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This Annual Research Report is available at: www.forensicare.vic.gov.au

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It is my pleasure to present the 2015/2016 Annual Research Report for the Victorian Institute of Forensic Mental Health (Forensicare) and the Centre for Forensic Behavioural Science, Swinburne University of Technology. As a perusal of the report will show, this has been a very busy period for centre staff and affiliates. This report marks the CFBS’s second full year at Swinburne University of Technology and I am pleased to report that the transition has gone very well and the CFBS is continuing to flourish in its new academic home. As the report reflects, Forensicare’s clinical activities continue to expand and diversity at a rapid rate, which has led to a rather dramatic increase in our evaluation work. Similarly, our contract research and evaluation work continues to expand.

Very sadly, Professor Don Iverson, who was the Executive Dean of Health, Arts, and Design passed away following a brave battle with cancer. Professor Iverson was instrumental in the establishment of the CFBS at Swinburne University of Technology and he served as the Chair of the Forensicare Research Committee, a sub-committee of the Forensicare Board. We are grateful for Professor Iverson’s guidance and support at a critical juncture in the development of the CFBS and Forensicare’s research program.

A highlight of the year was the conference, “Young People and the Law: International Approaches to Care, Corrections and Intervention,” that the CFBS ran in Prato, Italy. More than 100 people from Australia, New Zealand, Asia, Europe, the UK and North America attended the conference. We also hosted a range of colloquia and seminars, culminating in Professor Paul Mullen’s public lecture “A life of madness and murder” in November, 2015 that attracted almost 500 people.

Dr. Troy McEwan was promoted from Lecturer to Senior Lecturer in Clinical Forensic Psychology. This is in recognition of her growing prominence as a researcher, focussing on the problem behaviour field, primarily in the areas of stalking and domestic violence.

Dr. Stephane Shepherd, a research fellow and lecturer with the CFBS, commenced his Fulbright Fellowship this year, working at the University of Nebraska and the University of California – Los Angeles in the area of Aboriginal justice. In addition, he was awarded the Christopher Webster Young Scholar Award from the International Association of Forensic Mental Health Services. We look forward to his return in early 2017.

The CFBS continued its success in obtaining research and contract funding. We have reached a record of 57 peer reviewed article publications, one book, and nine book chapters this year (not to mention 17 articles and chapters in press). Core CFBS staff presented 22 keynote addresses at a range of national and international conferences.

Importantly, Forensicare has continued to meet the aims and objectives of the 2015–2017 strategic research plan through the most able efforts of Dr. Rachael Fullam. Finally, as Director, I am grateful to the CFBS staff and students for their boundless energy and good work, and to Forensicare and Swinburne University of Technology for their enduring support for what we do. Finally, the CFBS and my office could not function without the capable assistance of Brett McIvor and Maree Stanford.
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 of 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.

Within Forensicare ... there is a critical nexus between science and practice – with each informing the other to ensure excellence and evidence-based practice in our service.
Forensicare and CFBS organisational arrangements

- **Dean, Health Sciences**
  Swinburne University of Technology

- **Director, Centre for Forensic Behavioural Science**
  and Director of Research, Forensicare
  Professor James Ogloff

- **Centre Coordinator**
  Brett McIvor

- **Executive Assistant**
  Maree Stanford

- **Post Graduate Forensic Psychology**
  Prof Michael Daffern

- **Forensic Behavioural Science Program**
  Dr Troy McEwan

- **Research Lead and Development Officer**
  Dr Rachael Fullam

- **Academic Staff**
  Dr Kylie Thomson
  Dr Stefan Luebbers
  Level C (vacant)

- **Adjunct Staff**
  Professors
  A/Professors
  Research Fellows
  Teaching Fellows

- **Course Administrator**

- **Research Fellows**

- **HDR Students**

- **Postgraduate Course Students**

Swinburne University  Centre for Forensic Behavioural Science

Research program

Forensicare and CFBS organisational arrangements

- **Advisory Board**

- **Research Committee**
  Formal committee of the Board

- **Operational Research Committee**

- **Research Coordinating Committee**

- **Board**

- **CEO**

- **Clinical Governance**

- **Clinical Services**

- **Forensicare**
  Research Governance
  Clinical Service Management

Provides governance reports to
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 three 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 Operational Research Committee receives reports from the Research Coordinating Committee regarding approved/non-approved research proposals and project progress. The Operational Research Committee provides biannual reports to the Research Committee. The key responsibilities of the ORC include:

• 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.

