Corrections Victoria, Justice Human Research Ethics Committee, Swinburne University Human Research Ethics Committee).
- Over 520 surveys have been completed (data collection).
- Data has been cleaned and coded.
- Preliminary data analysis has been completed.

2016–2017 project outputs:

- Ogloff, J. R. P., Daffern, M., Pfeifer, J. E., Skues, J., Trounson, J. S., Connor, J., & Evers, T. (2016, October). Well-being in contemporary correctional settings: New perspectives and new approaches for prisoners and prison officers. Paper presented at the Annual Meeting of the International Corrections and Prisons Association (ICPA), Bucharest, Romania.
- Skues, J., Connor, J., Daffern, M., Trounson, J. S., Pfeifer, J. E., & Ogloff, J. R. P. (2016, October). Identifying the 'Missing Middle' and establishing the need for service provision. Paper presented at the Annual Meeting of the International Corrections and Prisons Association (ICPA), Bucharest, Romania.

Prison and transition health

Reese Cossar

James Ogloff, Mark Stoové

Rationale and aims:

- This study will investigate the mental health comorbidities in a male injecting prison population, and the mental health trajectories post-release.
- This study aims to further inform the program development and continuation of care post-release for prisoners with injecting histories and/or current practices of injecting drug use.

Methodology:

- This study will conduct retrospective data linkage to public health records, inclusive of hospital admission and separations, emergency department access, and PBS.
- This study utilises a longitudinal cohort.

Progress:

- Documentation for Confirmation of Candidature has been prepared.
- A paper for Health & Justice special edition is being drafted

Youth intimate partner violence in an Australian sample

Elizabeth Daff

Troy McEwan, Stefan Luebbers

Rationale and aims:

- Research on youth intimate partner violence is extremely limited.
- This study aims to better understand what youth intimate partner violence looks like in an Australian sample.
- The study will also explore the relationships between and predictive ability of cognitive and affective factors (such as attitudes towards violence and relationship violence, gender role attitudes, relationship rumination, hostile attribution bias, self-control, emotion regulation, jealousy, and anger,) in relation to youth intimate partner violence and other aggressive behaviours.

Methodology:

- A cross-sectional survey of adolescents in Years 10 to 12 is being undertaken across a number of Melbourne schools. Respondents are asked about their relationships and how they relate to a range of cognitive and affective factors.

Progress:

- Recruitment is underway, with 266 responses recorded to date. Collection will continue until September 2017.
- Initial data cleaning and syntax have been written.
- Initial descriptive statistics have been calculated.

2016–2017 project outputs:

- Research presentations to the Forensic Clinical Specialist, Mental Health Court Liaison, and Youth Justice groups for their Professional Development.

Extending the utility of the General Aggression Model

Ashley Dunne

Prof Michael Daffern, Dr Flora Gilbert

Rationale and aims:

- Although the General Aggression Model (GAM) identifies the importance of several types of knowledge structures and trait anger to explanations of aggression, it has been argued that the GAM fails to recognise the importance of other person-specific (i.e. personality) and aggression-related (e.g. emotional and coping states) inputs.
- The overarching objective of this thesis was to extend the utility of the GAM by identifying the key cognitive constructs (as delineated by the GAM), personality traits and emotional and coping states that are important to understanding aggression. As such, the present research was underpinned by three broad and inter-related aims:
 - (1) To explore associations between DSM-5 maladaptive personality domains and facets and aggression.
 - (2) To concurrently examine the importance of maladaptive cognition (i.e. Early Maladaptive Schema) and emotional and coping states (i.e. schema modes) to histories of aggression.
 - (3) To determine whether the addition of aggression-related DSM-5 maladaptive personality facets and schema modes – alongside GAM-delineated aggressive scripts, normative beliefs and trait anger – improved the prediction of aggression.

Methodology:

- Participants comprised 208 males, aged 18 years and above, who were on remand at the Metropolitan Remand Centre (MRC).
- Participants completed a battery of self-report psychological tests assessing early maladaptive schema, aggressive script rehearsal, normative beliefs supportive of aggression, anger, dysfunctional personality traits, maladaptive emotional and coping states (schema modes) and aggression history.
- Correlation and regression analyses were utilised to examine the relationships between the various independent variables and aggression history.

Progress:

- All data collection and analysis has been completed
- The study thesis has been submitted and is currently under examination

2016–2017 project outputs:

- Dunne, A. L., & Daffern, M. (in press). Aggression. In V. Zeigler-Hill & T. Shackelford (Eds.), *Encyclopedia of personality and individual differences*. Springer.
- Dunne, A., Gilbert, F., & Daffern, M. (2016, October). Investigating the relationship between DSM-5 personality disorder domains and facets and aggression in an offender population using the Personality Inventory for the DSM-5. Paper presented at the Forensicare Forensic Clinical Specialist Program Seminar, Melbourne, Australia.
- Dunne, A. L., Gilbert, F., & Daffern, M. (in press). Investigating the relationship between DSM-5 personality disorder domains and facets and aggression in an offender population using the Personality Inventory for the DSM-5. *Journal of Personality Disorders*.
- Dunne, A. L., Gilbert, F., & Daffern, M. (in press). Elucidating the relationship between personality disorder and aggression using the DSM-5 dimensional-categorical model for personality disorder. *Psychology of Violence*.

Doctor of Psychology

Enhancing well-being and resilience within prisons: A psycho-educational approach for correctional officers

Trish Evers

James Oglloff, Jeff Pfeifer

Rationale and aims:

- Correctional officers (COs) often experience a complex and difficult work environment, with daily exposure to occupational, organisational and personal challenges, together resulting in chronic high levels of stress.
- Prolonged exposure to such stress leads to compromised well-being, increased physical health risks, and poorer mental health outcomes. The adverse impacts of these stressors highlight the importance of interventions that target wellness and resilience-building specific to COs.
- This research project aims to address officer well-being by implementing a targeted intervention and evaluating its efficacy in improving and maintaining officer well-being.

Methodology:

- Approximately 450 correctional officers will be invited to take part in a brief, targeted psycho-educational intervention. Pre-, post- and delayed-post data will be collected to measure the effectiveness of the intervention in improving well-being outcomes.

Progress:

- Systematic review has been prepared for publication.
- Ethics approval has been received from Corrections Victoria, Justice Human Research Ethics Committee and Swinburne University Human Research Ethics Committee.

Beyond prediction: A prospective validation study of a clinical decision making application of the Dynamic Appraisal of Situational Aggression

Jessica Griffith

Michael Daffern

Rationale and aims:

- Aggression and violence is a serious issue in mental health services, causing harm to staff as well as patients. Previous research has identified that tools to predict imminent aggression are effective in reducing the incidence and impact of aggression, as well as reducing over-reliance on coercive measures.
- To date, there are no tools available which link the prediction of aggression with best practice intervention recommendations.
- Clinical decision making (CDM) tools developed in medicine show promising effects with improvements both in clinical decision-making and patient outcomes. This research aims to explore development of a clinical decision making tool to assist clinicians in identifying and applying current evidence-based methods for predicting, preventing and managing aggression in mental health settings.

Methodology:

- Based on a review of the extant literature and consultation with clinical staff, a CDM tool linking the outcome of risk assessments for imminent aggression with recommended interventions will be developed and trialled in two acute forensic mental health units at the Thomas Embling Hospital.
- The Dynamic Appraisal of Situational Aggression (DASA) will be utilised as the risk assessment tool within the proposed CDM.
- This prospective controlled study will examine the effects on frequency and severity of aggressive incidents and injury rates for staff and patients before and after implementation and in comparison with the control wards.
- Rates of the use of coercive measures such as seclusion and restraint will also be examined.
- Fidelity of use will be examined to identify whether staff adhering to the suggested strategies showed an improved ability to prevent and manage aggression.

Progress:

- Ethics approval was obtained in May 2017.
- Forensicare organisational approval was obtained in May 2017.
- Baseline data will be gathered in late 2017.
- Intervention phase 1, washout period and intervention phase 2 are expected to be undertaken in 2018.

Assessing the health and socioeconomic burden of child sexual abuse

Ahona Guha

James Ogloff, Stefan Luebbers

Rationale and aims:

- Exposure to child sexual abuse (CSA) has consistently been associated with negative behavioural, physical health and mental health outcomes.
- Research into the relationship between CSA exposure and mental/physical health outcomes – such as the long-term incidence of high-prevalence mental health disorders (e.g. anxiety and depression), use of psychotropic medication and physical health outcomes – is limited and often confounded by methodological difficulties.
- This study aims to assess rates of healthcare utilisation in victims of CSA and the association between exposure to CSA, the use of psychotropic medications, long-term high prevalence mental health disorders and physical health outcomes, including chronic disease.

Methodology:

- This project utilises a pre-existing database of participants. It includes details of sexual abuse victims medically verified by the Victorian Institute of Forensic Medicine (VIFM, then Office of Forensic Medicine) to have been abused.
- A matched control sample derived from the Australian Electoral Commission will also be included, to assess differences in outcomes between abused and non-abused cohorts.
- Data will be linked with Medicare Benefits Scheme and Pharmaceutical Benefits Scheme data to assess rates of health care utilisation and health outcomes associated with CSA.

Progress:

- Ethics approval has been received from the ethics committee of the Department of Health and Human Services (DHHS), Australian Institute of Health and Welfare (AIHW) and Swinburne University Human Research Ethics Committee.
- Data linkage has been completed by analysts at AIHW for the study cohort and control group and de-identified data provided to researchers.
- Data cleaning and re-coding has been completed for two empirical publications.
- Initial descriptive analyses have been conducted.
- The researchers have completed inferential data analyses for two empirical publications, with analysis for a third publication to commence shortly.

Psychosis and violence: Adverse outcomes and effective intervention

Cieran Harries

James Ogloff, Stefan Luebbers

Rationale and aims:

- People with severe mental disorder (particularly psychotic disorders) are at elevated risk of violence, both as a perpetrator and as a victim.
- The interplay between co-occurring psychosis, violent offending and victimisation is not well documented.
- The effectiveness of community and hospital interventions for reducing violent offending and victimisation has not been evaluated.
- This study will examine and model the impact of court-mandated treatment on violent offending and victimisation among people with severe mental illness.

Methodology:

- The study is an extension of previous research (Project PRIMeD) conducted by the CFBS.
- This study involves a prospective data linkage of cases (> 7,000 diagnosed with a psychotic disorder; 5,000 community controls) across several databases (i.e. Victorian Psychiatric Case Register, Victorian electoral roll, Law Enforcement Assistance Program, and the Victorian Registry of Births, Deaths and Marriages)

Progress:

- Data analysis is ongoing.
- The thesis is being prepared and will be completed in late 2017.

2016–2017 project outputs:

- Hachtel, H., Harries, C., Luebbers, S., & Ogloff, J. (2017). Violent offending in schizophrenia spectrum disorder preceding and following diagnosis. Manuscript submitted for publication.

Research in progress 2016–2017

Doctor of Psychology

Developing an understanding of the General Aggression Model's knowledge structure, aggressive script rehearsal, to inform intervention strategies

Julia Hosie

Michael Daffern, Flora Gilbert

Rationale and aims:

- The General Aggression Model construct of aggressive script rehearsal has been empirically related to aggressive behaviour in offenders.
- Similarities and differences between aggressive script rehearsal and related constructs – such as fantasy, rumination and obsessional thought – and how these constructs relate to aggressive behaviour has not yet been explored.
- The overarching aim of the study is to clarify and operationalise the definition of aggressive scripts, and to examine the whether aggressive script rehearsal mediates the relationship between emotion regulation and anger rumination with aggressive behaviour.

Methodology:

- Participants comprise 120 males from the Metropolitan Remand Centre (MRC).
- Participants will be asked to complete psychological testing assessing aggressive script rehearsal, general rumination, emotion regulation, and anger rumination, attitudes to violence, fantasy, trait anger, intrusive thought, and life history of aggression.
- Correlational analyses will be used to examine relationships between cognitive variables.
- Regression analyses will be used to explore relationships between emotion dysregulation and aggressive script rehearsal, and, between aggressive script rehearsal and aggression.

Progress:

- Over the past 12 months, 6 months leave was taken for personal reasons. I have since returned in a part-time capacity.
- All participant data has been collected. All data has been double entered and compared to prevent entry error.
- Analysis of data for Paper 1, on the description of aggressive scripts and differences in scripts between violent and generally aggressive offenders, has been undertaken.
- Paper 1 has been drafted, with statistics currently being checked by statistician.
- For Paper 2, data has been cleaned and drafting of the paper has begun. The paper compares different thought constructs such as rumination, compulsive thought and fantasy and compares them to scripts, looking for differences of response in offenders.
- Paper 3 planning has begun. Based on outcomes from Paper 1, moderators such as emotional regulation are explored. Outcomes are not yet finalised.

Violent offenders' treatment change in dynamic risk and protective factors: Associations with violent recidivism

Gabrielle Klepfisz

Michael Daffern, Andrew Day, Caleb Lloyd

Rationale and aims:

- Research investigating the efficacy of violent offender treatment programs has typically focused on comparing the recidivism rates of treatment completers and non-completers or comparisons. However, treatment completion does not guarantee that an offender has achieved the changes required to positively influence recidivism.
- The aim of this study is to investigate whether changes on intermediary treatment targets, including dynamic risk (criminogenic needs) and protective factors, are associated with violent recidivism at post-treatment follow-up.
- If treatment is directed toward the factors thought to cause violent behaviour, then change in these putative risk and protective factors should reduce violence propensity.
- This research also aims to investigate how risk and protective factors relate to one another, whether protective factors buffer or moderate the effects of risk factors, and whether specific factors that may operate from opposite ends of the same domain (e.g. impulsivity versus self-control) demonstrate increased predictive validity as either risk or protective factors.

Methodology:

- Retrospective archival analysis of offender case files from Corrections Victoria will be undertaken.
- Information regarding offender demographics, offending history, Violence Risk Scale scores and participation in treatment will be collected.
- A number of structured psychometric instruments have been coded from the files including the Psychopathy Checklist Screening Version, the Historical-Clinical-Risk Management-20 version 3, the Structured Assessment of Protective Factors for Violence Risk, and the Treatment Readiness, Responsivity, and Gain Scale: Short Version.
- The predictive validity of the psychometric measures will be calculated to determine whether treatment-related changes significantly predict violence.

Progress:

- A paper titled 'Understanding dynamic risk factors for violence' was published and will form part of the literature review for this thesis.
- A paper titled 'Understanding protective factors for violent reoffending in adults' was published and will form part of the literature review for this thesis.
- Swinburne University Human Research Ethics Committee and Justice Human Research Ethics Committee approvals were obtained in October 2016.
- Data collection commenced in November 2016 and was completed at the beginning of 2017.
- Data that was collected from offenders' files have been imported into SPSS. Recidivism and court outcome data were also obtained and have now been imported into the data file.
- Data analysis commenced in July 2017.

2016–2017 project outputs:

- Klepfisz, G., Daffern, M., & Day, A. (2017). Understanding protective factors for violent reoffending in adults. *Aggression and Violent Behavior*, 32, 80-87. doi: 10.1016/j.avb.2016.12.001.

Intimate partner violence risk assessment and management in an Australian policing context

Ilana Lauria

Troy McEwan, Stefan Luebbers, Susanne Strand

Rationale and aims:

- There has been increasing acknowledgement that intimate partner violence is a major human rights and public health issue. In light of this, there is a need for authorities, specifically police officers, to recognise and manage the risk of such incidents escalating and reoccurring over time.
- The aims of my thesis are:
 - to determine the predictive validity, reliability and discriminatory validity of intimate partner violence risk assessments used by police officers, and
 - to explore what risk management strategies are being used by police officers and to determine which appear to be most effective in reducing subsequent intimate partner violence incidents.

Methodology:

- Data will be collected by accessing collateral information recorded on Victoria Police databases (i.e. LEAP and Interpose) for intimate partner violence incidents in the ND2 and ND3 region which result in police presence during the data collection period, 1 July 2016 – 30 June 2017. Follow up data will be obtained in February 2018.
- Information such as the demographics of the perpetrator and victim, the risk assessment completed, and frontline and law enforcement risk management strategies will be collected.

Progress:

- Publication titled 'Evaluating the Ontario Domestic Assault Risk Assessment (ODARA) in a frontline police setting' was submitted to the journal *Criminal Justice and Behavior* on 12 September 2016. Following feedback, the publication was resubmitted on 12 May 2017 and we are awaiting a response.
- Data collection was completed on 30 June 2017.

Tuning in to kids: A pilot study of the intensive delivery of an emotion-focused early intervention program for children with emerging conduct disorder

Bianca Mastromanno

Catherine Wood, Michael Daffern, Sophie Havighurst

Rationale and aims:

- To examine the effectiveness of Tuning in to Kids (TIK), an emotion-focused parenting intervention delivered on a 1:1 basis. TIK is often delivered by one facilitator to twelve parents on a weekly basis, over the course of six to ten weeks. Each session typically runs for two hours.
- This study seeks to compare the effectiveness of such delivery (group) to one in which a facilitator delivers the program over the same time frame, but to one parent(s) at a time (1:1) and to a waitlisted-control group.
- Effectiveness will be measured by assessing parents' emotional understanding of their children, children's behaviour as reported by parents and teachers, and examining parent-child interactions at several time points.

Methodology:

- Parents of children aged three to ten with emerging conduct problems will be recruited through the Department of Education.
- Parents will be allocated to either a group, 1:1 delivery, or a waitlisted control group.
- Each parent will receive eight 2-hour weekly sessions of the TIK program with a trained facilitator.

Progress:

- Literature review has been completed. Methodology is in progress.
- It is intended that ethics clearance will be obtained by the end of 2017.
- It is intended that recruitment will commence at the beginning of 2018.

Research in progress 2016–2017

Doctor of Psychology

There is always a backstory: Trauma histories in a multicultural population of adult female offenders

Veronica Meredith

Stephane Shepherd, Stefan Luebbers

Rationale and aims:

- The last decade has seen a rapid increase in the number of women incarcerated in Australia, a phenomenon shared with our global counterparts.
- Feminist theorists have tendered that current understandings of the development of criminal behaviour are not generalisable to female offenders because these understandings have primarily been developed in a male dominated system for male offender populations.
- Research specifically examining gendered pathways to crime is sparse, yet, a small body of work identifies exposure to traumatic events during various life stages as one of the gendered responsive risk factors in pathways to female offending.

Methodology:

- 100 female participants representing diverse cultural backgrounds will be recruited from various prisons in Victoria.
- The study will utilise an amalgamated version of the Harvard Trauma Questionnaire, Life Events Questionnaire, Childhood Trauma Questionnaire, the Conflict Tactics Scale, and a newly developed Prison Trauma Questionnaire to examine types and number of traumatic events.
- The Trauma Symptom Inventory will be utilised to collect data on symptoms and sequelae.
- The Developmental Trauma Disorder–Structured Clinical Interview will be administered.
- The MINI SCID will be administered to examine for prevalence of posttraumatic stress disorder.
- The Revised Screening Version of the Level of Service Inventory will be administered to examine criminogenic risks, needs and responsivity.