The Research Coordinating Committee acts as the main gateway for researchers wishing to gain operational approval to conduct research involving Forensicare staff, patients or resources. The RCC 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 RCC monitors the receipt of ethical approval for each operationally approved study, and reviews the progress of each approved project against their specified milestones. The Research Coordinating Committee provides reports to the ORC prior to each quarterly meeting.
Research program

2015–2016 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
Chief Psychologist

Ms Marissa Davidson-Blue
Chief Occupational Therapist

Ms Jo Ryan
Director of Nursing

Mr Grant Burkitt
Senior Social Worker

Ms Donna Matthews
Consumer Consultant

Dr Rachael Fullam
Research Lead and Development Officer

Dr Doug Bell (ex officio)
Assistant Clinical Director (Prison Operations)

Dr Mark Ryan (ex officio)
Assistant Clinical Director (Inpatient Services)

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.
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 15 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, CFBS)
- **Professor Michael Daffern** (Professor, CFBS)
- **Dr Rachael Fullam** (Research Lead and Development Officer, Forensicare, and Adjunct Research Fellow, CFBS)
- **Dr Troy McEwan** (Senior Lecturer, CFBS)
- **Dr Stefan Luebbers** (Lecturer, CFBS)
- **Dr Kylie Thomson** (Senior Lecturer, CFBS)
- **Ms Tessa Maguire** (Clinical Nurse Consultant, Forensicare, and Adjunct Research Fellow, CFBS)

**CFBS Research Fellows**

- **Dr Lilian de Bortoli** (Post Doctoral Research Fellow)
- **Dr Stephane Shepherd** (Post Doctoral Research Fellow)
- **Dr Dan Shea** (Post Doctoral Research Fellow)
- **Dr Lauren Ducat** (Post Doctoral Research Fellow)
- **Dr Margaret Nixon** (Post Doctoral Research Fellow)
- **Dr Justin Trounson** (Post Doctoral Research Fellow)
- **Dr Benjamin Spivak** (Post Doctoral Research Fellow)

**Associate Members**

- **Associate Professor Jeffrey Pfeifer** (Department Chair, Psychological Sciences)
- **Dr Jennifer Beaudry** (Senior Lecturer, Psychological Sciences)
- **Associate Professor Anne Knowles** (Psychological Sciences)
- **Dr Diane Sivasubramanium** (Senior Lecturer, 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 Rosemary Purcell (Oxygen Research Centre, University of Melbourne)
- Associate Professor Suzanne Strand (Örebro University)
- Associate Professor Pat Brown (Director, Children’s Court Clinic)
- Associate Professor Andrew Carroll (Forensicare)

**Adjunct Research Fellows**

- Dr Michael Davis (Private Practice)
- Dr Danny Sullivan (Forensicare)

**Adjunct Clinical Associates**

- Dr Aleksandra Belofastov (Manager and Principal Psychologist, Mobile Forensic Mental Health Service, Forensicare)
- Dr Rachel Campbell (Senior Psychologist, Forensicare)
- Dr Cristina Cavezza (Senior Psychologist, Forensicare)
- Dr Jennifer McCarthy (Manager and Principal Psychologist, Problem Behaviour Program, Forensicare)
- Dr Dion Gee (Principal Consultant Psychologist, Forensicare)
- Dr Chris Drake (Senior Psychologist, Forensicare)
- Dr Chris Quinn (Clinical Nurse Consultant, Forensicare)
- Dr Sophie Reeves (Senior Psychologist, Forensicare)
- Dr Gregg Shinkfield (Senior Psychologist, Forensicare)
- Dr Karla Lopez (Senior Forensic Psychologist, Victoria Police)
- Dr Lisa Warren (Clinical and Forensic Psychologist)
- Mr David Willshire (Principal Consultant Psychologist)
- Ms Anthea Lemphers (Chief Psychologist, Forensicare)
- Dr Janet Ruffles (Lawyer, Forensicare)

**Adjunct Teaching Fellows**

- Detective Senior Sgt Dr Deb Bennett (Consultant Clinical Forensic Psychologist, Victoria Police)
- Dr Kate Roberts (Psychiatrist, Forensicare)
- Dr Margaret Cutajar (Psychologist, Forensicare)
- Dr Joel Godfredson (Clinical and Forensic Psychologist, Forensicare)
- Dr Sam Calvin (Consultant Psychiatrist, Forensicare)
- Dr Lisa Forrester (Psychologist, Forensicare)
- Dr Flora Gilbert (Provisional Psychologist, Forensicare)
Centre for Forensic Behavioural Science

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 courses will 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. 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.

All 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 (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 will provide 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 will 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 will enable 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 will gain knowledge of fundamental research methods in the process of conducting their own independent research project.

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.

Post-Graduate Certificate in Violence Risk Assessment and Management

The Graduate Certificate in Violence 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). To complete the certificate, students will complete a skills workshop to enable them to develop skills in administering and interpreting violence risk assessment measures.
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
Chair: 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 behaviour.

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.

Associated staff Faculty and Research Fellows:
Associate Professor Andrew Carroll
Ms. Tessa Maguire
Dr. Troy McEwan
Professor James Ogloff
Dr. Stephane Shepherd
Complex criminal behaviour

*Chair: 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/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.

**Associated staff Faculty and Research Fellows:**
- Professor Michael Daffern
- Dr. Lauren Ducat
- Dr. Daniel Shea
- Emeritus Professor Paul Mullen
- Professor James Ogloff

Forensic mental health

*Chair: 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

Chair: Dr. Jennifer Beaudry

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 focuses 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:
- Dr. Diane Sivasubramaniam
- Associate Professor Jeffrey Pfeifer
- Professor James Ogloff
- Dr. Stephane Shepherd

The effects of victimisation

Chair: 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 focuses 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 Bortoli
- Emeritus Professor Paul Mullen
- Ms. Margaret Nixon
- Professor James Ogloff
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.

<table>
<thead>
<tr>
<th>Forensicare strategic plan goals and outcomes</th>
<th>Key research outcome area</th>
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</table>
| **Greater accessibility to services**         | • Evaluating existing clinical programs and interventions.  
| Evidence based forensic mental health services are delivered to a wide range of consumers in the forensic mental health area. | • Dissemination of Research findings. |
| **Innovation in everything that we do**       | • Evaluating new services and novel clinical programs/interventions.  
| Our services are based on best evidence and deliver contemporary best practice to our consumers and stakeholders. | • Determinants of health and health outcomes.  
| **Meet new challenges and drive change**     | • Research Leadership, collaboration and Governance.  
| Forensicare participates in the ongoing development of mental health services. | • Research capacity.  
| **Outstanding organisational performance**    | • Sustainable research program. |
| Forensicare is acknowledged as an effective, innovative service that is accountable, transparent and supports safety and continuous improvement. |
The objectives of each outcome area are outlined below. Specific strategies to achieve each outcome are outlined in the full strategic plan. See Appendix 1.