Progress:

- A 2000-word research proposal has been submitted.
- Four research questions have been developed.
- Battery of measures have been drafted.

Pathways from maltreatment to offending: Exploring the mediating factors

Anna Moriarty

Stefan Luebbers, Lillian De Bortoli

Rationale and aims:

- Research has consistently found a high prevalence of childhood maltreatment histories amongst juvenile offending populations, however it has also been found that the majority of maltreated children do not subsequently offend. It is therefore clear that there is an association between maltreatment and offending, however it cannot be said that maltreatment causes offending.
- The factors that influence this pathway from childhood maltreatment to juvenile offending are poorly understood, with competing hypotheses existing to explain it.
- This study therefore aims to:
 - examine the rate of transition from child protection services to youth justice settings in Victoria, and
 - explore the protective and risk factors that mediate this transition from child protection to youth justice.

Methodology:

- This project will utilise a pre-existing database of participants.
- Data linkage methodology will be used to extract and link data from the Child Protection and Criminal Divisions of the Victorian Children's Court from 2005–2010, and file reviews will be undertaken.

Progress:

- A preliminary review of the literature has been undertaken.
- It is anticipated that an application for ethics approval will be lodged in early 2018.

Investigating a group treatment for violent offenders with aggressive scripts

Fiona Morrison

Michael Daffern, Stefan Luebbers, Flora Gilbert

Rationale and aims:

- This project aims to investigate whether aggressive scripts can be treated therapeutically, and whether treating aggressive scripts provides better outcomes for those who undertake the program.
- Furthermore, this study aims to further test methods of assessing aggressive scripts, and add to literature which investigates and ties together aggressive scripts and other related contexts.

Methodology:

- A review of the literature of terms related to aggressive scripts is to be conducted, and from this, a group treatment plan for violent offenders with aggressive scripts will be developed.
- The treatment program will be delivered to a group of violent offenders, and a control group (which provides a different therapeutic approach, such as emotion regulation therapy) will be used in order to determine whether the outcomes can be attributed to changes in aggressive script rehearsal.
- The collective influence on other measured outcomes (such as state anger, reoffending risk, depression, and anxiety for example) will be compared between the groups

Progress:

- Literature review is being re-drafted and written up for publication.
- A group treatment plan has been developed.
- The group treatment program will be run in conjunction with the Mobile Forensic Mental Health Service at the Metropolitan Remand Centre, and possibly at Marnongneet Correctional Facility.

Consequences of intimate partner violence: Physical health, psychological health and service utilisation in victims and perpetrators

Julia Nazarewicz

Troy McEwan, Stefan Luebbers

Rationale and aims:

- Given the prevalence and already documented consequences of intimate partner violence (IPV), we aim to further knowledge into the physical and psychological health of victims AND perpetrators of IPV.
- Our aim is to investigate whether health differences exist between victims and perpetrators and non-IPV populations, and what health concerns may be more or less prevalent in IPV populations.

Methodology:

- Data will be collected on IPV incidents that come through three Family Violence Teams at the Victoria Police (approx. 2000 cases)
- Once collected, a randomly selected sample will be taken from this group and names provided to data linkage services.
- Provided ethics approval is granted, the study will link and collate Victorian Mental Health data and Medicare data with these names to create a mental and physical health profile for victims and perpetrators.
- This collected data will be compared with a comparable sample of non-IPV individuals. This control sample will be taken from an existing sample of individuals whose data was collected through the Australian Electoral Commission (AEC) and used as part of previous research at the Centre for Forensic Behavioural Science (CFBS) in 2010.

Progress:

- Ethics has been approved for the first stage of data collection, which involves liaising with the Victoria Police. The data collection period concluded in July 2017.
- Ethics approval for the data-linkage part of the research project has been gained from Swinburne University Human Research Ethics Committee, with reciprocal approval also gained from Victoria Police Human Research Ethics Committee.
- Use of the control sample (AEC) data has been approved by the Victoria Police Human Research Ethics Committee as appropriate secondary use of data originally approved for use by that committee.
- Applications for data-linkage approval has been submitted to the Centre for Data Linkage, with indication that the project and linkage is feasible.
- A submission to the Australian Institute of Health and Welfare Ethics Committee for Medicare and PBS data is currently being prepared. Funds to facilitate the access of this data have been secured.

Doctor of Psychology

Understanding thinking and emotions associated with difficult interpersonal behaviour: An investigation of psychological differences between stalkers and other offenders

Alice Parkhill

Troy McEwan, Caleb Lloyd

Rationale and aims:

- Test aspects of the Cognitive-Affective Processing Theory of Stalking (CAPTS).
- People with known stalking behaviour will be compared on a range of psychological variables with non-stalking offenders and a non-stalking community control sample.
- The purpose of the project is to test the nature and presence of specific knowledge structures and cognitive processes in samples of people engaging in different patterns of offending behaviour (stalking versus general violence) and no offending behaviour.
- The broader aim is to test aspects of the CAPTS that could inform evidence-based assessment and treatment of stalking offenders in the future.

Methodology:

- A mixed methods design will be utilised to capture a between-groups cross-sectional analysis.
- The analysis groups will consist of violent offenders, stalking offenders and a control group recruited through the Swinburne student Research Experience Program.
- The self-report measure used will include the Psychological Entitlement Scale, MCAA, SUPPS-P, LHA, STS - P and BIDR.
- The qualitative aspect of the project is still being designed and will be submitted to the ethics committee as an amendment.

Progress:

- Swinburne University Human Research Ethics application submitted (awaiting outcome).
- First article (review of previous stalking theory) currently nearly completion.

Co-occurring mental disorders and behavioural disturbance among prisoners

Mateja Popovic

James Ogloff, Rachael Fullam

Rationale and aims:

- There is limited existing research examining co-morbid mental disorders (such as psychosis and personality disorders) in prisoner populations. Research on cognitive function in mentally disordered offenders is also scarce.
- Prisoners with co-occurring disorders may present with increasing challenges and demand upon already scarce facility resources, due to a higher risk of behavioural disturbances, such as aggression, suicide and self-harm.
- To date, no study has examined behavioural outcomes within the prison environment in individuals with multiple complex disorders and varying levels of cognitive function.
- The aim of this study is to fill a gap in forensic research by examining institutional aggression and self-harm in offenders with and without comorbid mental disorders and impaired cognitive function.

Methodology:

- Participants will comprise consenting prisoners referred to the Mobile Forensic Mental Health Service (MobileFMHS) from May 2015 to June 2017.
- Data linkage methodology will be used to link information from the MobileFMHS database regarding offender demographics characteristics and clinical features (current mental illness diagnosis, substance abuse status, personality assessment, and cognitive assessment) to data from the Department of Health CMI database regarding previous mental health service use, and Corrections Victoria data on institutional incidents, such as aggression, drug offences and self-harm.

Progress:

- Ethics approval has been granted and data collection has commenced.
- At 27 July 2017, 210 Mobile Forensic Mental Health Service clients have agreed to participate in the study.
- Preliminary data analysis has commenced.

Wellbeing, distress and coping in Indigenous and culturally and linguistically diverse prison populations

Arran Rose

James Ogloff, Stephane Shepherd

Rationale and aims:

- Indigenous and culturally and linguistically diverse (CALD) prisoners make up a significant percentage of Australia's prison population.
- There is limited research that has assessed wellbeing, distress and coping among these groups of prisoners and made a comparison with general prisoner populations.
- The initial aim of this project is to compare rates of mental health, distress and coping among Indigenous, CALD and general prisoner populations.
- The second aim is to measure the impact that general therapeutic programs have on the overall wellbeing of Indigenous, CALD and general prison populations.

Methodology:

- As part of the Wellbeing and Experience Survey, over 500 hundred prisoners at Port Phillip Prison completed a battery of assessment measures. Data has been taken from this study and been divided into three groups; Indigenous, CALD and other.
- Secondly, 96 inmates from Port Phillip Prison will be recruited to participate in a group psycho-education group. Each intervention group will consist of 6–8 participants. Baseline, post interventions and follow up assessments will be taken (immediately after and one month following completion of the intervention).

Progress:

- The data has been collected and analysed from the Wellbeing and Experience Survey.
- The process of writing up the introduction and results to Study 1 is taking place.

Understanding children who abuse: What constitutes child-to-parent violence and why does it occur?

Melanie Simmons

Troy McEwan, Rosemary Purcell

Rationale and aims:

- Existing research into child-to-parent violence is limited by definitions of abuse that ignore the interaction between severity and frequency of behaviour. This has created heterogeneous groups of 'aggressive' youth (i.e. somewhat aggressive and genuinely abusive youth), leading to a poor understanding of the prevalence and risk factors of abuse.
- The present research aims to:
 - determine how frequently a behaviour must occur before it is considered abusive
 - create the Abusive Behaviour by Children-Index to measure abuse, and
 - understand the risk factors related to experiences of abuse.

Methodology:

- Recruitment occurred on-line through Swinburne's Research Experience Program and Headspace's social media platforms.
- Youth (i.e. aged 14–25 years) and parents (i.e. with children aged 14–25 years) completed parallel surveys.
- Participants were provided a list of 43 behaviours and asked to rate how often each behaviour had to occur before it was considered to be abusive.
- Participants completed measures on demographics, as well as violent cognitions and behaviours.
- At the conclusion of the survey, participants were asked to report how frequently they have experienced each behaviour and whether they thought their behaviour or their child's behaviour was abusive.

Progress:

- Ethics approvals were received for both Swinburne and Headspace studies.
- Data collection has finished. Data from 523 youth and 201 parent respondents were retained for analyses.
- Data analysis and synthesis is underway.

2016–2017 project outputs:

- Simmons, M., & McEwan, T. (2017, June). The Abusive Behaviour by Children-Index: A novel approach to the measurement of child-to-parent abuse. Paper presented at the Swinburne Celebrates Research Conference, Hawthorn, VIC.

Doctor of Psychology

The effect of cognitive remediation for working memory deficits in schizophrenia

Nicole Sloan

Jarrad Lum, Linda Byrne

Rationale and aims:

- Individuals diagnosed with schizophrenia have pronounced deficits in cognitive functioning.
- Impairments of cognition often predate the emergence of clinical symptoms and persist throughout the illness even when the clinical symptoms are adequately treated with antipsychotic medication or in remission.
- Cognitive ability is the best predictor of functional status across a number of outcome domains and is considered a rate-limiting factor for recovery.
- The research project will focus on working memory, which is considered to be a core deficit in schizophrenia. Working memory plays a central role in everyday life. It underlies higher-order thinking such as planning, organisation, language and learning. It is also necessary for other types of memory such as remembering people and events.
- The aim of this study is to compare the effect of two different types of cognitive behavioural remediation tasks on working memory performance in schizophrenia.

Methodology:

- In this study, participants with a diagnosis of schizophrenia or schizoaffective disorder will complete two behavioural working memory training tasks. We will present:
 - (4) a sentence comprehension task, and
 - (5) an n-back task.
- The presentation order of these training tasks will be counterbalanced using a cross-over design.
- Participants will complete two testing sessions each lasting 45 minutes. In each session participants will complete pre- and post-test measures of working memory along with one of the behavioural interventions described above.
- During training participant's brain activity and saccadic eye movements will be measured using EEG and an eye-tracker.
- Pre and post-intervention measures include the Positive and Negative Symptom Scale (PANSS), Brief Assessment of Cognition in Schizophrenia (BACS) and the Schizophrenia Cognition Rating Scale (SCoRS).

Progress:

- This project is at the recruitment stage.
- This project is currently awaiting approval for ethics amendment as the study scope has changed.

Keeping the network alive: What characterises Australian child exploitation material offenders?

Angela Sorotos

James Ogloff

Rationale and aims:

- Limited data exists on detailed sex offender characteristics in an Australian population. The current research aims to further the literature by investigating three research questions:
 - (6) Whether child exploitation material (CEM) offender characteristics – including demographic, psychiatric, psychometric, offence specific, legal and treatment factors – differ from contact and dual sexual offenders.
 - (7) Whether the presence of these characteristics can predict reoffending over time according to group membership.
 - (8) Whether the presence of these characteristics can help predict sentence duration across the three offender groups.

Methodology:

- A comparative examination of retrospective data held by the Department of Justice on internet, contact and dual sex offenders was carried out.
- Participants who were female or who had an intellectual disability and/or psychosis were excluded.
- Quantitative and qualitative data gathered from all three groups of participants was used to ascertain significant differences and relationships between groups.
- For Study 1, chi-square goodness of fit tests were used to explore offender characteristics between groups. A multinomial multiple regression model was then carried out to determine which characteristics predicted group membership.
- For Study 2, a Weibull parametric survival analysis was used to determine reoffending over time.
- For Study 3, a Weibull parametric survival analysis was used to determine characteristics which predicted length of sentence.

Progress:

- Data collection is now complete. Data was collected on site at the Specialised Offender Assessment and Treatment Service (SOATS), Corrections Victoria, and the Department of Justice. 450 participant files were collated.
- Data analysis is now complete.
- The results are currently being written up for submission.

**Presentence reports and sentencing comments:
An examination of expert reports in sentencing
decisions**

Mingwai Tam

Michael Daffern, James Oglhoff

Rationale and aims:

- The Victoria Supreme Court of Appeal's decision in *R v Verdins, Buckley and Vo* [2007] outlined six ways that impaired mental functioning could be relevant to sentencing. The Verdins decision has expanded the circumstances in which an offender's mental functioning could be considered in sentencing. The uses of mental health presentence reports to assist sentencing decisions are likely to increase after the Verdins decision. Also, mental health professionals are increasingly being requested to provide presentence reports to the court.
- Despite this, little empirical work has investigated the use of psychiatric and psychological presentence reports by the sentencing court (Day et al., 2000). The aim of this project is to examine the use of presentence reports in sentencing decisions

Methodology:

- Setting: Forensicare provides psychiatric and psychological presentence reports at the request of the court to assist on matters related to mental health and offending behaviours (VIFMHS, 2016). The court's consideration of a presentence report in formulating a sentence can be discussed in the sentencing comments which explain the reasons for a sentence.
- Procedure: The research reviewed 168 presentence reports and sentencing comments from the County Court of Victoria. A coding sheet was developed to record eight type of references that the court made to the Forensicare presentence reports.

Progress:

- Data collection is completed.
- The manuscript of the thesis is in the drafting stage.

2016–2017 project outputs:

- Tam, M. W. (2017, June). An examination of psychiatric and psychological presentence reports in sentencing decisions. Poster presented at the International Association of Forensic Mental Health Services International Conference, Split, Croatia.

**Assessing psychopathy in forensic settings: Towards contemporary
diagnostic and conceptual clarification**

Ryan Veal

James Oglhoff, Stefan Luebbers

Rationale and aims:

- Psychopathy assessment in forensic settings is dominated by the Psychopathy Checklist-Revised (2nd ed.) (PCL-R) and derivatives such as the Psychopathy Checklist: Screening Version (PCL:SV). The conceptualisation and utility of the PCL-R has been critiqued with regard to the incorporation of antisocial behaviour as a component rather than a consequence, and alternative assessment protocols have been proposed that claim to provide a more accurate assessment of psychopathic function.
- This study aims to:
 - contribute to the required research on the validity of the PCL:SV in Australia, and
 - evaluate the utility of psychopathy diagnoses in forensic settings and clarify the role of alternative models of psychopathy to the PCL-R.

Methodology:

- Male offender PCL:SV data (n =200) will be analysed using structural equation modelling for global and facets scores to determine factor structure. Area under the curve (AUC) statistics will be used to assess the predictive validity of the PCL:SV total scores for violent and general recidivism.
- The predictive validity and criterion validity for each of the PCL:SV and alternative conceptualisations of psychopathy will be assessed in a sample of male offenders (n=100). The association between offending and successive facets within each psychopathy conceptualisation will be assessed using hierarchical regression and offending variables as outcomes. Further, AUC statistics will be calculated for comparison.

Progress:

- Ethics application submitted.
- Systematic review registered with Prospero International prospective register of systematic reviews – in preparation.

Research in progress 2016–2017

PhD

Assessing fitness to stand trial in Australia and New Zealand

Grant Blake

James Ogloff, Jeff Pfeifer, Andrew Carroll, Rachael Fullam

Rationale and aims:

- Fitness to stand trial refers to a criminal defendant's mental and functional capacity to meaningfully participate in their trial. For many years, the United Nations (UN) has criticised Australia's use of the common law precedent and management of defendants found unfit to stand trial. For example, it is not uncommon for a permanently unfit defendant to be indefinitely detained, which is a violation of human rights and contravention of the UN Convention on the Rights of Persons with Disabilities, which Australia ratified in 1998.
- Problematically, there is no standardised fitness assessment tool to address Australian and New Zealand psycho-legal criteria. This raises concern about the use of fitness in our courtrooms, as the validity of expert opinion is currently unknown. As such, unfit defendants may be undergoing unfair trials. Conversely, fit defendants may be indefinitely detained without evidence being heard.
- This research aims to determine the psychometric utility of standardised fitness assessment tools and procedures, then seek to develop and validate Australia and New Zealand's first fitness to stand trial assessment tool.

Methodology:

- A systematic literature review on the psychometric utility of structured versus unstructured fitness assessment tools will be undertaken. Second, Forensicare (VIC) and ForensicClinic (TAS) expert fitness assessment reports will be analysed to determine report quality, predictors of unfitness and fitness, and the assessment procedures used.
- An international fitness assessment tool will then be modified to address Australian and New Zealand psycho-legal criteria. The tool will be piloted in Victoria and Tasmania, followed by a larger national and international study on the tool's psychometric properties and clinical utility.

Progress:

- Study 1, systematic literature review, was changed to a meta-analysis. Searches were conducted, screening was conducted, inclusion and exclusion criteria were applied, quality analysis coding was commenced, coding of study variables was commenced, and a first draft of introduction and methods was completed.
- Ethics approval for Study 2 has been obtained.
- Coding for Study 2 will commence once the files have been received.

An investigation into whether the reassessment of dynamic risk and protective factors improves the prediction of imminent criminal recidivism

Simon Davies

Caleb Lloyd, Devon Polaschek

Rationale and aims:

- Changes in dynamic risk factors must logically correspond to changes in the likelihood of an offender committing a new offence.
- The proposed project seeks to replicate earlier findings that showed that dynamic risk factors can be used to predict short-term recidivism.
- Extending prior findings, this project will attempt to investigate whether certain patterns of change in risk factors immediately precede re-offending.

Methodology:

- The proposed project utilises a dataset of high-risk offenders supervised in the community in New Zealand, reassessed approximately weekly or fortnightly over a period of up to two years.
- Using Cox regression survival analysis with time-dependent covariates, analyses will build models of change in risk factors and their relationship with imminent recidivism.