<table>
<thead>
<tr>
<th>Key research outcome area</th>
<th>Objective</th>
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<tbody>
<tr>
<td>1. Evaluating existing clinical programs and interventions</td>
<td>• To evaluate the effectiveness of clinical programs and interventions, focusing on clinical, person-centred and criminogenic recovery.</td>
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<td></td>
<td>• To evaluate the efficiency of clinical programs and interventions, focusing on activity and sustainability.</td>
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<td></td>
<td>• To support evidence-based practice and continuous improvement of clinical programs and interventions.</td>
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<td>2. Evaluating new services and novel clinical programs/interventions</td>
<td>• To embed an evaluation framework in each new service/intervention.</td>
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<td></td>
<td>• To support prospective evaluation planning for new services.</td>
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<td></td>
<td>• To support innovation in treatment.</td>
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<td></td>
<td>• To investigate and provide novel interventions for complex disorders and behaviours related to mental illness and offending behaviour.</td>
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<td></td>
<td>• To investigate mechanisms of providing a safe and effective therapeutic environment.</td>
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<tr>
<td></td>
<td>•➢To investigate mechanisms of providing a safe and effective therapeutic environment.</td>
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<td></td>
<td>•➢To support recovery.</td>
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<tr>
<td>3. Determinants of health and health outcomes</td>
<td>• To investigate the determinants of health in Forensicare patients/clients.</td>
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<td></td>
<td>• To improve mechanisms to identify health problems.</td>
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<td>• To identify and measure changes in health outcomes.</td>
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<td>• To improve health outcomes in our population.</td>
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<td>4. Research leadership, collaboration and governance</td>
<td>• To provide oversight and guidance for research activities.</td>
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<td>• To provide research leadership across key disciplines.</td>
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<td>• To set priorities for research.</td>
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<td>• To facilitate the initiation and completion of high calibre evaluation and research activities that link in to organisational priorities.</td>
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<td></td>
<td>• To ensure that all research and evaluation activities are compliant with current research governance and ethical requirements.</td>
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<tr>
<td>5. Research capacity</td>
<td>• To increase the capacity of the Forensicare workforce to engage in research and evaluation.</td>
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<tr>
<td>6. Research translation</td>
<td>• To communicate research to a range of key stakeholders using a variety of methods.</td>
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<td>• To ensure that research evidence is translated into clinical practice.</td>
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<td></td>
<td>• To utilise research evidence to influence organisational, state, and federal policy development, service delivery and resource allocation.</td>
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<td></td>
<td>• To establish Forensicare as an innovator in forensic mental health care provision.</td>
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2015–2016 Research directions

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

**Forensic mental health**
- Enhancing wellbeing and resilience within prisons: A psycho-educational approach for the missing middle
- Aboriginal prisoners with cognitive impairment – Is this the highest risk group?
- Evaluation of the Mobile Forensic Mental Health Service
- A time and motion study of the Forensicare prison in-reach nurse practitioner role
- Evaluation of the Community Integration Program
- Evaluation of the breathe easy smoke free policy
- Evaluation of a new forensic mental health operating model: The Ravenhall Prison project
- Psychological distress: Identifying and treating distress among incarcerated offenders.
- Co-occurring mental disorders and behavioural disturbances among prisoners
- Association between dual diagnosis and offending in a forensic psychiatric population. Identification of factors that reduce the likelihood of offending
- The identification and management of prisoners with mental illnesses in Victoria
- Measuring the progress and outcome of patients at Thomas Embling Hospital
- Smoking as an occupation: Occupational therapists’ perspectives
- Enhancing wellbeing and resilience within prisons: A psycho-educational approach for correctional officers
- Perceived workplace adversity and the psychological wellbeing of correctional officers: Examining the impacts and implications.
- Development and evaluation of a psychometric questionnaire to assess forensic mental health nurses’ practice competencies.
- Perceptions of remorse in forensic patients and forensic mental health professionals
- Social work service models for women in forensic mental health systems
- Evaluating the introduction of the Safewards model and interventions to a medium to long-term forensic mental health unit
- Exploring positive affect for forensic mental health service users using a Qigong intervention.