Progress:

- The literature review and methodology sections of the thesis are drafted.
- A proposal outlining the study was successfully passed by the doctoral committee.
- Analyses are currently under way.

Effectiveness of the Mobile Forensic Mental Health Service group treatment programs

Zsuzsanna Horvath

Michael Daffern, Rachael Fullam

Rationale and aims:

- The Mobile Forensic Mental Health Service is a novel service based on interventions for offenders with complex mental health impairment issues. There has been little formal evaluation of brief, group based psychoeducational interventions in offender populations.
- The aims of this study are to:
 - examine the impact of brief psychoeducation-based group treatment programs on symptoms of mental illness in prisoners and the effects of treatment over time
 - examine the relationship between personality, cognitive function, and treatment drop-out and treatment related symptom change, and
 - explore the relationship between treatment related symptom change, institutional behaviour and post release mental health and criminogenic outcomes.

Methodology:

- Changes in measures from pre to post-intervention will be examined.
- The maintenance of treatment related clinical changes will be assessed by repeating clinical measures at one and three months post-intervention.
- Data from waitlisted offenders and offenders who start each program and consent to take part in the intervention but then drop out before program completion will be used in the control arm of the study.
- Where possible, participants will be followed up to repeat the clinical assessments in person or via post.
- Information regarding personality and cognitive function will be accessed from existing MobileFMHS files. Institutional behaviour and post release mental health and offending outcomes will be obtained from a related study.

Progress:

- Ethics approval for the study has been obtained.
- Participant recruitment and follow-up commenced in May 2016.
- Data collection was finished on 18 July 2017.
- The final sample size is 113 participants.

Enhancing risk assessment and nursing interventions to prevent aggression and the use of restrictive interventions in forensic mental health units

Tessa Maguire

Michael Daffern, Brian McKenna, Steven Bowe

Rationale and aims:

- This project will determine the impact of day-to-day risk assessments on unit staff practice for activating violence prevention strategies by assessing whether risk level (measured by the Dynamic Appraisal of Situational Aggression (DASA)) corresponds with different risk violence prevention strategies
- The project will also assess the impact of various violence prevention strategies on aggression in the context of forensic mental health units.

Methodology:

- This research project will consist of two studies with four phases. Study 1 will consist of:
 - (9) Archival case file study designed to elucidate effective aggression prevention interventions for different risk-state levels.
 - (10) Literature review of aggression prevention intervention strategies to better understand the impact of particular interventions, and to shape risk management and intervention guidelines.
 - (11) Survey of DASA users to better understand the impact of DASA use in mental health units.
- Study 2, the final phase, will consist of a prospective pre- and post-intervention study designed to test the intervention guidelines developed in Study 1.

Progress:

- Aggression prevention protocol has been developed.
- Ethics approval has been obtained for Study 2.
- Study 2 is planned to commence at the end of July 2017.

2016–2017 project outputs:

- Maguire, T., Daffern, M., Bowe, S., & McKenna, B. (2016, August). Examining the use of the Dynamic Appraisal of Situational Aggression (DASA). Paper presented at the Victorian Collaborative Mental Health Nursing Conference, Moonee Ponds, Melbourne.
- Maguire, T., Daffern, M., Bowe, S., & McKenna, B. (2016, October). Examining the use of the DASA in mental health settings. Paper presented at the International Conference on Violence in the Health Sector, Dublin, Ireland.
- Maguire, T., Daffern, M., Bowe, S., & McKenna, B. (in press). Predicting aggressive behaviour in acute forensic mental health units: a re-examination of the dynamic appraisal of situational aggression's predictive validity. *International Journal of Mental Health Nursing*.

Research in progress 2016–2017

PhD

The Development of the Forensic Mental Health Nursing Competency Assessment Tool (FMHN-CAT)

Rebecca Millar

Helen Rawson, Rhonda Brown

Rationale and aims:

- Currently, there is no consensus on the competencies required of forensic mental health nurses. Additionally, there is no validated assessment tool to determine competency of forensic mental health nurses. This project aims to:
 - determine the competencies used by forensic mental health nurses, and
 - develop a competency assessment tool for assessing those competencies.

Methodology:

- This is a multi-phase mixed design study, comprising the following stages:
 - Phase 1: literature review
 - Phase 2: Delphi study
 - Phase 3: consumer and carer surveys
 - Phase 4: nursing staff focus groups
- Phases 1 to 3 are designed to determine competencies used or needed. These findings will then inform Phase 4, where the competencies are turned into items for the final Forensic Mental Health Competency Assessment Tool (FMH-CAT).

Progress:

- Phases 1 and 2 have been completed.
- Phases 3 and 4 have received Deakin University ethics approval. Once Forensicare approval has been obtained, these can commence.

Understanding subgroups of firesetters

Vindya Nanayakkara

James Oglloff, Troy McEwan

Rationale and aims:

- Classification research provides an opportunity to better understand groups of firesetters, by categorising them into meaningful groups within which there is increased commonality among group members. Such research can inform future risk assessment and formulation.
- Cluster analysis will be used to empirically link characteristics and motives of firesetters with firesetting behaviours. Such analysis will be applied to mentally disordered firesetters, female firesetters and firesetters who have caused serious damage or harm.
- The project is divided into three studies, each of which will focus on one of the three sub-groups of firesetters mentioned.
- Additionally, the study will explore which subgroup of firesetters is more inclined to engage in repeat firesetting or one-time-only firesetting.

Methodology:

- Data from clinical reports and files of 104 firesetters referred to community forensic mental health services in Victoria (i.e. the Problem Behaviour Program) and New South Wales (the Community Forensic Mental Health Service), have been included.
- NSW Coroners' reports and files of deliberately set fires that have caused injury/death or greater than \$100,000 of damages between 2000 and 2010 have also been captured. Despite a total of 165 firesetters being identified for the study, access to only 114 firesetters was obtained and included in the research.

Progress:

- Data collection at the NSW Coroner's Court has been completed. Preliminary observations from this data indicate the three most common motives for firesetting to be revenge/retribution, excitement seeking and financial gain. Among those motivated by revenge, 61% had been intimate with their victims, and often there had been a history of domestic violence. Approximately 35% of those seeking excitement from firesetting had set previous fires.
- Data collection with the NSW and VIC Community Forensic Mental Health Services has also been completed and the analysis of data has commenced.

Perceptions of remorse in forensic patients and forensic mental health professionals

Jamie O'Donahoo

Janette Simmonds

Rationale and aims:

- The presence of remorse is often considered an important indicator of an offender's potential for rehabilitation. However, remorse is a term that can be used by legal and mental health professionals without an informed understanding of its meaning or its validity as a clinical indicator.
- In forensic mental health, the demonstration of remorse might also be seen as an important sign of clinical progress, even in forensic patients who were psychiatrically unwell when they committed their offence.
- This study aims to:
 - inform psychologists of the impact the presence or absence of remorse has on forensic mental health professionals' attitudes towards forensic patients and the importance forensic patients themselves place on remorse
 - shed light on the extent to which professionals' attitudes towards remorse influence their clinical decision making with forensic patients and whether expressed remorse shapes their views about a patient's likely rehabilitation, and
 - highlight the utility of current psychological interventions and identify any barriers that might help forensic patients address remorse and related emotions.

Methodology:

- Semi-structured interviews were conducted with 11 forensic patients and 11 forensic mental health professionals at Thomas Embling Hospital and the Community Forensic Mental Health Service.
- Collected interview data for both the forensic patients and the forensic mental health professionals was analysed and themes extracted using the qualitative approach of Interpretative Phenomenological Analysis.

Progress:

- Data analysis has been completed and the thesis is at the results write-up stage.

Wrinkles in sexual behaviour: What is the risk of sexual abuse in an aged population?

Beatrice Raymond

Troy McEwan, James Ogloff

Rationale and aims:

- The aim of the research is to obtain data about 'normal' aged sexual behaviour in order to compare it to that of sex offenders.
- It is hypothesised that current risk assessment tools may need to be modified to account for differences that are experienced as we age such as reduced sex hormones, frailty, diminishing social contact and change in living arrangements.

Methodology:

- Data will be coded from existing data as well as data collected from volunteers in the community and volunteers who are prisoners/offenders who are currently subject to judicial orders.

Progress:

- Study 1. Collating data from established data set and coding the information with regard to the Static-99 and SVR-20.
- Study 2. Collating data in the judicial system and community regarding sexuality and sexual offending.

Research in progress 2016–2017

PhD

Motivation-ideology-capability risk assessment and treatment management (MICRA) for preventing ideology-based terrorism recidivism in Indonesia

Zora Sukabdi

Michael Daffern, James Ogloff

Rationale and aims:

- There is currently no valid assessment tool to assess recidivism and elucidate the treatment needs of ideology-based violent extremists.
- This study involves an application of the Risk-Need-Responsivity Model to ideology-based terrorism in Indonesia. It aims to develop knowledge that can be used to prevent recidivism in violent extremists.

Methodology:

- Study 1 will use qualitative methodology involving 30 terrorism practitioners. Research participants will be interviewed to establish standardised risk domains and specific elements of needs relevant to the development of terrorism clients.
- Study 2 involves focus group discussions and semi-structured interviews of the 30 terrorism practitioners to formulate a range of risk categories, behaviour indicators and behaviour protections when assessing terrorism case clients.
- Study 3 will identify skills and qualifications of terrorism case therapists and staff.
- Study 4 will define procedures to rehabilitate clients using a combination of semi-structured interviews and focus group discussions.

Progress:

- All four studies have been completed.
- Data collection for all four studies has been completed.
- Analysis for all four studies has been completed.

2016–2017 project outputs:

- Sukabdi, Z. (2016, September). Pencegahan dan Deradikalisasi terhadap Pelaku Terorisme di Indonesia. Presentation. Delivered to Indonesian National Army Forces. Indonesia.
- Sukabdi, Z. (2017, April). Asesmen Resiko terhadap Pelaku Terorisme di Indonesia. Presentation. Delivered to Indonesian National Police. Jakarta, Indonesia.
- Sukabdi, Z. (2017, April). MIKRA-T: Asesmen deradikalisasi dan pembinaan pelaku terorisme. Presentation. Delivered to Indonesian Presidential Palace. Jakarta, Indonesia.
- Sukabdi, Z. (2017, April). Motivation-Ideology-Capability Risk Assessment and Treatment Management for preventing recidivism (MIKRA-T). Presentation. Delivered to Indonesian Presidential Palace. Jakarta, Indonesia.

An analysis of offence paralleling behaviour in a custody-based sex offender treatment program: Can this behaviour be used to predict risk of reoffending?

Tamara Sweller

Michael Daffern, Richard Kemp

Rationale and aims:

- Individuals commit criminal offences for a variety of reasons although their behaviour preceding, during and after their criminal behaviour can be seen as an attempt to achieve a goal, i.e., their behaviour is purposeful and has a function.
- Offence Paralleling Behaviour (OPB) is behaviour that individuals might engage in to satisfy these same goals when in a more structured environment (e.g. prison).
- This research will investigate the OPB engaged in by offenders convicted of a sexual offence, as they progress through a sex offender treatment program in custody.

Methodology:

- Study 1: Data from 32 mental health professionals was collated in an online survey about observations and predictions of OPB and pro-social alternative behaviour within a custodial environment. These findings informed Study 2.
- Study 2: Participants include 19 inmates at Long Bay Correctional Centre who have been convicted of a sexual offence against an adult and/or child, and are currently participating in a treatment program. Each participant was interviewed and individualised behavioural predictions produced a behavioural checklist. Participants and custodial staff completed this checklist each week throughout the treatment process providing an estimate of the number of times the predicted behaviours were engaged in over the past week.
- An additional project has been conducted in partnership with Corrections Victoria, using the Satisfactory Behaviour Rating Scale as a measure of behaviour change, in release decision-making.

Progress:

- Data collection for the main study was completed after the final participant completed treatment.
- Data analysis has been completed for the main research study, in relation to: the pre- and post-treatment psychometric test packages; behavioural checklists completed by participants and custodial officers; Treatment Gains scale completed by therapists; and, Satisfactory Behaviour Rating Guide completed by therapists and custodial officers. These were all used as measures of change.
- Data has been collated for the final study and will be analysed after the results from the main research have been written.

Masters

Assessing schema modes using self- and observer-rated instruments: Associations with aggression

Deborah Lewis

Michael Daffern, Ashley Dunne

Rationale and aims:

- To date, there has been no research exploring associations between self-reported schema modes and staff-observed schema modes.
- The aims of this research are to:
 - examine associations between schema modes assessed using the Schema Mode Inventory (SMI) and modes assessed using the Mode Observation Scale (MOS), and
 - determine which schema modes predict violent behaviour.
- If the two schema mode measures are associated, the two methods could be used interchangeably with confidence to reduce labour-intensive staff observations.
- Identification of schema modes related to violence will assist in identifying cognitive, emotional, and behaviour treatment targets to reduce a patient's risk of violence.

Methodology:

- Participants will be consenting male patients at the Thomas Embling Hospital who are deemed by a psychiatrist to have required competency to understand the study.
- Materials to be completed by patients include demographic survey, SMI, Paulhus Deception Scale – Impression Management, and Life History of Aggression Scale surveys. Materials to be completed by nursing staff are the MOS.
- To assess aggression and violence over the four weeks following participation in the study, participants' case files will be coded for any incidents of aggression that have occurred over this time.
- Data will be analysed using correlations and regression.

Progress:

- Ethics approval has been granted.
- Collection of data has started.

Using dynamic risk to predict violent reoffending in 'real time': Applying a framework for proximal assessment of risk of general recidivism to predict violent outcomes

Ariel G. Stone

Caleb Lloyd

Rationale and aims:

- Changes in dynamic risk factors must logically correspond to changes in the likelihood of an offender committing a new offence.
- The proposed project seeks to determine whether certain dynamic risk factors can be used to predict short-term violent recidivism.
- Establishing that assessments of risk predict imminent violence presents the possibility for future improvements in the correctional system's ability to intervene when individuals are most at risk and potentially prevent violent crime.

Methodology:

- The proposed project utilises a dataset comprised of an entire jurisdiction of paroled offenders in New Zealand during a two-year period (N = 3,421 offenders), reassessed approximately weekly or fortnightly over a period of up to two years.
- Using Cox regression survival analysis with time-linked covariates, I will analyse how theoretically important risk variables may predict violent reoffending in 'real time'.

Progress:

- The literature review and methodology sections of the thesis are complete.
- A proposal outlining the study was successfully defended to the thesis committee.
- Analyses are under way, and Results are being written.

2016–2017 project outputs:

- Stone, A., Lloyd, C., & Serin, R. (2017, March). Using dynamic risk to predict recidivism for violent offenders. Poster presented at the American Psychology Law Society Annual Convention, Seattle, Washington.

Honours

An evaluation of the effectiveness of the 'Occupational Function and Performance' therapeutic programs in a forensic psychiatric hospital

Eliza Kerr

Louise Farnworth, Marissa Davidson-Blue

Rationale and aims:

- Group programs are commonly used by occupational therapists in forensic mental health settings where they aim to teach new skills and improve occupational engagement for patients confined in a secure environment. While there is limited evidence for the effectiveness of occupational therapy groups in mental health settings, there is almost no evidence to support their use in forensic settings.
- The primary aim of this project was to explore the effectiveness and perceived utility of the Occupational Function and Performance (OFP) therapeutic programs to improve the skills, motivation and occupational engagement of forensic mental health patients, from staff and patient perspectives.

Methodology:

- The twice-weekly OFP therapeutic programs were run by occupational therapists as part of standard clinical practice. Participant groups recruited included 16 forensic patients and seven primary nurse staff. A mixed methods approach was used to evaluate the group effectiveness and perceived utility. Data collected by therapists were Model of Human Occupation (MOHO) outcome measures pre and post the group, followed by written feedback forms. Factors investigated included changes in skills, motivation and occupational engagement as a result of participating in the OFP therapeutic programs.

Progress:

- Data collection is continuing.
- Data analysis is being commenced, including both qualitative and quantitative data.
- All pre and one month post measures have been collected for each group participant.
- The majority of feedback forms have been returned and are being transcribed by student researcher in preparation for data analysis.
- Weekly visits to Thomas Embling Hospital have been completed and research and project work is now being completed off-site.

Establishing the predictive validity of the VP-SAFVR for fatal family violence

Bradley Reich

Margaret Nixon, Troy McEwan

Rationale and aims:

- Family homicide is an extreme form of family and domestic violence (FDV) and of all the different types of homicide in Australia, family homicides are overrepresented.
- Due to the widespread harms associated with FDV and family homicide, there has been a recent proliferation of actuarial risk assessment tools developed to inform frontline respondents.
- The Victoria Police Screening Assessment for Family Violence Risk (VP-SAFvR) was developed for police officers to assist with triaging the assessment of FDV risk. Presently, the VP-SAFvR has not been evaluated for its effectiveness in predicting fatal family violence.
- The aim of the current study is to evaluate whether the VP-SAFvR is able to positively identify family violence cases as being at high risk when they are known to have later resulted in death.

Methodology:

- Participants will include all family homicides committed in Victoria between 1 January 2010 and 31 December 2015 in which an FDV risk assessment (L17) was completed by Victoria Police.
- Data linkage methodology will be used to link homicide cases derived from AustLII online databases, Court Services Victoria, and the National Coronial Information Service with Victoria Police family homicide records containing L17 data. The data from the last L17 completed prior to each homicide will be combined with data on the offender's criminal history to retrospectively score the VP-SAFvR.
- Data will be analysed using Receiver Operating Characteristic Curves (ROC) to examine the predictive validity of the VP-SAFvR in predicting death in family violence cases.

Progress:

- Ethics approval has been granted by the Justice Human Research Ethics Committee and Swinburne University Human Research Ethics Committee.
- Data collection has begun with 904 AustLII homicide cases extracted from the online databases. Court Services Victoria have also supplied a list of homicides in Victoria which is currently being matched with the AustLII cases.

Scholarly Projects, Royal Australian and New Zealand College of Psychiatrists

Is there a relationship between imminent risk of aggression and utilisation of prescribed p.r.n (as needed) medication in acute psychiatric inpatients?

Thinzar Phyo

Sam Calvin, Rachael Fullam

Rationale and aims:

- This project will examine the relationship between DASA (Dynamic Appraisal of Situational Aggression) scores and the use of p.r.n medication including antipsychotics and benzodiazepines during the management of acutely disturbed patients
- It will investigate the following questions:
 - Are high DASA scores associated with an increased use of p.r.n medication during the following 24 hour period?
 - Is the application of p.r.n medication during a 24-hour period associated with reduced DASA scores in subsequent 24 hour?

Methodology:

- This study is a quantitative study of forensic adult inpatients.
- Data will be collected from the files of all inpatients (both males and females) admitted in three acute units of the Thomas Embling Hospital (TEH) for a period of 4 weeks retrospectively.
- Daily DASA scores and subsequent prn medication use will be collected for all patients. Data regarding use of restrictive interventions and a number of potential mediating factors will also be collected.

Progress:

- Data collection is in progress.



Completed Research 2016–2017

Formal Service Evaluation

Evaluation of the Breathe Easy smoke free policy

James Ogloff, Rachael Fullam, Margaret Nixon, Jeff Pfeifer

Rationale and aims:

- The Thomas Embling Hospital became smoke free as of 1st July 2015. Implementation of the smoke free policy was managed via the establishment of the Breathe Easy smoke free project, a multicomponent, whole of health, staged approach to establishing a smoke free environment across the hospital.
- The Centre for Forensic Behavioural Science undertook an evaluation of the Breathe Easy project in 2015-16.
- The aims of the study were to examine:
 - Staff and patient perceptions of the smoke-free policy prior to and following implementation
 - Compliance with the policy and uptake of programs/ education opportunities, and Nicotine Replacement Therapy.
 - The impact of the smoke-free policy on biological measures of respiratory and metabolic function in patients
 - The impact of the smoke-free policy on aggressive/ violent incidents, arson related fires, drug related incidents, incidents of suicide and self-harm, use of seclusion and PRN medication use.

Methodology:

- The evaluation project involved the collection of data across the Thomas Embling Hospital prior to the implementation of the smoking ban on 1st July 2015 and an examination of changes across a range of variables following the implementation of the smoke-free policy.
- Variables examined included, current smoking status and intention to quit, staff and patient attitudes towards smoking and their opinions regarding the smoke-free policy and its implementation, Nicotine Replacement Therapy (NRT) uptake, aggressive incidents within the hospital, suicide and self-harm related incidents, and PRN medication use.
- Data was collected using pre and post implementation staff and patient surveys, extracts from RiskMan, and from databases and records maintained by the Breathe Easy smoke free project team.

Results and conclusions:

Surveys

- Few patients responded to the pre and post implementation surveys which limits the interpretation and generalisability of the findings. The majority of patient respondents during the pre-implementation period did not support the decision to implement a smoke free policy at the hospital, and felt that the policy would cause major problems.
- Most staff respondents supported the decision to implement the smoke free policy, however a substantial proportion of respondents felt that the policy would cause, or had caused problems at the hospital. One of the major themes that emerged from free-text responses related to staff concerns regarding the potential increase in patient irritability and aggression and the likely impact on staff.
- During the post-implementation period, the free-text responses reflected ongoing concerns regarding the human rights implications of the policy, but included positive comments regarding the efficacy of the smoke free policy implementation. The major theme that occurred during this time was concern from staff about the impact of the policy on staff time, risk to staff, and upon patient care. It is notable that comments within this theme during the post implementation period did not focus on patient aggression, but rather the concern that clinical time was being taken up by policing the smoke-free policy and the impact on therapeutic relationships with patients.

Uptake of NRT and smoking cessation rates

- Only limited data was available regarding these factors and the data that was available was at the summary level and could not be independently verified. The available data indicated that in March 2016 just under two thirds of patients on the continuing care units were recorded as currently smoking, compared to approximately one fifth of patients on acute units. This is likely to be related to the higher proportion of patients with unescorted leave on the continuing care units.
- In March 2016 approximately a third of patients on acute and continuing care units were using some form of NRT.

Incident data

- There was no clear change in physically aggressive incidents, incidents of aggression against property or incidents related to suicide and self-harm around the time of the smoke free policy implementation.
- There appeared to be an increase in the number of verbally aggressive incidents during the latter half of 2015. This increase was largely attributable to one continuing care unit. Similarly, an increase in the number of security/breach incidents was attributable largely to one continuing care unit.

PRN medication use and Clozapine treatment

- Immediately following the smoke free policy implementation there was a small increase in the number of patients with plasma clozapine levels above the threshold associated with medical complications. However, this was quickly managed and largely reduced by September 2016.
- There was no notable increase in PRN medication administration following implementation of the smoke free policy.

Cardio-respiratory and metabolic measures

- There was a significant reduction in heart rate from pre to post implementation within a group of patients who had ceased smoking. No reduction in heart rate was found in patients who continued to smoke and those that had never smoked. There was no significant impact of the smoke-free policy on blood pressure measurements
 - Body Mass Index and waist circumference showed a significant increase across all patients from pre to post implementation regardless of smoking behaviour
 - “Bad”/“Good” cholesterol ratios decreased from pre to post implementation across all patients regardless of smoking behaviour.
- Overall the available data suggests that while prior to implementation staff were concerned about the impact of the smoke-free policy, particularly with regard to patient aggression, there was no notable increase in aggressive behaviour across the hospital following implementation of the policy.
 - There are some early indications of health improvements within the patient population as a result of the smoke-free policy, however improvements across some health indicators may be attenuated by the effects of institutionalisation and the side effects of psychotropic medication.
 - There is some indication that the smoke free policy may impact on therapeutic relationships between patients and staff.
 - The maintenance of patient smoking cessation whilst on unescorted leave and following discharge remains a challenge.

Clinical implications and research translation:

- The findings suggest that the smoke-free policy was implemented in an effective and considered manner in relation to staff and patient safety.
- The evaluation findings suggest that total smoking bans can be implemented effectively in forensic inpatient settings.
- The implementation methods used by the Breathe Easy project may be useful to other national and international services who are considering the implementation of smoke-free policies.
- Ongoing patient education and support are required to encourage ongoing smoking cessation in this patient population.



Completed Research 2016–2017

Formal Service Evaluation

Evaluation of the Community Integration Program

James Ogloff, Danny Sullivan, Jonathan Norton

Rationale and aims:

- The Forensicare community integration program (CIP) is funded by Justice Health and provides short term support and linkage assistance to people with serious mental illness leaving the Metropolitan Remand Centre and Dame Phyllis Frost Centre.
- The study intends to evaluate the effectiveness of the service by examining the impact of engaging with the service on recidivism, and crises based mental health services use in mentally disordered offenders. A previous study evaluating the service, using clients referred to CIP between October 2010 and June 2013, resulted in a sample too small to determine meaningful differences between completer and non-completers. To address this the Forensicare executive has directed that the study be extended to include all clients referred to CIP between October 2010 and June 2015. Key research questions include:
 - Are individuals who successfully complete the CIP less likely to offend than others eligible for the voluntary program, but who refuse to participate?
 - Do CIP completers experience lower rates of crisis based contact with mental health services in the period following intervention than those who are eligible and refuse CIP?

Methodology:

- The cohort includes clients referred to the CIP between October 2010 and June 2015. Clients are classified by as CIP completers (Clients referred to the CIP and completed an episode of care) and CIP non-completers (Clients referred to the CIP and withdrew from the program prior to successful completion or those who refused to engage)
- Data Linkage methodology links Forensicare data with Department of Health mental health service use, Victoria Police offending data, and Corrections Victoria incarceration data.
- CIP completers and non-completers are compared over the pre and post incarceration time periods

Results and conclusions:

- Individuals who successfully completed the CIP (CIP completers) during the study period had similar demographic and clinical characteristics across the available data to individuals who did not successfully complete the program (CIP non-completers).
- Completers had a lower rate of emergency hospitalisations before incarceration and following release from prison than the non-completer group.
- Non-completers were over three times more likely than the CIP completer group to have an emergency mental health admission during the post-incarceration period.
- Non-completers tended to have a shorter period between the release from the index incarceration and first hospitalisation
- There were no differences between completers and non-completers in rates of offending before the index period of incarceration.
- Following release from prison, CIP completers had a significantly lower rate of overall offending, and both violent and non-violent offending, compared to the non-completers.
- Non-completers had a shorter time to first offence following release from the index period of incarceration compared to completers.
- The findings of this evaluation are striking when the CIP model is compared to other more resource intensive models such as Forensic Assertive Community Treatment.
- The study findings are limited by the inability, within the resources allocated to the evaluation, to examine the type and dosage of treatment provided to offenders by prison mental health services prior to release and treatment they received upon engagement with AMHS. In addition, the naturalistic, retrospective nature of the evaluation should be considered when interpreting the findings.

Clinical implications and research translation:

- Less resource intensive programs such as the CIP may be successful in assisting community re-integration and treatment in a subset of offenders with serious mental illness who remain engaged with the program. It is likely that program completers differ from non-completers across a number of variables such as symptom fluctuation, treatment seeking behaviour, treatment readiness, and individual differences in adaptive functioning that are beyond the scope of the current evaluation.
- The challenge for forensic mental health services is to develop engagement and support mechanisms for those offenders who fail to maintain contact with traditional re-integration and community treatment programs.

Consultancy

Standardising the use of physical restraint

Department of Health and Human Services (Vic.) (\$36,441)

Brian McKenna, Michael Daffern, Tessa Maguire

Rationale and aims:

- The management of clinical aggression places a complex demand on services and can pose significant risks to patients, staff and others in Victoria's health services.
- The purpose of the project is to review the evidence base and best practice advice for the prevention and management of clinical aggression and for the use of physical restraint in mental health service delivery.

Methodology:

- Review of the evidence base and current policy environment for the management of clinical aggression and for physical restraint practices by:
 - (12) summarising and critiquing extant published literature, and
 - (13) critiquing existing policies and providing guidance on best practice.

Results and conclusions:

Three important over-arching principles relating to the prevention and management of clinical aggression emerged from these literature reviews:

- (1) Utilise a range of strategies, including primary (minimising the risk of violence before violence develops), secondary (used when violence is perceived to be imminent) and tertiary (controlling or reducing a violent incident that is already underway) strategies.
- (2) Consistently adopt policies at an organisation level (encouraging cultural change), rather than at a ward or individual level. This aligns with the intent of these guidelines, which is to standardise the approach of training in the prevention and management of clinical aggression across Victoria.
- (3) Take a recovery-oriented, person-centred, trauma-informed approach in the prevention and management of clinical aggression. This is associated with more successful outcomes in preventing and managing aggression and is consistent with reducing restrictive interventions.

Clinical implications and research translation:

- On the basis of this review we recommended the following:
 - Development of a state-wide resource (video or manual) on evidence based restraint techniques.
 - A review and development of best practice guidelines in limit setting and restraint.
 - Modification of the Department of Human Services (2014) Chief Psychiatrists Guidelines on restrictive interventions.

Project outputs to date:

- McKenna, B., Daffern, M., & Maguire, T. (2016). Minimum training standards: Preventing and managing clinical aggression including the use of physical restraint. Melbourne, Australia: The State of Victoria Department of Health and Human Services.



Other staff initiated research

Exploring positive affect for forensic mental health service users using a Qigong intervention

Chris Quinn

Rationale and aims:

- People experiencing mental illness require services that provide them with a sense of personal safety, a place where they can experience a reduction to their distress and assistance to manage their feelings. Exploring the experience of service users to interventions such as Qigong is important in understanding whether benefits exist.
- The aim of the research is to explore whether Qigong is an effective intervention on positive affect traits for forensic mental health service users. The research evaluated:
 - how forensic mental health service users respond to a Qigong intervention, and
 - whether Qigong is an effective intervention for forensic mental health service users.

Methodology:

- Two inpatient service users groups from Thomas Embling Hospital were invited to participate in 10 Qigong groups.
- Responses to Qigong were measured using an adapted version of Gilbert's Positive Affect Rating Scale following each group.
- Three qualitative questions were added to provide greater understanding of the person's experience.

Results and conclusions:

- The findings demonstrate that patients enjoy the practice of Qigong and experience improved positive affect as measured by the Positive Affect Rating Scale, and report that Qigong is easy to learn and helpful for them in managing their frustrations. Ensuring that the milieu of the inpatient environment is safe and free from aggression are important considerations in the inpatient setting.
- The findings from this study have the potential of adding to the paucity of data discussing the use of Qigong with forensic patients as an effective relaxation intervention and possibly as an intervention in reducing negative affective states by the promotion of positive affective states and hence a reduction in aggression and possible violence occurring within the forensic inpatient environment.
- Mindfulness strategies such as Qigong are interventions that nurses can utilise to promote positive feelings of personal relaxation, peacefulness and safety. Qigong can promote positive affective traits for patients in forensic hospitals. These positive affective traits can act as protective factors to inpatient aggression and violence.

Clinical implications and research translation:

- Mindfulness strategies such as Qigong are interventions that nurses can utilise to promote positive feelings of personal relaxation, peacefulness and safety.
- Qigong can promote positive affective traits for patients in forensic hospitals.
- Forensic patients report that Qigong is easy to learn and helpful for them in managing their frustrations.

Project outputs to date:

- Quinn, C. (2015, November). Qigong: Benefits for consumers and clinicians. Presentation. Delivered to Australian College of Mental Health Nurses Victorian Branch Therapy Buffet. Melbourne, Australia.
- Quinn, C. (2016, August). Feeling safe, feeling relaxed: Qigong, a brief intervention with positive consumer outcomes. Paper presented at the Victorian Collaborative Mental Health Nursing Conference, Melbourne, Australia.
- Quinn, C. (2016, October). 'It helps us heal for real': Forensic consumers feel safe and relaxed with Qigong. Paper presented at the Australian College of Mental Health Nurses 42nd International Mental Health Nursing Conference, Adelaide, Australia.
- Quinn, C. (2016). 'It helps us heal for real': Forensic consumers feel safe and relaxed with Qigong. *International Journal of Mental Health Nursing*, 25(Supplement 1), 45. doi: 10.1111/inm.12771.

Doctor of Psychology

What's it like on the inside? The impact of the self-concept on the educational engagement and delinquency of young offenders in a custodial setting

Rana Abou-Sinna

Michael Daffern, Pamela Snow, Stuart Thomas

Rationale and aims:

- With growing evidence that educational engagement and academic success are important in reducing the likelihood of reoffending by young people (Blomberg et al., 2010; Brookmeyer, Fanti & Henrich, 2006; Chapman et al., 2011; Li et al., 2011), youth detention centres are increasingly searching for ways of engaging young offenders in education and providing positive learning experiences.
- Previous research has elucidated the important role self-concept can play in the educational engagement of young people.
- However, to date, little research has specifically examined the relationship between self-concept and educational engagement in young incarcerated offenders.
- This study aimed to address this gap using both quantitative and qualitative research methods.

Methodology:

- Self-concept was assessed in 70 young adolescent males aged between 14 and 19 years ($M = 16.53$, $SD = 1.00$) who were incarcerated in a youth custodial facility.
- In addition to a measure specifically examining self-concept, participants also completed measures assessing related constructs including personality, self-esteem, self-efficacy and early maladaptive schema.
- The narratives of 15 young offenders were also examined using narrative inquiry.

Results and conclusions:

- The results of the quantitative and qualitative analyses indicated that young offenders' self-concepts along with their temperament and character predicted both educational engagement and previous delinquency, suggesting that the self-concept may be a key variable linked to the overall adjustment of a young person and not just their educational outcomes.

Clinical implications and research translation:

- The self-concept may therefore be particularly relevant to rehabilitative efforts in young offenders. The results also provide insight into how young offenders' life experiences, particularly their childhood experiences, contribute to the development of negative self-beliefs, which impact on their engagement in education.

Project outputs to date:

- Abou-Sinna, R. (2015, September). What's it like on the inside? The impact of the self-concept on the educational engagement of young incarcerated offenders. Paper presented at the Young People and the Law: International Approaches to Care, Corrections and Intervention Conference, Prato, Italy.

Completed Research 2016–2017

Doctor of Psychology

The predictive validity of the Historical-Clinical-Risk Management 20 Version 3 (HCR-20V3) and the Violence Risk Appraisal Guide-Revised (VRAG-R)

Delene Brookstein

Michael Daffern, James Ogloff

Rationale and aims:

- The HCR-20V2 and VRAG are amongst the most commonly used violence risk assessment tools. These tools were recently revised to reflect research developments, contemporary changes in risk assessment, and/or greater applicability to other cohorts. The evidence base for these newer versions, the HCR-20V3 and VRAG-R, is limited but growing. The aim of this study was to evaluate the psychometric properties of these tools, including predictive and concurrent validity, incremental validity and inter-rater reliability.
- This project aimed to evaluate various psychometric properties of the HCR-20V3 and the VRAG-R in a sample of Australian forensic psychiatric patients post discharge from a secure forensic hospital to either prison or community settings.

Methodology:

- A retrospective methodology was used to score violence risk assessment tools, based on file review of 100 patients admitted to the Thomas Embling Hospital between April 2000 and July 2013.
- The maximum follow-up period was approximately 13 years.
- Victoria Police provided data on criminal charges, extracted from the Law Enforcement Assistance Program (LEAP) database.
- Movements in and out of psychiatric hospitals and prisons were provided by the Department of Justice Prisoner Information Management System (PIMS) and Victoria's Client Management Interface (CMI) database, enabling the calculation of a 'time at risk'.

Results and conclusions:

- Violent recidivism was significantly correlated with the HCR-20V3 and VRAG-R scores.
- The HCR-20V3 and VRAG-R demonstrated acceptable levels of concurrent validity with previous iterations.
- Both the HCR-20V3 and VRAG-R significantly predicted violent recidivism (AUCs = 0.70 – 0.77).
- The predictive validity of the HCR-20V3 and VRAG-R was not significantly different from predictive validity indices produced by previous iterations.
- For both tools, the odds of being charged with criminal offences were 3–4 times higher if participants scored higher than median scores.
- There were statistically significant differences in survival time related to HCR-20V3 scores.
- The HCR-20V3 Relevance ratings did not demonstrate incremental validity over the Presence ratings.
- The PCL-R added significant incremental validity to the HCR-20V3 but did not add significant incremental validity to the VRAG-R scores.
- Inter-rater reliability for the HCR-20V3 and VRAG-R scores were good to excellent.

Clinical implications and research translation:

- These findings are promising and support the use of the HCR-20V3 and VRAG-R in predicting violent recidivism within forensic psychiatric cohorts.
- These new versions have retained their predictive performance whilst adding to tailored assessments and/or extending applicability to other cohorts.
- Clinicians can be reassured that in their use of current as opposed to dated tools, they are employing best practice guidelines and drawing on the current evidence base.
- The evidence base for these new tools is limited but growing, with representation from Australian forensic psychiatric populations.

Project outputs to date:

- Brookstein, D. (2016, June). Predictive validity of the Historical Clinical Risk Management - 20 Version 3 (HCR-20 V3) and the Violence Risk Appraisal Guide - Revised (VRAG-R). Paper presented at the 16th Annual International Association of Forensic Mental Health Services Conference, New York, USA.