**Aggression and violence**
- The predictive validity of the Historical-Clinical-Risk Management 20 (Version 3) and the Violence Risk Appraisal Guide (Revised) in prison and community settings
- Youth intimate partner violence in an Australian sample
- Elucidating the relationship between personality disorder traits and aggression: A way forward using the General Aggression Model and a dimensional-categorical model for personality disorder diagnosis
- Beyond prediction: A prospective validation study of a clinical decision making application of the Dynamic Appraisal of Situational Aggression
- Psychosis and violence: Adverse outcomes and effective intervention
- Developing an understanding of the General Aggression Model’s knowledge structure, aggressive script rehearsal, to inform intervention strategies
- Violent offenders’ treatment change in dynamic risk and protective factors: Associations with violent recidivism
- Investigating a group treatment for violent offenders with aggressive scripts
- Understanding children who abuse: What constitutes child-to-parent violence and why does it occur?
- Enhancing risk assessment and nursing interventions to prevent and reduce violence and the use of restrictive interventions in forensic mental health units
- Assessing change in dynamic risk factors in male and female forensic psychiatric inpatients: Relationship with psychopathy and violent recidivism.
Complex criminal behaviour
• The socio-demographic, personal history and offending characteristics of online child pornography offenders
• Enhancing police responses to family violence by improving risk assessment and management
• Youth intimate partner violence in an Australian Sample
• Family violence risk assessment and risk management
• Consequences of intimate partner violence: physical health, psychological health and service utilisation in victims and perpetrators
• A predictor of internet sex offending: Does desistence from contact sex offending result in internet sex offending?
• The impact of interpersonal style and the therapeutic alliance in sexual offender treatment
• Fire targets and the arson action systems
• Wrinkles in sexual behaviour: What is the risk of sexual abuse in an aged population?
• Relationship cognition in intimate partner violence and stalking
• An analysis of offence paralleling behaviour in a custody-based sex offender treatment program: Can this behaviour be used to predict risk of reoffending?
• Trauma and criminal offending in culturally and linguistically diverse populations.
• Motivation-ideology-capability risk assessment and treatment management for preventing ideology-based terrorism recidivism in Indonesia
• Stalking Attitudes Questionnaire: Factor structure, validation, and reliability
• Measuring stalking behaviour: The reliability and validity of the Stalking Tactics Scales
• Does desistence from contact sexual offending increase the likelihood of internet sexual offending: a comparison of group membership and treatment outcomes among three groups of sexual offenders?

Psychology and law
• Law enforcement decision-making in stressful, ambiguous and potentially violent situations
• Presentence reports and sentencing comments: An examination of expert reports in sentencing decisions
• The role of procedural justice reasoning in the reintegration of sexual offenders into the community
• Improving observers’ evaluations of eyewitness evidence through expert testimony
• Asking the right questions: Examining the utility of fact based directions using a simulated trial paradigm
• Assessing fitness to stand trial in Australia and New Zealand.

Victimisation and its effects
• Assessing the health and socioeconomic burden of child sex abuse
• The long-term consequences of child sexual abuse: Exploring victim to perpetrator and victim to re-victim trajectories
• Intellectual disability, criminal offending and victimisation
• Filicide in Australia: Comparing perpetrator mental illness, substance misuse and suicide for male and female offenders.
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 2012–2016 ($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 410 participants was completed in May 2016.
• Follow-up data collection is continuing. Rates of three-month follow-up are currently over 75%.

2015–2016 project outputs

Asking the right questions: Improving juror comprehension of instructions
Australian Research Council Linkage Grant 2011–2014 ($230,444)
James Ogloff, Jonathan Clough & Rudy Montealeone

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, 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 is expected to begin in the last quarter of 2016.
Enhancing wellbeing and resilience within prisons: A psycho-educational approach for the missing middle
Australian Research Council Linkage Grant 2014–2017 ($778,000)
James Ogloff, Michael Daffern, Jeffrey Pfeifer, Jason Skues, Alfie Oliva, Rachel Ownes, Dennis Roach (G4S)

Rationale and aims:
• Many prisoners experience mental illness and psychological distress, and in some studies these symptoms increase the risk of reoffending.
• Prison officers also experience high levels of anxiety and distress, which can have 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 – Quantitative examination of the wellbeing of prison officers at Port Phillip Prison.
• Research Phase 2 – Development, implementation and evaluation of wellbeing intervention for prison officers.
• 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:
• Over 400 prisoners have completed the prisoner wellbeing survey.
• Data collection for Research Phase 1 is now complete.
• Research Phase 2 (Prisoners) to commence October 2016.
• Research Phase 2 (Prison officers) to commence program evaluation in November 2016.

2015–2016 project outputs
Overview of 1 July 2015–30 June 2016
Research in progress

Grant funded research

Enhancing police responses to family violence by improving risk assessment and management
Funded by Medicare Local, Victoria Police & Forensicare ($671,076 total)
Troy McEwan, Susanne Strand, James Ogloff, Daniel Shea, Melisa Wood

Rationale and aims:
• This program of research throughout 2015 and 2016 has involved collaboration between Forensicare, Swinburne University of Technology, Victoria Police, and a Medicare Local across three separate projects.
• The overall aim of the project is to improve family violence risk assessment and management in Victoria.