The demographic, mental health and offending characteristics of online child pornography offenders: A comparison with contact-only and dual sexual offenders

Marie Henshaw

James Ogloff, Jonathan Clough

Rationale and aims:

- This project aimed to enhance our understanding of those who engage in online child pornography offending.
- Phase 1 aimed to characterise all individuals sentenced with any child pornography-related offence between 2004 and 2014, based on their demographic, legal and mental health characteristics.
- Phase 2 aimed to empirically compare the characteristics of those sentenced for (1) child pornography offences; (2) contact child sexual assault offences; and (3) both child pornography and contact offences, during the same time period.

Methodology:

- The project utilised a rigorous data-linkage framework to extract and collate data from the Corrections Victoria, Victoria Police, the Department of Health and the National Coronial Information System databases.
- A total of 1,205 cases were retained for inclusion in the study across the three offender groups. A range of univariate and multivariate statistical analyses were undertaken to identify the characteristics that differentiate between offender types and predict re-offending in the child pornography offending population.

Results and conclusions:

- Child pornography offenders (CPOs) were largely homogeneous with respect to demographic and mental health characteristics
- Possession-only offenders demonstrated fewer indicators of antisociality and were less likely to engage in child contact sexual offences than production or mixed CPOs
- CPOs could be distinguished from dual and contact offenders on the basis of fewer sexual offences, lower rates of violent offending and higher education, while higher rates of paraphilic diagnoses differentiated both CPOs and dual offenders from contact offenders.
- CPOs typically demonstrated lower recidivism rates than dual and contact offenders, with the exception of child pornography recidivism rates, which were higher among both CPOs and dual offenders relative to contact offenders
- Fewer than six per cent of CPOs reoffended with a child contact sexual offence
- The research supports prior characterisations of CPOs as a distinct type of sexual offender who are primarily characterised by low levels of antisocial behaviour and high levels of sexual deviance.
- While this suggests that sexual deviance is likely to be a key motivator for child pornography offending, further research is required to understand the specific features underlying the child pornography offence process as distinct from contact offending.

Clinical implications and research translation:

- Evidence of group differences suggests that existing assessment and treatment paradigms are likely to require revision and adaptation to accurately capture and meet the needs of CPOs.
- While reduction and management of deviant sexual interests are likely to remain pertinent treatment targets for CPOs, interventions targeted towards broader antisocial attitudes and behaviours are likely to be less relevant to this group. This is particularly the case for possession-only CPOs, who form the majority of the Victorian CPO population.
- Specialist treatment programs may better meet the needs of CPOs, with the inclusion of CPOs in traditional sexual offender treatment programs potentially constituting an ineffective use of resources.
- Although further research is required to establish the relationship between CPO characteristics and future offending behaviour, information regarding the known offender group characteristics may be useful in assisting case prioritisation. For example, the identification of factors among CPOs that are typically associated with dual or contact offenders may signal heightened risk and thus a greater need for case prioritisation among investigative and offender management services.

Project outputs to date:

- Henshaw, M., Ogloff, J. R. P., & Clough, J. A. (2016, June). Demographic, mental health and offending characteristics of online child pornography offenders: Comparisons with contact-only and dual sexual offenders. Paper presented at the International Association of Forensic Mental Health Services Conference, New York, USA.
- Henshaw, M., Ogloff, J. R. P., & Clough, J. A. (2017). Looking beyond the screen: A critical review of the literature on the online child pornography offender. *Sexual Abuse: A Journal of Research and Treatment*, 29(5), 416-445. doi: 10.1177/1079063215603690.
- Henshaw, M., Ogloff, J. R. P., & Clough, J. A. (2017, April). Are online child exploitation material offenders different from other types of sexual offenders? Paper presented at the Forensic Research Dissemination Seminar, Melbourne, Australia.
- Henshaw, M., Ogloff, J. R. P., Clough, J. A., & Sorotos, A. (2017, July). Are online child exploitation material offenders different from other types of sexual offenders? Seminar presented at the Forensic Clinician Professional Development Session, Melbourne, Australia.
- Ogloff, J. R. P., Henshaw, M., & Clough, J. A. (2016, April). 20 years of online child exploitation offending: What we've learnt. Paper presented at the Victoria Police Sex Offenders Registry Asia Pacific Conference, Melbourne, Australia.

Doctor of Psychology

Long-term offending and re-victimisation patterns among child sexual abuse victims: The role of abuse characteristics and co-occurring psychopathology

Nina Papalia

James Oglloff, Stefan Luebbbers

Rationale and aims:

- The pervasive nature of child sexual abuse (CSA) has gained widespread academic and public interest.
- Two distinct, yet related, adverse sequelae that continue to attract emotive comment and scholarly inquiry are that of criminal offending and re-victimisation.
- This thesis aimed to: (a) examine the pattern of overlap among long-term offending and re-victimisation outcomes experienced by CSA survivors, together with indicators of mental health morbidity; and (b) explore the temporal progression of offending behaviour and re-victimisation incidents over the early life-course among this vulnerable population.
- It also considered whether index abuse characteristics are associated with the extent and pattern of subsequent adversities.

Methodology:

- This thesis used an historical cohort design involving data linkage.
- The forensic medical records of 2,759 children aged 0-16 years, who were assessed by the state-wide forensic medical service in Victoria between 1964 and 1995 for suspected contact sexual abuse, were later linked with public psychiatric, criminal justice, and coronial administrative databases.
- Data linkage occurred between 13 and 44 years following the index episode of abuse.
- CSA cases were compared to 2,677 matched cases from the general population, which were also linked to public psychiatric and criminal justice databases using identical methods.
- This thesis includes three empirical studies, each with a different subsample drawn from the broader cohorts of CSA cases and comparisons according to the specific aims and inclusion criteria of each study.

Results and conclusions:

- The results demonstrated a substantial degree of overlap in the long-term offending, re-victimisation, and mental health morbidity outcomes (psychopathology and fatal-self harm) experienced by CSA survivors, with abuse victims evidencing higher rates of co-occurrence than those without a known history of CSA.
- Although the aggregate profiles of offending and re-victimisation over the early life-course appeared broadly similar for CSA victims and comparisons, the findings suggested that there is considerable heterogeneity in the temporal trajectories (and their associated risk profiles) of offending and re-victimisation within the population CSA survivors.
- Four latent pathways of offending over time were identified among CSA cases, labelled: Early-Onset/High-Risk/Adolescence-Limited (9.9%); Intermediate-Onset/Low-Risk/Adolescence-Limited (59.2%); Late-Onset/Low-Risk/Slow-Declining (23%); and Early-Onset/High-Risk/Persistent trajectories (7.9%).
- Similarly, four latent pathways of interpersonal re-victimisation over time were identified among abuse survivors, namely: Childhood-Limited (16.2%); Normative (66.6%); Emerging-Adulthood (9.2%); and Chronic (8%) trajectories.
- The age at which the index abuse was reported and the presence of co-occurring psychopathology were consistently related to the expression, or pattern, of examined adverse outcomes. In particular, abuse occurring at or close to the time of puberty and the development of mental health problems were frequently associated with poorer long-term adjustment among CSA survivors.
- Collectively, the findings of this thesis confirm that those with officially documented CSA are an 'at-risk' population for a number of officially recognised individual and co-occurring long-term difficulties in the domains of criminal behaviour, further victimisation, and mental health sequelae. Further, for a small group of these victims, the disturbance can be relatively severe, multi-domain, and/or persistent across the early life-course.

Clinical implications and research translation:

- The findings make a strong case for the provision of early intervention to children known to have suffered sexual abuse. Given the heterogeneity of cases observed in the present sample of victims with respect to the nature, extent, and temporal pattern of their long-term difficulties, it is reasonable to expect that a 'one size fits all' approach to intervention would be inefficient and, for many victims, ineffective.
- This research suggests that older children of the (peri)pubertal age, male victims (especially boys who are exposed to multiple episodes of abuse), and children who present with adverse family/social environments or early signs of behavioural and emotional disturbance, may be especially vulnerable to poorer long-term adjustment. These children may require more intensive monitoring and treatment.
- The findings emphasise the need for relevant services – including child protection, mental health, juvenile and adult justice, victim support, and social services – to adopt a coordinated and integrated approach to ensure that the totality of CSA victims' needs are adequately met.
- The findings of this thesis suggest that known CSA victims (especially females) who are charged with a criminal offence, are re-victimised, and have contact with public mental health services subsequent to their index abuse are at a considerably increased risk of suicide or fatal drug-overdose. These victims warrant particularly careful supervision and assertive intervention to reduce their risk of fatal self-harm.

Project outputs to date:

- Papalia, N. L., Luebbers, S., Ogloff, J. R. P., Cutajar, M., & Mullen, P. E. (2017). Exploring the longitudinal offending pathways of child sexual abuse victims: A preliminary analysis using latent variable modeling. *Child Abuse & Neglect*, 66, 84-100. doi: 10.1016/j.chiabu.2017.01.005.
- Papalia, N. L., Luebbers, S., Ogloff, J. R. P., Cutajar, M., & Mullen, P. E. (2017). The long-term co-occurrence of psychiatric illness and behavioral problems following child sexual abuse. *Australian & New Zealand Journal of Psychiatry*, 51(6), 604-613. doi: 10.1177/0004867416667232.
- Papalia, N. L., Luebbers, S., Ogloff, J. R. P., Cutajar, M., Mullen, P. E., & Mann, E. (2017). Further victimization of child sexual abuse victims: A latent class typology of re-victimization trajectories. *Child Abuse & Neglect*, 66, 112-129. doi: 10.1016/j.chiabu.2017.02.040
- Papalia, N. [presenter], Ogloff, J. R. P., Luebbers, S., Cutajar, M., & Mullen, P. E. (2015, September). Long-term cumulative outcomes of child sexual abuse: Inter-relationships among mental health problems, offending, further victimisation, and unnatural death. Paper presented at the Young People and the Law Conference, Prato, Italy.
- Papalia, N. [presenter], Luebbers, S., Ogloff, J., Cutajar, M., & Mullen, P. E. (2015, October). Long-term consequences of child sexual abuse: Exploring victim to perpetrator and victim to re-victim pathways. Paper presented at the International Corrections and Prisons Association (ICPA) Conference, Managing Risk in Contemporary Correctional Systems, Melbourne, Australia.
- Papalia, N. [presenter], Luebbers, S., Ogloff, J. R. P., Cutajar, M., Mullen, P. E., & Mann, E. (2016, March). Long-term consequences of child sexual abuse: Exploring victim to perpetrator and victim to re-victim trajectories. Presentation. Delivered to Forensicare Research Dissemination Seminar. Thomas Embling Hospital, Melbourne, Australia.
- Papalia, N. [presenter], Luebbers, S., Ogloff, J. R. P., Cutajar, M., Mullen, P. E., & Mann, E. (2017, September). Long-term re-victimisation outcomes among child sexual abuse survivors. Paper presented at the National Victims of Crime Conference, Brisbane, Australia.



PhD

Measuring the progress and outcome of patients at Thomas Embling Hospital

Gregg Shinkfield

James Ogloff

Rationale and aims:

- This study sought to evaluate the accuracy of the Routine Outcome Measures (ROMs) mandated for use in Thomas Embling Hospital (TEH). It also sought to appraise the utility of these measures in relation to other forensic specific tools available.

Methodology:

- Phase 1: Review of outcome measure tools developed and validated for use in forensic mental health services.
- Phase 2: Audit of ROMs currently used in TEH.
- Phase 3: Comparison of existing measures with forensic mental health specific tools.

Results and conclusions:

- This research confirmed that ROMs provide a useful means of tracking the needs of mental health patients within forensic settings. However, the present study attests that the ROMs currently used for this task in Thomas Embling Hospital may be limited in their ability to track all areas of need pertinent to a forensic mental health population (Article 2: Use and interpretation of routine outcome measures in forensic mental health).
- The findings of Study 1 (A review and analysis of routine outcome measures for forensic mental health services) confirm that there are a range of forensic focused tools currently available in the literature that could be purposed for this task. However, evaluation of the forensic ROM tools identified by this study suggested that many of these tools would not in fact add significantly to monitoring the broad clinical, social and forensic needs of this client group (Article 3: Monitoring risk, security needs, clinical and social functioning within a forensic mental health population).
- Ultimately, the findings of this thesis recommended that there would significant benefit to including the 7-item 'security scale' of the HoNOS-Secure to the existing ROM framework employed in Australia (Article 4: Comparison of HoNOS and HoNOS-Secure in a forensic mental health hospital).

Clinical implications and research translation:

- Addition of HoNOS-Secure 'security scales' is recommended for use in forensic mental health settings.
- Longitudinal data from routine outcome measures are able to effectively demonstrate change in clinical and risk related needs of forensic mental health patients
- It is recommended that the existing consumer measure (BASIS-32) be substituted for the Camberwell Assessment of Need: Forensic Version (CANFOR), as the CANFOR demonstrated significantly better performance as a ROM with this population

Project outputs to date:

- Shinkfield, G., & Ogloff, J. R. P. (2014). A review and analysis of routine outcome measures for forensic mental health services. *The International Journal of Forensic Mental Health*, 13(3), 252-271. doi: 10.1080/14999013.2014.939788
- Shinkfield, G., & Ogloff, J. R. P. (2015). Use and interpretation of routine outcome measures in forensic mental health. *International Journal of Mental Health Nursing*, 24(1), 11-18. doi: 10.1111/inm.12092
- Shinkfield, G., & Ogloff, J. R. P. (2016). Comparison of HoNOS and HoNOS-Secure in a forensic mental health hospital. *The Journal of Forensic Psychiatry & Psychology*, 27(6), 867-885. doi: 10.1080/14789949.2016.1244278.
- Shinkfield, G., & Ogloff, J. R. P. (2017). Monitoring risk, security needs, clinical and social functioning within a forensic mental health population. Manuscript submitted for publication.

Relationship cognition in intimate partner violence and post-relationship stalking

Svenja Senkans

Troy McEwan, James Ogloff

Rationale and aims:

- Intimate partner violence (IPV) and post-relationship stalking (PRS) are public health concerns that affect hundreds of thousands of people worldwide. A wide range of individual differences and psychological processes such as insecure attachment, personality pathology, general or specific aggressive attitudes, and gender-related cognition have been implicated in both IPV and PRS.
- This project sought to theoretically and empirically examine how relationship and aggressive cognition might be associated with the perpetration of IPV and/or PRS.

Methodology:

- A large data sample of older university students was obtained from Swinburne University.

Results and conclusions:

- The thesis proposes an integrated model of relationship aggression perpetrators' cognition and tested empirical links between such cognitions and IPV and PRS perpetration.
- In men, general violence-supportive attitudes and relationship-specific entitlement predicted both IPV and PRS. In women, stalking-supportive attitudes and relationship-specific entitlement predicted IPV, while stalking was solely predicted by IPV-supportive attitudes.
- Using the newly developed Relationship Rumination Questionnaire (RelRQ; see paper below, independent samples) and controlling for general rumination and victimisation experiences, the study found that relationship rumination did not meaningfully predict IPV. In contrast, relationship-specific rumination was predictive of stalking of former partners.
- Beyond these results, the thesis also elucidates the interconnections between IPV and PRS. The main finding was that in men, a meaningful link between IPV and PRS perpetration was detected, while IPV and PRS perpetration were unrelated in women.

Clinical implications and research translations:

- Taken as a whole, the empirical studies provide a range of novel information about how perpetrators of IPV and PRS think about relationships and relationship aggression and on the interconnectedness of IPV and PRS.
- Of particular note is the common outcome that while both genders perpetrate IPV and PRS, many findings differed between genders – both on a prevalence- and correlate-level.
- In addition, the studies provide novel empirical evidence that IPV and PRS are related, but not identical phenomena.
- The empirical findings offer preliminary support for the model proposed in this thesis.
- The model offers a useful framework for further study into relationship aggression perpetrators' cognition, which can then inform interventions aimed at the reduction of these public health problems.

Project outputs to date:

- Senkans, S., McEwan, T. E., & Ogloff, J. R. P. (2016, July). Intimate partner violence and post-relationship stalking perpetrators' cognition as Aggressive Relational Schemas (ARMS). Paper presented at the International Society for Research on Aggression (ISRA) 2016 World Meeting, Sydney, Australia.
- Senkans, S., McEwan, T. E., & Ogloff, J. R. P. (2016, November). Relationship cognition in intimate partner violence and post-relationship stalking. Presentation. Delivered to Forensic Clinical Specialist Program, Forensicare, Melbourne, Australia.
- Senkans, S., McEwan, T. E., Skues, J., & Ogloff, J. R. P. (2016). Development of a Relational Rumination Questionnaire. *Personality and Individual Differences*, 90, 27-35. doi: 10.1016/j.paid.2015.10.032
- Senkans, S., McEwan, T.E., & Ogloff J. R. P. (in press). Assessing the link between intimate partner violence and post-relationship stalking: A gender-inclusive study. *Journal of Interpersonal Violence*.

Completed Research 2016–2017

PhD

Perceived workplace adversity and the psychological wellbeing of correctional officers: Examining the impacts and implications

Justin Trounson

Jeff Pfeifer, Christine Critchley

Rationale and aims:

- Correctional Officers face a range of unique workplace difficulties that can impact on their mental health and workplace productivity.
- Despite past research demonstrating the impact of the work environment on correctional officers, little research has examined how to best address this issue in a pro-active or preventative manner.
- The broad aim of this thesis is to provide a scientific rationale and sound evidence-base for the future development of an industry-based, effective, psycho-educational training program designed to prepare correctional officer recruits to better manage the work-related environmental adversity they face in the job.

Methodology:

- Study 1 involved 400 participants completing an online questionnaire to measure perceptions of workplace adversity and markers of stress.
- Study 2 involved eight focus groups and 12 semi-structured interviews to identify a set of response tendencies commonly employed by officers.
- Study 3 involved online surveys from 136 officers to establish the link between workplace adversity and correctional officer wellness and clarify the moderating effects of the response tendencies commonly used by officers.

Results and conclusions:

- The results of this thesis indicated that correctional officers perceive their workplace as a highly adverse environment and that this perceived workplace adversity is a factor that can negatively impact an officer's level of stress and their psychological wellbeing.
- The findings revealed that this deterioration in psychological wellbeing can in turn, impact their likelihood to engage in negative organisational behaviours such as absenteeism, presenteeism and develop a sense of job dissatisfaction.
- Correctional officers engage in a range of cognitive, interpersonal and behavioural response strategies in an attempt to manage the workplace adversity they face, some of which are helpful and others that are largely unhelpful in assisting them to manage this adversity and maintain their psychological wellbeing.
- Using Interpersonal/Solution Focussed strategies when responding to workplace adversity may assist officers to reduce the negative impact of perceived workplace adversity on their psychological wellbeing and in turn reduce the frequency of negative organisational outcomes such as absenteeism, presenteeism and job dissatisfaction.
- Engaging in Emotional Avoidant response strategies may also contribute to lowered psychological wellbeing, increased negative organisational outcomes and be more likely to be used when perceived adversity is high for officers.

Clinical implications and research translations:

- Reveals a range of workplace adversity factors relevant to correctional officers.
- Establishes a link between perceived workplace adversity, psychological wellbeing and negative organisational impacts such as absenteeism, presenteeism and job dissatisfaction.
- Demonstrates how the way an officer responds to perceived workplace adversity can impact their psychological wellbeing and the organisations that employ them.
- Demonstrates an evidence-based need for the development and implementation of preventative psychological training programs aimed at ameliorating the impact of workplace adversity on officer wellbeing.
- Provides the correctional field with evidence-based guidance and recommendations in relation to potential content for a preventative training program.

Project outputs to date:

- Trounson, J. S. (2014, December). PhD research presentation. Presentation. Delivered to NSW Commissioner of Corrections and the Executive Body. Sydney, Australia.
- Trounson, J. S., & Pfeifer, J. E. (2013, October). Workplace adversity in correctional facilities: Developing a new way to equip correctional officers through fostering psychological resilience. Paper presented at the 15th Annual Conference of the International Corrections and Prisons Association, Colorado Springs, USA.
- Trounson, J. S., & Pfeifer, J. E. (2014, October). Minimizing the effect of workplace adversity on correctional officers: Tackling an old problem in a new way. Paper presented at the 16th Annual Conference of the International Corrections and Prisons Association, Windhoek, Namibia.
- Trounson, J. S., & Pfeifer, J. E. (October, 2015). Tackling the high cost of workplace adversity – Development and implementation of targeted, preventative training programs for officers. Paper presented at the 17th annual conference of the International Corrections and Prisons Association, Melbourne, Australia.
- Trounson, J. S., & Pfeifer, J. E. (2016). Promoting correctional officer wellbeing: Guidelines and suggestions for developing psychological training programs. *Advancing Corrections*, 1(1), 56-64.
- Trounson, J. S., & Pfeifer, J. E. (2017, July 21). Correctional officers and workplace adversity: Identifying interpersonal, cognitive & behavioral response tendencies. *Journal of Correctional Health Care*. Advance online publication. doi: 10.1177/1078345817720923.
- Trounson, J. S., Pfeifer, J. E., & Critchley, C. (2016). Correctional officers and Work-related Environmental Adversity: A cross-occupational comparison. *Applied Psychology in Criminal Justice*, 12(1), 18-35.
- Trounson, J. S., Pfeifer, J. E., & Skues, J. L. (2016). Perceived workplace adversity and correctional officer well-being: Examining the impact of officer response styles and identifying implications for training. Manuscript submitted for publication.
- Chair – Two roundtable sessions, Staff Training and Professionalization – International Corrections and Prisons Association Conference, 2015 (Melbourne, Australia)
- Lecture in Criminology: Corrections – Systems and Practice (CRI3002) – Correctional Officer Wellbeing

Masters

The risk principle paradox: A multilevel approach to examine which high-risk offenders successfully change during rehabilitation programs

Cole A. Higley

Caleb Lloyd

Rationale and aims:

- The purpose of this study was to explore motivation and engagement in rehabilitation among offenders attending psychosocial programs while incarcerated in prison.
- Past research has shown that evidence-based rehabilitation programs are the most effective way to reduce future criminal behaviour. Yet, most research is conducted at the program level, and less is known about which individual features are associated with successful program completion, and reduced recidivism following program attendance.
- This research was designed to contribute to a better understanding of pathways through prison rehabilitation to offending outcomes in the community.

Methodology:

- Archival data routinely collected by Correctional Service of Canada were provided for analysis, representing over 10,000 individuals.
- This dataset is unique for providing data at three points in time: (a) background features at prison intake, (b) pre- and post-rehabilitation ratings of program engagement, and (c) post-release recidivism.
- Research questions examined the relationship among (a) demographic variables, (b) offending history, (c) psychosocial variables assessed during prison intake, (d) attendance and engagement during programs, (e) assessments of program engagement rated by program providers, and (f) official records of reoffending.

Results and conclusions:

- Analyses examined whether demographic, motivation, and rehabilitative group features were related to program performance and post-release recidivism.
- Results showed that in certain rehabilitation types, statistically significant interactions were observed, such that the relationship between individual risk and outcome (either program performance or post-release recidivism) differed depending on individual offender traits, specifically age and motivation to change. Older, more motivated high risk offenders were more likely to demonstrate change.
- In addition, the relationship between risk and program performance differed depending on group level factors, specifically average rehabilitation group risk and individuals' relative position within a group in terms of their relative degree of risk to reoffend.
- Although a minority of models resulted in statistically significant effects, and effect sizes tended to be small, these findings demonstrate that person and group level factors are important considerations when attempting to optimise correctional rehabilitation outcomes, and that therapeutic processes are likely to impact whether a high-risk individual might gain from rehabilitation.

Clinical implications and research translation:

- For some offender subtypes, older age and higher pre program motivation were associated with improved outcome, even at high levels of risk. Thus, these are important features that deserve consideration when the goal of a correctional agency or program facilitator is to maximise program performance and to decrease future criminal behaviour.
- Also, in four models, results suggested that individuals in relatively homogenous groups of relatively lower risk peers performed better in programs, which supports the conclusion that peer influence may be an important positive change mechanism for higher risk group participants, if the direction of the peer influence is not criminogenic.

Project outputs to date:

- Higley, C. A., & Lloyd, C. (2017, March). The 'risk principle' paradox: Exploring which high-risk offenders successfully change during rehabilitation programs. Paper presented at the American Psychology-Law Society Annual Convention, Seattle, Washington.

Honours

Social work service models for women in forensic mental health systems

Rebecca Diss

Marty Grace, Leila Rahimi

Rationale and aims:

- Research indicates that women who are forensic mental health patients typically have trauma-laden backgrounds (Macy; Pence, cited in Knight 2014, p. 25). Women with a history of child sexual abuse have distorted self-concepts and maladaptive coping mechanisms which result in issues with relational functioning (Dombo and Bass 2014). Trauma can lead to issues with trust and self-esteem, impacting on how they manage distress (McCann and Pearlman, cited in Knight 2014, p. 26). Trauma has far reaching consequences, impacting on emotional and psychological functioning in adult life (Knight 2014). The impaired emotional development can manifest in violent responses to distress (King 2015). Women's mental health needs specialised service models (National Mental Health Implementation Unit, cited in King 2015, p.7).
- The aim of the proposed research was to explore female patient and staff experiences of current support services within a forensic mental health facility, to gain a better understanding of how these services support the female patient's recovery journey, and to generate ideas for the development of women-specific services within forensic mental health systems.

Methodology:

- The overall approach of the research was qualitative. The methods utilised included semi-structured interviews and an online survey with current staff members who work with women forensic patients.
- Six interviews were conducted with current staff members who have experience with female forensic patients. The interviews were face-to-face and semi-structured, focusing on, from their experiences, what they believed were the areas of need for the patients' recovery journey and ideas for future practice. The interviews were conducted in a designated meeting room on various units.
- Eight staff members completed the anonymous online surveys. The questions were qualitative, focusing on met/unmet needs of the female forensic patients and ideas for future service delivery. The online surveys were administered through Qualtrics, and a link to the survey was provided in the recruitment email sent to staff. All data was analysed thematically.

Results and conclusions:

- Research participants expressed dissatisfaction and frustration towards a system designed with the requirements of men in the forefront. All the participants emphasised the need for change within the structure of Thomas Embling hospital.
- This was most apparent when they discussed the units currently available for the female forensic patients. The lack of sub-acute and continuing care units for the females creates a barrier for the females' recovery journey and transition through the hospital. Several participants highlighted the differences between the male and female forensic patients' recovery journey, which was attributed to the male patients having sub-acute and continuing care units; where the females do not. The female patients are transferred straight from a female-only acute unit into a mixed-gender rehabilitation unit. Participants spoke of the negative impacts this can have on the females' recovery and ultimate transition through the hospital.
- Participants emphasised the need for female specific service models that can best meet the differing needs of the patients with complex trauma histories.

Clinical implications and research translation:

- The findings of this research indicate that the lack of a sub-acute or a continuing care unit for female forensic patients at Thomas Embling Hospital is detrimental to the female patients' recovery journey and successful transition through the hospital. The findings indicated that trauma-laden histories were common among the female forensic patients.
- This research recommends a systematic review of the physical structure of Thomas Embling Hospital, taking into account the differing needs of female forensic patients, specifically around the benefits of female-only subacute units on patients' recovery and successful transition through the hospital. Recovery models that have been adapted to meet the requirements of a forensic setting while being responsive to trauma would be beneficial within environments like Thomas Embling Hospital.

Assessing change in dynamic risk factors in male and female forensic psychiatric inpatients: relationship with psychopathy and violent recidivism

Bianca Mastromanno

Michael Daffern

Rationale and aims:

- The purpose of this study was to examine whether violence risk, as measured by the HCR-20V3, decreases throughout the course of inpatient treatment among forensic psychiatric patients.
- The HCR-20 measures static and dynamic risk factors for violence, and so this study examined whether these dynamic, changeable risk factors can be improved upon with the interventions and treatments received during inpatient care.
- The study also sought to examine whether those higher in trait psychopathy experience less change in violence risk, and whether changes in violence risk are predictive of violent and non-violent recidivism post-release from inpatient care.

Methodology:

- Archival analysis of inpatient files, whereby each participant was scored on the HCR-20V3 for the time periods of their first two months of treatment, and their last two months of treatment to facilitate the assessment of change in violence risk.
- Participants were 43 male and female forensic psychiatric inpatients at Thomas Embling Hospital, who spent at least four consecutive months as an inpatient.
- Psychopathy scores were obtained by trained doctoral students for each participant using the PCL-R, and LEAP data was obtained to allow an assessment of whether participants reoffended post-release from hospital.

Results and conclusions:

- Participants did not decrease in overall dynamic risk for violence, however participants significantly increased in violence risk as measured by the Risk Management subscale, and significantly decreased in violence risk as measured by the Clinical subscale.
- Psychopathy was not associated with changes in violence risk during inpatient treatment.
- Changes in violence risk were not associated with recidivism.
- 50% of participants in this study reoffended following release from prison or Thomas Embling Hospital.

Clinical implications and research translation:

- In contrast to several European studies which have indicated that forensic psychiatric inpatients tend to decrease in risk as measured by both the Clinical and Risk Management subscales on the HCR-20, perhaps there needs to be a greater focus on preparing all inpatients for life in the community in addition to the intensive focus on treating mental illness.
- Whilst psychopathy is known to interfere with improvement on several other violence risk assessments, it is possible that the lack of association between psychopathy and risk on the HCR-20 indicates that psychopathy does not interfere with the recovery from serious mental illness, or with the ability to have professional plans in place. Perhaps if an alternative risk assessment tool was used (such as the VRS) which incorporates risk factors largely related to psychopathy itself (e.g. personality and antisocial associate items), we would have seen the anticipated relationship.
- As there is only one other study which has found that changes on the HCR-20V3 are predictive of recidivism, further research is needed in this area with a greater sample size.

Project outputs to date:

- An article has been submitted for publication with the *Journal of Forensic Psychiatry and Psychology*.
- Findings were presented at the Forensicare Research Dissemination seminar in April 2017.

Completed Research 2016–2017

Honours

An evaluation of the usefulness of a sensory trolley and the influence on male patients' wellbeing in a forensic mental health setting

Bianca Jay Silcox

Lou Farnworth, Ros Jennings

Rationale and aims:

- There is currently very limited research of sensory trolleys in mental health settings and only two studies identified in the literature using sensory interventions in a forensic mental health setting, both conducted at Thomas Embling Hospital (Maguire et al., 2012; Wigglesworth, 2016). As well as this, Scanlan and Novak (2015) suggested there needs to be further work to ensure sensory approaches are effective for male consumers and that staff understand how sensory approaches can be useful for managing men's expressions of distress. This study therefore intended to investigate a sensory trolley in a forensic mental health setting with a particular focus on the influence and usefulness for men, as well as adding to the limited research in this area.
- The research aimed to inquire into the following:
 - (4) Does using a sensory trolley change self-rated stress levels in patients?
 - (5) How and when is a sensory trolley used in a forensic mental health setting?
 - (6) What are the barriers and facilitators to staff using a sensory trolley in a forensic hospital?
 - (7) Is there a link between a patient's safety plan and the use of a sensory trolley?

Methodology:

- A mixed method approach was adopted with thirteen staff members and four forensic patients recruited from the male acute units at Thomas Embling Hospital, a forensic mental health facility. Interviews with staff were conducted to understand the influence of the sensory trolley on male patients' wellbeing and the challenges and facilitators to using the sensory trolleys on the units. Patients' distress levels rated before, and after use of the trolley from both staff and patient perspectives, were collected simultaneously with the qualitative data. Three patients' personal safety plans were also investigated to identify whether there was a link between the items used from the sensory trolley and the patients' safety plan.

Results and conclusions:

- Use of the sensory trolley increased across the two male units during the study.
- Staff voiced several challenges to using the sensory trolley on the units. These included: staff concerns that men would not use the trolley for fear of being perceived as weak or vulnerable, lack of time, insufficient staff available, negative staff attitudes, lack of staff confidence, lack of education regarding sensory interventions and security protocols/procedures on the units.
- Factors that facilitated the use of the trolley included using it in communal areas on the unit, familiarity, regularity, integrating it into the structure on the unit, staff seeing the benefits for patients and staff also exploring the trolley alongside patients.
- This resulted in several changes: staff having increased confidence in using the trolley, staff feeling safe in a restrictive environment, improvement in therapeutic engagement between staff and patients as well as qualitatively between patients and patients. It also created a distraction on the unit with patients appearing to have improved effect. While the sample size is small, the findings also indicated that patients' self-rated distress levels and staff perceptions of patients' stress levels decreased after use of the sensory trolley.

Clinical implications and research translation:

The following are suggestions for practice in developing the sensory trolleys further as an intervention:

- Continue with further education sessions for staff to understand the goal of sensory interventions and the theory of sensory modulation interventions as an early intervention.
- Undertake further patient education on sensory modulation and interventions to empower patients to achieve and sustain change.
- Evaluate the procedures and protocols of the safety plans and ensure information is communicated regarding sensory items that are useful for men in a timely, efficient manner.
- Evaluate and develop specific guidelines regarding safety plans that help direct therapy and patient care.
- Develop a tool that outlines the stages of patient development when using sensory interventions to help staff understand the goal or 'end-point' and desired outcome of sensory interventions.
- Complete sensory profiles for all patients to help staff understand patients' sensory preferences and how this may best link to future patient care.
- Although not discussed in this thesis, consider how sensory interventions can be used in seclusion as staff voiced that this could be an area further investigated considering potentially negative sensory experience patients are exposed to in such an environment.

Project outputs to date:

- Silcox, B. J. (2016, October). An evaluation of the usefulness of a sensory trolley and the influence on male patients' wellbeing in a forensic mental health setting. Delivered to 3rd Forensic OT Forum. Adelaide, Australia.
- Silcox, B. J. (2016, December). An evaluation of the usefulness of a sensory trolley and the influence on male patients' wellbeing in a forensic mental health setting. Presentation. Delivered to Forensic Research Dissemination Seminar. Melbourne, Australia.

Published research

Number of publications by type: 2006–June 2017

Year	Journal Articles	Books	Chapters in books	In press articles	In press Chapters in books/books
2006 – 2007	28	0	6	11	12
2007 – 2008	16	0	7	18	8
2008 – 2009	32	1	8	14	7
Jul 2009 – Dec 2010	47	4	9	9	7
2011	34	0	2	16	2
2012	41	1	8	–	–
2013	44	0	5	7	5
2014	37	0	16	–	–
Jan–Jun 2015	24	3	5	8	5
2015 – 2016	57	1	9	10	7
2016 – 2017	40	1	7	16	9

Journal titles by country of publication and author: July 2016–June 2017

Aboriginal & Islander Health Worker Journal	1	Australia	Munro-Harrison, Trounson, Ironfield
Advancing Corrections	2	Canada	Boyce, Trounson, Pfeifer Nixon, Trounson
Aggression and Violent Behavior	2	USA	Klepfigsz, Daffern, Day
Australasian Journal on Ageing	1	Australia	Olenki, Sullivan, Stafrace, McEwan, Mullen
Australasian Psychiatry	1	Australia	Shepherd
Australian & New Zealand Journal of Psychiatry	1	Australia	Papalia, Luebbers, Ogloff, Cutajar, Mullen
Child Abuse & Neglect	2	Canada	Papalia, Luebbers, Ogloff, Cutajar, Mullen Papalia, Luebbers, Ogloff, Cutajar, Mullen, Mann
Criminal Justice and Behavior	1	USA	Yang, Guo, Olver, Polaschek, Wong
Health & Justice	1	USA	Shepherd, Ogloff, Thomas
International Journal of Mental Health Nursing	4	Australia	Brown, McKenna, Furness McEvedy, Furness, McKenna McKenna, McEvedy, Kelly Quinn
Journal of Criminological Research, Policy and Practice	1	UK	McEwan, Bateson, Strand
Journal of Family Violence	1	USA	Storey, Strand
Journal of Forensic Nursing	1	Canada	McKenna, Fourniotis, Toomey, Furness
Journal of Intellectual Disability Research	1	UK	Shepherd, Ogloff, Shea, Pfeifer, Paradies
Journal of Law and medicine	1	Australia	Sullivan, Deacon
Journal of Mental Health	1	UK	Furness, Hewavasam, Barnfield, McKenna, Joseph
Journal of Sexual Aggression	1	USA	Olver, Klepfigsz, Stockdale, Kingston, Nicholaichuk, Wong
Nurse Education in Practice	1	UK	McEvedy, Maguire, Furness, McKenna
Partner Abuse	1	USA	McEwan, Shea, Nazarewicz, Senkans
Policing	1	UK	Furness, Maguire, Brown, McKenna
Psychiatry Research	1	USA	Podubinski, Lee, Hollander, Daffern
Psychiatry, Psychology and Law	4	UK	O'Brien, Daffern O'Brien, Daffern Sellars, Fullam, O'Leary, Mountjoy Shepherd, Sullivan
Psychology, Public Policy, and Law	1	USA	Shepherd, Lewis-Fernandez
Research and Practice in Intellectual and Developmental Disabilities	1	Australia	Addicott, Thomas, Ogloff, Daffern
Schizophrenia Research	1	USA	Louise, Fitzpatrick, Strauss, Rossell, Thomas
Sexual Abuse: A Journal of Research and Treatment	1	UK	Reeves, Ogloff, Simmons
Social Psychiatry and Psychiatric Epidemiology	1	UK	Nixon, Thomas, Daffern, Ogloff
Social Science & Medicine	1	USA	Came, Doole, McKenna, McCreanor
The Journal of Forensic Psychiatry & Psychology	3	UK	McEwan, Daffern, MacKenzie, Ogloff Schilders, Ogloff Shinkfield, Ogloff
World Psychiatry	1	Europe	McKenna, Skipworth, Pillai