Methodology:
• The first pilot project ‘The Enhanced Family Violence Unit: Integrating policing and forensic mental health’ aimed to enhance the functioning of specialist police family violence teams by embedding a Forensicare senior psychologist from the Problem Behaviour Program with the team to conduct risk assessments. This project, which ran between January and June 2015, showed that structured risk assessments were useful for police in helping them to implement a greater number and variety of management. The project also demonstrated that existing police risk assessment instruments were not effective in predicting future police contact for family violence.
• The second project, ‘Victoria Police Screening Assessment for Family Violence Risk (VP-SAFvR): Development and validation’ involved the re-development of the key police family violence risk assessment tool, the L17. Between November 2015 and March 2016, a small team from the CFBS used data from 44000 family violence incidents recorded by Victoria Police in 2013/14 to develop a new actuarial risk assessment instrument, the VP-SAFvR. The VP-SAFvR is a 15 item checklist that can be used by frontline members in the field and by specialist family violence teams to triage cases. The instrument uses a combination of risk factors to identify cases that are most likely to have further police contact for family violence, and cases likely to have increased severity of family violence. Cases that meet a specified threshold can then be referred for more comprehensive assessment and support services.
• The third project ‘Enhancing police responses to family violence: Improving the health and safety of family violence victims via evidence based policing’ commenced in January 2016 and will conclude in December 2018. This large, multisite project has received cash contributions from a Medicare Local, Victoria Police and Forensicare and involves the implementation and evaluation of a new system for police responses to family violence. The overall aim of the project is to improve the safety and wellbeing of family violence victims by improving police risk assessment and management. This will be measured in three ways:
  • Implementing and evaluating the introduction of two new risk assessment instruments (the VP-SAFvR and B-SAFER) and associated processes and procedures within two Victoria Police Divisions;
  • Evaluating whether the new procedures result in reduced family violence recidivism compared to a police region without the new processes;
  • Evaluating whether family violence victims and perpetrators during the trial have improved health outcomes compared to victims and perpetrators in a non-trial police division.

Progress:
• Since June 2016 police in north-west Melbourne have been using the VP-SAFvR in all their responses to family violence incidents and a senior psychologist from Forensicare has been embedded with the divisional family violence teams.
• Specialist family violence teams from this division have received five days of training from the Centre for Forensic Behavioural Science and are applying the B-SAFER to their cases.
Still not getting it? Are the cultural competency expectations of healthcare providers and minority patients aligned?
Swinburne Research Development Grant Scheme 2016–2017 ($3,000)

Stephane M. 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 health care systems by ascertaining both health care professionals’ self-reported levels of cultural competence and community perspectives and experiences of culturally competent care. We seek to identify if community perceptions of culturally competent health care align with that of service providers.

Methodology:
• Semi-structured interviews will be conducted with community members and health professionals across Melbourne. Questions will 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.

Progress:
• Awaiting ethics approval and conducting literature review.

Evaluation of the Port Phillip Prison Indigenous Education Support Program
Swinburne Indigenous Small Grants Scheme 2016–2017 ($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, positive role modelling and encourage connection to culture and community.
• The Centre for Forensic Behavioural Science aims to evaluate the program to establish the effectiveness of the initiative.

Methodology:
• Pre/Post program evaluation
• Pre/Post quantitative survey.
• Post program qualitative examination of effectiveness (Focus-groups and semi-structured interviews)

Progress:
• Ethics application has been submitted to the Department of Justice (JHREC).
• Post program focus groups to be conducted in late 2016 and mid-2017.
Formal service evaluation

Evaluation of the Mobile Forensic Mental Health Service
Funded by Justice Health, Department of Justice & Regulation
($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 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;
  • The characteristics of ongoing mental health service use by offenders following separation from the MobileFMHS.

Methodology:

The rolling evaluation of the Mobile Forensic Mental Health Service (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 and interview methodology to collect information on offenders’ opinions regarding the treatment that they received from the MobileFMHS, and stakeholder awareness regarding the MobileFMHS and referral activity amongst staff working at MAP and the Melbourne Remand Centre (MRC).

• **Study 3**: Effectiveness of the MobileFMHS group treatment programs – This study 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 1 and 3 months post completion. Offenders who fail to complete the group programs will act as a control arm for the study.

Progress:

• Ethical approval has been gained for studies 1, 2 and 3.
• As at 30 June, 2016 119 prisoners have consented to participate in the evaluation program for individual, group or both treatments programs.
• Data collection progresses for individual and group treatments.
• Qualitative interviews with prisoners has commenced.
• Interim progress reports have been completed (August, 2015 and February 2016).
A time and motion study of the Forensicare prison in-reach nurse practitioner role
Funded by the Victorian Institute for Forensic Mental Health ($27,972)
James Ogloff, Rachael Fullam, Lillian De Bortoli, Marcus Sellars

Rationale and aims:
- Forensicare currently has a number of nurse practitioners and nurse practitioner candidates providing prison in-reach mental health care at Melbourne Assessment Prison, Metropolitan Remand Centre, and regional prisons such as Loddon, Langi Kal Kal and Hopkins correctional centre. Prisoners referred to the nurse practitioners often have complex clinical presentations and exhibit a high level of need.
- To date, we only have anecdotal evidence to suggest that the nurse practitioner role within prison environments is complex and dynamic and heavily influenced by the high levels of mental illness morbidity in the offender population and the constraints of the prison environment.
- The aim of this study is to accurately capture the complexity of the Forensicare nurse practitioner role and to characterise the key person related and environment related factors that may contribute to the effectiveness of the role.

Methodology:
- The study uses continuous observation time and motion methodology. Two nurse practitioners were observed continuously during working hours for five working days. Each nurse practitioner was shadowed by a single researcher who coded and timed each activity the nurse practitioners performed using a standard coding matrix.

Progress:
- The observation period for the study has now been completed. Data are currently being analysed for interpretation and reporting purposes.
Overview of 1 July 2015 – 30 June 2016
Research in progress

Formal service evaluation

Evaluation of the Breathe Easy smoke free policy
James Ogloff, Rachael Fullam, Margaret Nixon, Jeff Pfeifer

Rationale and aims:
- The Breathe Easy Smoke Free project is a clinical initiative intended to improve the health and wellbeing of Forensicare staff and patients in line with the Victorian Health Priorities 2012–2022. All Forensicare sites, including the 116 bed maximum security Thomas Embling Hospital, will become smoke free as of 1st July 2015.
- The Breathe Easy Smoke Free project was established to implement the smoke free policy at Forensicare and to develop and deliver smoking cessation support programs for staff and patients.
- To date, few published studies have examined the implementation and impact of smoke free initiatives in forensic inpatient settings. None of the existing studies are based in Australia.
- The Breathe Easy project is a major health intervention within a complex clinical environment. The implementation and outcome of the intervention require formal evaluation. This study will help to establish the impact of the initiative across a range of outcomes.
- The aims of the present study are to examine:
  - The effectiveness of communication and support around the implementation of the smoke-free policy;
  - Compliance with the policy and uptake of programs/education opportunities, and nicotine replacement therapy;
  - The impact of the smoke-free policy and associated support measures on attitudes towards smoking, nicotine dependence/withdrawal, and psychological symptoms related to withdrawal;
  - 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;
  - The impact of the policy on patient attendance at education and gym programs;
  - The impact of the policy on the TEH workforce, including staff absence, recruitment, and retention.

Methodology:
- Pre and post-implementation surveys of staff and patients assessing opinions regarding the implementation of the policy ban, cessation supports, attitudes towards smoking, nicotine dependence/withdrawal, and psychological symptoms related to withdrawal.
- Post implementation patient interviews and focus groups examining the impact of the smoke-free policy on patients and ongoing support required to maintain long-term cessation.
- Collection of institutional data on pre and post implementation incidents/infrctions, PRN medication use, uptake of smoking cessation supports, measured of cardio-respiratory and metabolic function, education program and gym attendance, staff absence rates and staff turnover.