Presentations and research translation activities

Year	Invited address/ Keynote speech		Conference Paper presentation		Presentations to clinical and Professional groups	
	National	International	National	International	National	International
2015 – 2016	18	4	24	44	17	8
2016 – 2017	7	3	19	27	35	14

Current grant applications

Professor Michael Daffern, Professor Stuart Thomas, Professor James Ogloff, Professor Andrew Day, Dr Caleb Lloyd.
 The efficacy of group-based sexual offender treatment programming: Investigating the impact of treatment mode on recidivism and change in dynamic risk and protective factors. ARC Discovery Grant application

Appendix 1

Publications list

Journal Articles

- Addicott, F., Thomas, S. D. M., Ogloff, J. R. P., & Daffern, M. D. (2017, March 20). Frequency and characteristics of police involvement in potentially criminal behaviour in disability services. *Research and Practice in Intellectual and Developmental Disabilities*, 1-11. Advance online publication. doi:10.1080/23297018.2016.1266283.
- Boyce, C. A., Trounson, J. S., & Pfeifer, J. E. (2016). Examining the role of connection to culture and community in promoting Indigenous inmate engagement with education in prison. *Advancing Corrections*, 2, 79-90.
- Brown, T., McKenna, B., & Furness, T. (2017, 2 May). Impact of a nurse practitioner role on metabolic monitoring completion and referrals for consumers admitted to the intensive care area of an acute inpatient psychiatric unit. *International Journal of Mental Health Nursing*. Advance online publication. doi:10.1111/inm.12327.
- Came, H., Doole, C., McKenna, B., & McCreanor, T. (2017, June 3). Institutional racism in public health contracting: Findings of a nationwide survey from New Zealand. *Social Science & Medicine*. Advance online publication. <http://www.sciencedirect.com/science/article/pii/S0277953617303623> doi:10.1016/j.socscimed.2017.06.002.
- Furness, T., Hewavasam, J., Barnfield, J., McKenna, B., & Joseph, C. (2017, March 1). Adding an accredited exercise physiologist role to a new model of care at a secure extended care mental health service: a qualitative study. *Journal of Mental Health*. Advance online publication. doi:10.1080/09638237.2017.1294744.
- Furness, T., Maguire, T., Brown, S., & McKenna, B. (2016, 10 December). Perceptions of procedural justice and coercion during community-based mental health crisis: A comparison study among stand-alone police response and co-responding police and mental health clinician response. *Policing*. Advance online publication. doi:10.1093/polic/paw047.
- Klepfisz, G., Daffern, M., & Day, A. (2017). Understanding protective factors for violent reoffending in adults. *Aggression and Violent Behavior*, 32, 80-87. doi: <https://doi.org/10.1016/j.avb.2016.12.001>.
- Louise, S., Fitzpatrick, M., Strauss, C., Rossell, S. L., & Thomas, N. (2017, May 23). Mindfulness- and acceptance-based interventions for psychosis: Our current understanding and a meta-analysis. *Schizophrenia Research*. Advance online publication. doi:10.1016/j.schres.2017.05.023.
- McEvedy, S., Furness, T., & McKenna, B. (2017, June 7). Introduction of a drug-detection dog programme in mental health inpatient units: A mixed-methods study of consumer, staff, and carers' perceptions. *International Journal of Mental Health Nursing*. Advance online publication. doi:10.1111/inm.12335.
- McEvedy, S., Maguire, T., Furness, T., & McKenna, B. (2017). Sensory modulation and trauma-informed-care knowledge transfer and translation in mental health services in Victoria: Evaluation of a statewide train-the-trainer intervention. *Nurse Education in Practice*, 25, 36-42. doi: 10.1016/j.nepr.2017.04.012.
- McEwan, T. E., Bateson, S., & Strand, S. (2017). Improving police risk assessment and management of family violence through a collaboration between law enforcement, forensic mental health and academia. *Journal of Criminological Research, Policy and Practice*, 3(2), 119-131. doi: 10.1108/JCRPP-01-2017-0004.
- McEwan, T. E., Daffern, M., MacKenzie, R. D., & Ogloff, J. R. P. (2017). Risk factors for stalking violence, persistence, and recurrence. *The Journal of Forensic Psychiatry & Psychology*, 28(1), 38-56. doi: 10.1080/14789949.2016.1247188.
- McEwan, T. E., Shea, D., Nazarewicz, J., & Senkans, S. (2017). Re-assessing the link between stalking and intimate partner abuse. *Partner Abuse*, 8(3), 223-250. doi: 10.1891/1946-6560.8.3.223.
- McKenna, B., McEvedy, S., Kelly, K., Long, B., Anderson, J., Dalzell, E., . . . Furness, T. (2017). Association of methamphetamine use and restrictive interventions in an acute adult inpatient mental health unit: A retrospective cohort study. *International Journal of Mental Health Nursing*, 26(1), 49-55. doi: 10.1111/inm.12283.
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Appendix 1

Journal Articles

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Journal articles in press

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- Dunne, A. L., Gilbert, F., & Daffern, M. (in press). Elucidating the relationship between personality disorder and aggression using the DSM-5 dimensional-categorical model for personality disorder. *Psychology of Violence*.
- Dunne, A. L., Gilbert, F., & Daffern, M. (in press). Investigating the relationship between DSM-5 personality disorder domains and facets and aggression in an offender population using the personality inventory for the DSM-5. *The Journal of Personality Disorders*.
- Fröberg, S., & Strand, S. (in press). Police students' perception of intimate partner violence in same-sex relationships. *Partner Abuse*.
- Furness, T., McKenna, B., Maguire, T., & Brown, S. (in press). NPACER. *Policing: A Journal of Policy and Practice*.
- Gilbert, F., & Daffern, M. (in press). Aggressive scripts and violent behaviour: A conceptual framework. *Aggression and Violent Behavior*.
- Maguire, T., Daffern, M., Bowe, S., & McKenna, B. (in press). Predicting aggressive behavior in acute forensic mental health units: A re-examination of the Dynamic Appraisal of Situational Aggression's predictive ability. *International Journal of Mental Health Nursing*.
- McKenna, B. (in press). Further reflections on recovery-oriented mental health practice in a community care unit: A response. *Journal of Forensic Nursing*.
- McKenna, B., McEvedy, S., Maguire, T., Ryan, J., & Furness, T. (in press). Prolonged duration of the use of restrictive interventions in mental health services: The Victorian Department of Health and Human Services Reporting Pilot. *International Journal of Mental Health Nursing*.
- Ogloff, J. R. P., Pfeifer, J. E., Shepherd, S., & Ciorciari, J. (In press). Assessing the mental health, substance abuse, cognitive functioning, and social/emotional well-being needs of Aboriginal prisoners in Australia. *Journal of Correctional Health Care*.
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- Shepherd, S. M., Campbell, R. E., & Ogloff, J. R. P. (in press). The Utility of the HCR-20 in an Australian Sample of Forensic Psychiatric Patients. *Psychiatry, Psychology and Law*.
- Trounson, J. S., & Pfeifer, J. E. (in press). Correctional officer wellbeing: Training challenges and opportunities. *Practice: The New Zealand Corrections Journal*.
- Trounson, J. S., & Pfeifer, J. E. (in press). Correctional officers and workplace adversity: Identifying interpersonal, cognitive & behavioral response tendencies. *Journal of Correctional Health Care*.
- Walvisch, J., & Carroll, A. (in press). Sentencing offenders with personality disorders: A critical analysis of DPP v O'Neill. *Melbourne University Law Review*.

Books and book chapters

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- Daffern, M., Mooney, J., Thomson, K., & Klepfisz, G. (2017). Reporting for the parole board or other release decision makers including mental health review tribunals. In B. S. Brown, E. Bowen & D. Prescott (Eds.), *The forensic psychologist's report writing guide* (pp. 175-187). London: Taylor and Francis.
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- Wong, S. C. P., & Olver, M. E. (2016). Risk reduction treatment of psychopathy and applications to mentally disordered offenders. In K. D. Warburton & S. M. Stahl (Eds.), *Violence in psychiatry* (pp. 323-331). Cambridge: Cambridge University Press.

Appendix 1

Books and book chapters in press

- Carroll, A., & McSherry, B. (in press). Mental health clinicians' standard of care in the era of recovery and rights. In B. Green (Ed.), *Clinical Negligence and Risk in Mental Health*. Radcliffe Medical Publishing.
- Daffern, M., Klepfisz, G., Sweller, T., & Day, A. (in press). Measuring the immediate effects of interventions on offenders. In A. Day, D. Polaschek & C. Hollin (Eds.), *Handbook of correctional psychology*. Wiley.
- Dunne, A. L., & Daffern, M. (in press). Aggression. In V. Zeigler-Hill & T. Shackelford (Eds.), *Encyclopedia of personality and individual differences*. Springer.
- Gilbert, F., Daffern, M., & Anderson, C. (in press). The General Aggression Model and its application to violent offender assessment and treatment. In P. Sturmey (Ed.), *The Wiley handbook of violence and aggression*. Wiley-Blackwell.
- Ogloff, J. R. P., Veal, R. G., Shea, D., & McEwan, T. E. (in press). The role of psychopathy in stalking. In H. Saß & A. R. Felthous (Eds.), *The international handbook of psychopathic disorders and the law*. Wiley.
- Olver, M. E., & Wong, S. C. P. (in press). Offender risk and need assessment: Theory, research, and applications. In D. Polaschek, A. Day & C. Hollin (Eds.), *The Wiley handbook of correctional psychology*. Wiley.
- Serin, R. C., Lloyd, C. D., & Chadwick, N. (in press). Integrating dynamic risk assessment into community supervision practice. In D. Polaschek (Ed.), *The Wiley international handbook of correctional psychology*. Wiley.
- Sturmey, P., McMurrin, M., & Daffern, M. (in press). Care formulation and treatment planning. In A. Day, D. Polaschek & C. Hollin (Eds.), *The Wiley handbook of correctional psychology*.
- Wong, S. C. P., Olver, M. E., & Stockdale, K. C. (in press). Violence reduction treatment of psychopathy. In P. Sturmey (Ed.), *The Wiley handbook of violence and aggression*. Wiley.

Reports

- Armytage, P., & Ogloff, J. R. P. (2017). *Youth justice review and strategy: Meeting needs and reducing offending*. Report prepared for Department of Justice and Regulation (Vic). Melbourne, Australia: Victorian Government. <http://www.justice.vic.gov.au/home/justice+system/youth+justice/youth+justice+review+and+strategy+meeting+needs+and+reducing+offending>
- Centre for Forensic Behavioural Science. (2016). *Final process evaluation report for the Smoke Free Prisons program evaluation*. Melbourne, Victoria: Centre for Forensic Behavioural Science & Swinburne University of Technology.
- Fullam, R. S., Nixon, M., Sellars, M., Norton, J., & Ogloff, J. R. P. (2016). *Evaluation of the Community Integration Program*. Melbourne, Victoria: Forensicare, Centre for Forensic Behavioural Science & Swinburne University of Technology.
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- Maguire, T., & Ryan, J. (2016). *Forensic education for registered nurses Dhulwa Mental Health Unit Canberra*. Melbourne: Victorian Institute of Forensic Mental Health.
- McEwan, T., Shea, D. E., & Ogloff, J. R. P. (2016). *Victoria Police Screening Assessment for Family Violence Risk (VP-SAFvR): Development and Validation*. Report prepared for Victoria Police. Melbourne, Australia.
- McEwan, T. E., Spivak, B., Luebbbers, S., Shea, D., & Ogloff, J. R. P. (2017). *Evaluation of the Victoria Police Screening Assessment for Family Violence Risk (VP-SAFvR)*. Report prepared for Victoria Police. Melbourne, Australia: Centre for Forensic Behavioural Science Swinburne University of Technology.
- McKenna, B., Daffern, M., & Maguire, T. (2016). *Minimum training standards: Preventing and managing clinical aggression including the use of physical restraint*. Melbourne, Australia: The State of Victoria Department of Health and Human Services.
- McKenna, B., Daffern, M., Maguire, T., & Robertson, T. (2016). *A literature review and policy analysis on the management of clinical aggression in Victoria*. Melbourne, Australia: The State of Victoria Department of Health and Human Services.
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- Ogloff, J. R. P., Pfeifer, J. E., & Skues, J. (2016). *Towards an understanding of juries in personal injury litigation in Victoria*. Report prepared for WorkSafe Victoria. Unpublished report.

- Robinson, M., Gonzalez, R., McKenna, B., & Guerin, B. (2016). *A proposed trauma-informed model of care for Youth Justice Secure Services in Victoria*. Report prepared for The State of Victoria Department of Health and Human Services. Melbourne, Australia: Authors.
- Serin, R. C., & Lloyd, C. D. (2017). *Understanding the Risk, Need, and Responsivity (RNR) model and crime desistance perspective and integrating them into correctional practice*. Washington, DC: National Institute of Corrections.
- Smith, M. R., Rojek, J., Lloyd, C. D., & Tillyer, R. (2017). *San Jose Police Department traffic and pedestrian stop study*. El Paso, TX: University of Texas at El Paso Center for Law and Human Behavior.
- Strand, S., Petersson, J., Fröberg, S., & Storey, J. (2016). *Polisens arbete med riskbedömning och riskhantering för partnervåldsrelaterad brottslighet. Implementering och utvärdering av införandet av strukturerade riskbedömningar för partnervåldsrelaterad brottslighet som en arbetsmetod vid polismyndigheterna i Västernorrland och Jämtland under perioden 2011-2014*. Brottsoffermyndigheten, Umeå.
- Tillyer, R., Lloyd, C. D., Smith, M. R., & Rojek, J. (2016). *Limited detention data audit prepared for the San Jose Police Department*. El Paso, TX: University of Texas at El Paso Center for Law and Human Behavior.
- Trounson, J. S., & Deicmanis, J. (2016). *Perceived workplace adversity and officer well-being: Final LASD report*. Melbourne, Australia: Authors.
- Vine, R., & McKenna, B. (2016). *Independent Review of T whiri-M tea: Regional Rehabilitation and Extended Care Service*.
- Wood, E., Milne, M., Pope, K., & McKenna, B. (2016). *Supporting recovery through least restrictive practice at W hi Oranga, Nelson Marlborough DHB*. Auckland: Te Pou o Te Whak ro Nui.
- Yang, M., Pan, Z., Duan, Z., Che, N., Zhang, J., & Li, L. (2016). *Exploration of analytic methods for the home page of in-patients case file in Sichuan Province*. Report prepared for Sichuan Health Information Centre, China.

Appendix 2

Presentations and research translation activities

International peer reviewed conferences

Keynote addresses

McEwan, T. (2016, October). *Stalking: What it is, what it isn't and some ideas about responding effectively*. Keynote address. Hampshire Stalking Conference, Netley, UK.

Ogloff, J. R. P. (2016, November). *Observations and research on youth offending*. Keynote address. Invited address to the South Pacific Council of Youth and Children's Court conference, Melbourne.

Ogloff, J. R. P. (2017, May). *Structured decision-making in parole*. Keynote address. New Zealand Parole Board Conference, Wellington.

Paper presentations

Bateson, S., & McEwan, T. (2016, October). *How a partnership between police and forensic mental health services is trying to change outcomes for victims of family violence*. Paper presented at the Law Enforcement and Public Health (LEPH) 2016 Conference, Amsterdam, The Netherlands.

De Bortoli, L. (2017, June). *The role of family structure and relationships in filicide*. Paper presented at the Addressing Filicide: Third International Conference – Building Bridges of Knowledge to Intervention Models for Combatting Filicide, Prato, Italy.

Higley, C. A., & Lloyd, C. (2017, March). *The 'risk principle' paradox: Exploring which high-risk offenders successfully change during rehabilitation programs*. Paper presented at the American Psychology-Law Society Annual Convention, Seattle, Washington.

Lloyd, C., & Serin, R. (2017, June). *Establishing the construct validity and utility of protective factors using DRAOR*. Paper presented at the International Association of Forensic Mental Health Services Conference, Split, Croatia.

Luebbbers, S., Shepherd, S. M., & Ogloff, J. R. P. (2016, September). *Protective factors and risk: Inverse or mitigation*. Paper presented at the International Congress of Psychology, Yokohama, Japan.

Maguire, T., Daffern, M., Bowe, S., & McKenna, B. (2016, October). *Examining the use of the DASA in mental health settings*. Paper presented at the International Conference on Violence in the Health Sector, Dublin, Ireland.

Maguire, T., Daffern, M., Bowe, S., & McKenna, B. (2016, October). *The impact of the day-to-day risk assessment on preventing inpatient aggression*. Paper presented at the International Conference on Violence in the Health Sector, Dublin, Ireland.

Maguire, T., Ryan, J., & McKenna, B. (2017, June). *Forensic mental health services restrictive intervention benchmarking*. Paper presented at the International Association of Forensic Mental Health Services Conference, Split, Croatia.

McEwan, T., Bateson, S., Petersson, J., Selenius, H., & Strand, S. (2016, October). *Enhancing police responses to family violence: A law enforcement and public health partnership*. Paper presented at the Third International Conference on Law Enforcement and Public Health, Amsterdam, The Netherlands.

McKenna, B. (2017, March). *Pre-court diversion: what is best for New Zealand?*. Paper presented at the Symposia on Non-Adversarial Justice, Auckland University of Technology, New Zealand.

Ogloff, J. R. P. (2016, October). *Enhancing wellbeing and resilience within prisons: A psycho-educational approach for the missing middle*. Paper presented at the 18th International Corrections and Prisons Association Conference, Bucharest.

Ogloff, J. R. P., Daffern, M., Pfeifer, J. E., Skues, J., Trounson, J. S., Connor, J., & Evers, T. (2016, October). *Well-being in contemporary correctional settings: New perspectives and new approaches for prisoners and prison officers*. Paper presented at the Annual Meeting of the International Corrections and Prisons Association (ICPA), Bucharest, Romania.

Ogloff, J. R. P., Roufeil, L., Matthews, R., & Falconer, B. (2016, September). *Identification and management of risk of harm to others*. Paper presented at the 2016 APS Conference, Melbourne, Australia.

Oliva, A., Roach, D., & Owens, R. (2016, October). *Managing the well-being of staff and inmates: An industry based perspective in regard to the promotion of wellbeing and the effective management of research collaborations*. Paper presented at the Annual meeting of the International Corrections and Prisons Association, Bucharest, Romania.

Petersson, J., Strand, S., Storey, J., Selenius, H., & Fröberg, S. (2016, October). *Implementing effective police risk assessment and management for family violence*. Paper presented at the Third International Conference on Law Enforcement and Public Health, Amsterdam, The Netherlands.

Pfeifer, J. E. (2016, October). *Evidence-based practice and evidence-informed practice in community corrections: definitions, debates and potential pathways*. Paper presented at the International Community Corrections Association Conference, Toronto, Canada.

Pfeifer, J. E., Ogloff, J. R. P., & Trounson, J. S. (2016, October). *Technology and prison officer wellbeing: Thinking outside the box*. Paper presented at the Annual meeting of the International Corrections and Prisons Association, Bucharest, Romania.

Quinn, C. (2016, October). *'It helps us heal for real': Forensic consumers feel safe and relaxed with Qigong*. Paper presented at the Australian College of Mental Health Nurses 42nd International Mental Health Nursing Conference, Adelaide, Australia.

Shepherd, S. M. (2016, July). *Close enough is not good enough: Violence risk instruments may be culturally unsafe*. Paper presented at the 4th biennial American Psychological Association Division 45 Society for the Psychological Study of Culture, Ethnicity, and Race Research Conference, Stanford University, Palo Alto, CA, United States of America.

Shepherd, S. M. (2017, June). *Cultural identity, unmet needs in custody and recidivism: An Australian analysis*. Paper presented at the International Association of Forensic Mental Health Services Conference, Split, Croatia.

Shepherd, S. M., Hart, S., Rosenfeld, B., Rivera-Mindt, B., & Barber-Rioja, V. (2017, June). *Cross-cultural issues in forensic assessment: Problems and solutions*. Paper presented at the International Association of Forensic Mental Health Services Conference, Split, Croatia.

Skues, J., Connor, J., Daffern, M., Trounson, J. S., Pfeifer, J. E., & Ogloff, J. R. P. (2016, October). *Identifying the 'Missing Middle' and establishing the need for service provision*. Paper presented at the Annual Meeting of the International Corrections and Prisons Association (ICPA), Bucharest, Romania.

Trounson, J. S., Ogloff, J. R. P., & Pfeifer, J. E. (2016, October). *The development of the Advanced Mental Strength and Conditioning (AMSAC) training program for correctional officers*. Paper presented at the Annual meeting of the International Corrections and Prisons Association, Bucharest, Romania.

Trounson, J. S., Pfeifer, J. E., Skues, J., & Ogloff, J. R. P. (2016, October). *How an officer responds to adversity matters: Informing preventative training programs*. Paper presented at the Annual meeting of the International Corrections and Prisons Association, Bucharest, Romania.

Wiki, N. R. N., McKenna, B., Cooper, E., Wharewera-Mika, J., Cavney, J., & Field, T. R. N. (2017, June). *Description of an indigenous forensic mental health secure rehabilitation service: A case study of Te Pāpākāinga o Tāne Whakapiripiri*. Paper presented at the International Association of Forensic Mental Health Services Conference, Split, Croatia.

Wiki, N. R. N., McKenna, B., Cooper, E., Wharewera-Mika, J., Cavney, J., & Field, T. R. N. (2017, June). *The face validity of the DUNDRUM-3 and DUNDRUM-4 structured clinical judgment instruments: A Māori Participatory Action Research perspective*. Paper presented at the International Association of Forensic Mental Health Services Conference, Split, Croatia.

Wood, M., Strand, S., Spivak, B., & McEwan, T. E. (2017, February). *Evidence-based risk assessment to improve policing practice in family violence in Victoria*. Paper presented at the Asia Pacific Association of Threat Assessment Professionals (APATAP) Annual Conference, Singapore.

National peer reviewed conferences

Keynote addresses

Daffern, M. (2016, August). *Treatment outcomes for those who are violent towards family members*. Keynote address. Association of Family and Conciliation Courts AFCC Australian Chapter, Third Annual Conference, Brisbane, QLD.

McKenna, B. (2017, May). *When the rubber hits the road: Working together when restrictive interventions are enduring*. Keynote address. Towards Elimination of Restrictive Practices 11th National Forum 'Working Together culture, a culture of care', Perth, Australia.

Ogloff, J. R. P. (2016, July). *The challenge of policing people with mental illness*. Keynote address. Griffith University Violence Research and Prevention Program conference, Brisbane.

Ogloff, J. R. P. (2016, December). *Presenting risk assessment evidence to the court*. Keynote address. Court Assessment and Prosecution Services training summit, Melbourne.

Ogloff, J. R. P. (2016, July). *Understanding psychological and psychiatric reports*. Keynote address. Council of Magistrates conference, Melbourne.

Ogloff, J. R. P. (2017, April). *Expert Evidence - Fitness to Plead*. Keynote address. Commonwealth Director of Public Prosecutions & ASIC conference, Melbourne.

Ogloff, J. R. P. (2017, March). *Youth crime and violence*. Keynote address. Meeting of the Australian Academy of Forensic Sciences, Melbourne.

Paper presentations

Carroll, A. (2016, October). *Getting away with it? Family violence, mental disorder and the courts*. Paper presented at the The Bouverie Centre 14th Annual Mini-conference 'Different Elephants, Same Room', Brunswick, Australia.

Carroll, A. (2016, October). *Recovery and risk: a clash of values?* Paper presented at the National Forensic Mental Health Conference, Sydney, Australia.

Davis, M. R. (2016, December). *Behavioural analysis: Detecting deception*. Paper presented at the Freedom of Information Conference 2016, Leo Cussen Centre for Law, Melbourne, Australia.

Davis, M. R. (2016, November). *Getting to the point of piquerism*. Paper presented at the 36th Annual Congress of the Australian and New Zealand Association of Psychiatry, Psychology and Law (ANZAPPL), Auckland, New Zealand.

Maguire, T., Daffern, M., Bowe, S., & McKenna, B. (2016, August). *Examining the use of the Dynamic Appraisal of Situational Aggression (DASA)*. Paper presented at the Victorian Collaborative Mental Health Nursing Conference, Moonee Ponds, Melbourne.

Maguire, T., & Ryan, J. (2016, August). *Safewards and EssenCES*. Paper presented at the Victorian Collaborative Mental Health Nursing Conference, Moonee Ponds, Melbourne.

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Maguire, T., Ryan, J., Fullam, R. S., & McKenna, B. (2017, May). *Safewards: Making a difference in forensic mental health*. Paper presented at the Towards the Elimination of Restrictive Practices, Perth, Australia.

McEwan, T. E., Spivak, B., Wood, M., Letic, G., & Oglloff, J. R. P. (2016, October). *Implementing evidence-based family violence risk assessment in a police setting: The challenges of high volume, high risk, and rapid change*. Paper presented at the Australian and New Zealand Association of Psychiatry, Psychology and Law (ANZAPPL) Annual Congress, Auckland, New Zealand.

McKenna, B., McEvedy, S., Maguire, T., & Furness, T. (2016, November). *Reducing the duration of use of restrictive interventions in mental health services: The value of targeted benchmarks*. Paper presented at the 'The Perils of Belief', 36th ANZAPPL Annual Congress, Auckland, New Zealand.

Penovic, T., Trounson, J. S., & Munro-Harrison, E. (2017, February). *Students and inmates: Practical internships behind bars*. Paper presented at the 7th Annual Human Rights Tertiary Teachers' Workshop, Melbourne, Australia.

Pfeifer, J. E., & Conway, S. (2016, August). *Gaming and technology as a platform for enhancing offender wellbeing*. Paper presented at the Prisons 2016 Conference, Sydney, Australia.

Quinn, C. (2016, August). *Feeling safe, feeling relaxed: Qigong, a brief intervention with positive consumer outcomes*. Paper presented at the Victorian Collaborative Mental Health Nursing Conference, Melbourne, Australia.

Senkans, S., McEwan, T. E., & Oglloff, J. R. P. (2016, July). *Intimate partner violence and post-relationship stalking perpetrators' cognition as Aggressive Relational Schemas (ARMS)*. Paper presented at the International Society for Research on Aggression (ISRA) 2016 World Meeting, Sydney, Australia.

Shepherd, S. M. (2016, November). *Assessing the needs of Indigenous people in custody: Looking beyond law and order*. Paper presented at the Sydney Ideas, Sydney, Australia.

Shepherd, S. M. (2016, October). *Assessing the risk and needs of Indigenous people in custody*. Paper presented at the Correctional Services Healthcare Summit, Brisbane, Australia.

Simmons, M., & McEwan, T. (2017, June). *The Abusive Behaviour by Children-Index: A novel approach to the measurement of child-to-parent abuse*. Paper presented at the Swinburne Celebrates Research Conference, Hawthorn, VIC.

Spivak, B., & Spencer, P. (2017, April). *Examining magistrates' perceptions and use of judicial supervision*. Paper presented at the Second International Conference on Non-Adversarial Justice, Sydney, Australia.

Sullivan, D. (2016, October). *The future of solitary confinement is looking lonely*. Paper presented at the Justice Health & Forensic Network Conference, Sydney, Australia.

Sullivan, D. (2016, November). *How can police & mental health services collaborate on violent extremism?* Paper presented at the ANZAPPL Binational Conference, Auckland, New Zealand.

Presentations to professional and clinical groups

Brown, P. (2017). *Advocating on the edge in public service: Three quarters of a century of the Children's Court Clinic of Victoria*. Eighth Winston S. Rickards Memorial Oration. Melbourne, Australia.

Carroll, A. (2016, November). *Risk assessment and decision-making*. Training. Delivered to Victorian Veterans Counselling Service. Melbourne, Australia.

Carroll, A. (2016, December). *What is forensic psychology?* Talk. Delivered to Royal Australian and New Zealand College of Psychiatrists staff meeting/training day. Melbourne, Australia.

Carroll, A. (2017, May). *Causal links in forensic psychology*. Professional workshop. Delivered to Conference of Victorian RANZCP Faculty of Forensic Psychiatry. Melbourne.

Carroll, A. (2017, June). *Guest lecture*. Delivered to Forensicare Victorian Certificate of Advanced Training in Forensic Psychiatry Program. Melbourne, Australia.

Carroll, A. (2017, March). *Pragmatics of fitness to stand trial*. Invited lecture. Delivered to ANZAPPL (ACT) meeting. Canberra, Australia.

Carroll, A. (2017, May). *Recovery and risk*. Invited lecture to magistrates. Delivered to Melbourne Magistrates' Court. Melbourne, Australia.

Carroll, A. (2017, July). *Sentencing and mental disorder*. Lecture. Delivered to Monash University postgraduate course Psychiatry, Psychology and the Law. Clayton, Australia.

Carroll, A., & Bridges, B. (2017, June). *The clash: Recovery and risk management workshop*. Presentation for Our Curious Minds. Melbourne, Australia.

Carroll, A., & Bridges, B. (2017, March). *Let's get real: Risk assessment workshop*. Workshop. Delivered to Federation University. Ballarat, Australia.

Davis, M. R. (2016, October). *Conceptual issues in the identification of sexual sadism*. Invited lecture delivered as part of the MSc in Investigative and Forensic Psychology. Delivered to Centre for Investigative Psychology, University of Liverpool. Liverpool, United Kingdom.

Davis, M. R. (2016, September). *The forensic assessment of sexual deviance*. Full-day training workshop. Delivered to Australian and New Zealand Association for the Treatment of Sexual Abuse (ANZATSA). Melbourne, Australia.

Davis, M. R. (2016, October). *From crime scene to consulting room: Inferences in serial crime*. Professional development session. Delivered to Behavioural Investigative Advisers Unit, Crime Operational Support, National Crime Agency. Sunningdale, United Kingdom.

Davis, M. R. (2016, October). *Getting to the point of piquerism*. Professional development session. Delivered to Behavioural Investigative Advisers Unit, Crime Operational Support, National Crime Agency. Sunningdale, United Kingdom.

Davis, M. R. (2016, December). *The HCR-20 Violence Risk Assessment Scheme*. Two-day training workshop. Delivered to staff from Corrections Victoria Offending Behaviour Programs. Melbourne, Australia.

- Davis, M. R. (2016, October). *The psychological autopsy of equivocal deaths*. Invited lecture delivered as part of the MSc in Investigative and Forensic Psychology. Delivered to Centre for Investigative Psychology, University of Liverpool. Liverpool, United Kingdom.
- Davis, M. R. (2016, December). *The Spousal Assault Risk Assessment Guide (SARA)*. Full-day training workshop. Delivered to staff from Corrections Victoria Offending Programs. Melbourne, Australia.
- Dunne, A. L., Gilbert, F., & Daffern, M. (2016, October). *Elucidating the relationship between personality disorder traits and aggression using the new DSM-5 dimensional-categorical model for personality disorder*. Seminar presentation. Delivered to Forensic Clinical Specialist Program. Melbourne, Australia.
- Dunne, A. L., Gilbert, F., & Daffern, M. (2016, October). *Investigating the relationship between DSM-5 personality disorder domains and facets and aggression in an offender population using the Personality Inventory for the DSM-5*. Seminar Presentation. Delivered to Forensic Clinical Specialist Program. Melbourne, Australia.
- Henshaw, M., Ogloff, J. R. P., & Clough, J. A. (2017, April). *Are online child exploitation material offenders different from other types of sexual offenders?* Presentation. Delivered to Forensic Research Dissemination Seminar. Melbourne, Australia.
- Lloyd, C. (2017, June). *Is a 'next generation' of community corrections on the horizon? Preliminary findings on dynamic risk, integrating strengths, and community supervision through a lens of crime desistance*. Presentation. Delivered to Corrections Victoria Research Seminar Series. Victoria, Australia.
- Maguire, T., & Ryan, J. (2016, October). *Introducing the FERN manual and Safewards*. Two-day workshop. Delivered to Canberra Forensic Mental Health Service. Canberra, Australia.
- Maguire, T., & Ryan, J. (2016, November). *Safewards*. Two two-day workshops. Delivered to Alice Springs Mental Health Service. Alice Springs, Australia.
- Maguire, T., Ryan, J., Fullam, R. S., & McKenna, B. (2017, April). *Evaluating the introduction of the Safewards model to Canning unit*. Presentation. Delivered to Forensic research dissertation seminar. Melbourne, Australia.
- McEwan, T. (2016, July). *Thinking broadly when responding to family violence: The example of mental illness*. Presentation. Delivered to Relationships Australia (South Australia) Focus on Family Safety Forum. South Australia.
- Munro-Harrison, E., Trounson, J. S., & Ironfield, N. (2017, March). *Indigenous youth mental health*. Workshop. Delivered to Youth Advisory Council of Victoria. Melbourne, Australia.
- Ogloff, J. R. P. (2016, September). *Mental health issues in the criminal justice system: Identifying problems and generating solutions*. Delivered to Deakin University School of Psychological Sciences. Melbourne, Australia.
- Ogloff, J. R. P. (2016, September). *The psychology of the civil jury in workplace injury cases*. Delivered to Worksafe. Melbourne, Australia.
- Ogloff, J. R. P. (2017, May). *20 years of online child exploitation offending: What we've learnt*. Meeting with staff. Delivered to New Zealand Corrections. Wellington, New Zealand.
- Ogloff, J. R. P. (2017, May). *Understanding and assessing stalking as a problem behaviour*. Meeting with staff. Delivered to New Zealand Corrections. Wellington, New Zealand.
- Senkans, S., McEwan, T. E., & Ogloff, J. R. P. (2016, November). *Relationship cognition in intimate partner violence and post-relationship stalking*. Presentation. Delivered to Forensic Clinical Specialist Program, Forensicare. Melbourne, Australia.
- Serin, R., & Lloyd, C. (2016, July). *Using dynamic risk assessment to refine case planning and risk management*. Training. Delivered to Administrative Office of the U.S. Courts, Federal Probation Division. San Antonio, TX.
- Serin, R., & Lloyd, C. (2016, August). *Using dynamic risk assessment to refine case planning and risk management*. Training. Delivered to Administrative Office of the U.S. Courts, Federal Probation Division. San Diego, CA.
- Serin, R., & Lloyd, C. (2016, September). *Using dynamic risk assessment to refine case planning and risk management*. Training. Delivered to Administrative Office of the U.S. Courts, Federal Probation Division. Omaha, NE.
- Shepherd, S. M. (2016, October). *Addressing the gaps in prisoner mental health, cognitive functioning, and social and emotional well-being*. Panel member. Delivered to 2016 Correctional Services Summit. Brisbane, Australia.
- Shepherd, S. M. (2016, November). *Life in academia: Insider tips from a Fulbright Scholar*. Invited presentation. Delivered to University of Sydney Student Services, University of Sydney. Sydney, Australia.
- Shepherd, S. M. (2017, April). *Cross-cultural Training: 'Please explain'*. Workshop. Delivered to the Master of Forensic Behavioural Science. Centre for Forensic Behavioural Science, Melbourne, Australia.
- Shepherd, S. M. (2017, May). *Risk assessment and culture: The current state of the field*. Development session. Delivered to Forensicare. Centre for Forensic Behavioural Science, Melbourne, Australia.
- Silcox, B. J. (2016, December). *An evaluation of the usefulness of a sensory trolley and the influence on male patients' wellbeing in a forensic mental health setting*. Presentation. Delivered to Forensic Research Dissemination Seminar. Melbourne, Australia.
- Silcox, B. J. (2016, October). *An evaluation of the usefulness of a sensory trolley and the influence on male patients' wellbeing in a forensic mental health setting*. Delivered to 3rd Forensic OT Forum. Adelaide, Australia.

Appendix 2

Sivasubramaniam, D. (2016, July). *Understanding and managing hindsight bias*. Presentation. Delivered to Judicial College of Victoria. Lancefield, Australia.

Sukabdi, Z. (2016, September). *Pencegahan dan Deradikalisasi terhadap Pelaku Terorisme di Indonesia*. Presentation. Delivered to Indonesian National Army Forces. Indonesia.

Sukabdi, Z. (2017, April). *Asesmen Resiko terhadap Pelaku Terorisme di Indonesia*. Presentation. Delivered to Indonesian National Police. Jakarta, Indonesia.

Sukabdi, Z. (2017, April). *MIKRA-T: Asesmen deradikalisasi dan pembinaan pelaku terorisme*. Presentation Delivered to Indonesian Presidential Palace. Jakarta, Indonesia.

Sukabdi, Z. (2017, April). *Motivation-Ideology-Capability Risk Assessment and Treatment Management for preventing recidivism (MIKRA-T)*. Presentation Delivered to Indonesian Presidential Palace. Jakarta, Indonesia.

Sullivan, D. (2016, October). *Ethical issues for lawyers representing clients with a mental disability or cognitive impairment*. Presentation. Delivered to Criminal Connections, Victoria Legal Aid. Melbourne, Australia.

Sullivan, D. (2016, September). *Fitness for interview*. Presentation. Delivered to RCPA Faculty of Clinical Forensic Medicine. Sydney, Australia.

Sullivan, D. (2016, September). *The internet and sexual offending*. Presentation. Delivered to Adolescent Roundtable, ANZATSA and CEASE. Melbourne, Australia.

Wong, S. C. P. (2016, November). *Training on the use of the Violence Risk Scale and the Violence Reduction Programme 5-day workshop*. Delivered to Nebraska Department of Correctional Service. Lincoln, Nebraska, USA.

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