Progress:
- Pre and Post survey data has been collected from both staff and consumers.
- All incident data has been collected.
- Data pertaining to the use of gymnasium and TAFE facilities has been collated.
- This data is being analysed, and the report is being prepared for dissemination late 2016.
Evaluation of a new forensic mental health operating model:  
The Ravenhall Prison Project  
James Ogloff, Rachael Fullam, Marcus Sellars  

Rationale and Aims:  
• Due for completion in late 2017, the new medium security men’s prison at Ravenhall will provide world-class forensic mental health services in Victoria.  
• Forensicare will manage the provision of forensic mental health services at the facility including 75 forensic mental health beds and a large and varied specialist outpatients program.  
• This project aims to examine the available evidence-base for the proposed new forensic mental health services and the efficacy of these services as they are implemented over time.  

Methodology:  
• A review of the empirical literature regarding measures for triaging persons at risk of acute mental health episodes, improving medication compliance among prisoners, using intensive case management in mental health outpatient settings and preventing suicide and self-harm in forensic settings.  
• Data linkage between Forensicare service delivery and Department of Justice database.  
• Semi-structured interviews with mental health professionals and patients regarding perspectives and experiences of mental health treatment in forensic settings.  

Progress:  
• A systematic review examining suicide and self-harm prevention in prison and forensic settings has been conducted and a manuscript is currently being prepared for submission to a peer-reviewed journal.  
• An evaluation protocol is currently being developed.  

Evaluation of the Community Integration Program  
James Ogloff, Danny Sullivan, Jonathan Norton, Margaret Nixon, Lillian DeBortoli, Rachael Fullam  

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  

Progress:  
• All data has been collected and is currently being analysed.
Consultancy
Smoke Free Prisons Project evaluation
Funded by Corrections Victoria, Department of Justice & Regulation ($165,113)
James Ogloff, Janet Hiller, Rachael Fullam, Margaret Nixon, Jeff Pfeifer

Rationale and aims:
• The Smoke Free Prisons Program (SFPP) is a policy initiative implemented by the Victoria Department of Justice and Regulation. All Corrections Victoria sites became smoke free as of 1st July 2015.
• A variety of educational, health, and smoking cessation programs were developed by the Victoria Department of Justice and Regulation in conjunction with various other public health stakeholders (e.g., VicHealth and Quit Victoria). It was hoped that these initiatives would assist with a transition toward a more positive and healthy environment within Victorian prisons.
• An evaluation of the SFPP was commissioned to assess the degree to which the implementation of this initiative has met the specific goals of the program, to provide insight into potential solutions to challenges, and to assess issues related to program sustainability. The aims of the study are therefore to examine:
  • The effectiveness of communication and support around the implementation of the smoke-free policy.
  • Compliance with the policy and uptake of programs/education opportunities, and Nicotine Replacement Therapy.
  • The impact of the smoke-free policy and associated support measures on attitudes towards smoking, nicotine dependence/withdrawal, and psychological symptoms related to withdrawal.
  • The impact of the smoke-free policy on aggressive/violent incidents, arson related fires, and other reported behaviours in the prison environment.
  • The impact of the policy on Corrections Victoria staff.
  • The rate of smoking cessation maintained by those released from prison.

Methodology:
• Pre and post-implementation surveys of staff and patients assessing opinions regarding the implementation of the policy ban, cessation supports, attitudes towards smoking, nicotine dependence/withdrawal, and psychological symptoms related to withdrawal.
• Post-release surveys for prisoners released on parole orders to determine rates of continued smoking cessation once returned to the community.
• Pre and post-implementation focus groups examining the impact of the smoke-free policy on prisoners, correctional officers, health and support staff and any ongoing support required to maintain long-term cessation.
• Collection of institutional data on pre and post implementation incidents/infractions, uptake of Quit programs, nicotine replacement therapy.
• A cost benefit analysis to determine the financial benefits or otherwise of the implementation of the SFPP in Victoria.

Progress:
• Pre and post-implementation surveys have been completed.
• Pre and post- implementation focus groups have been conducted with prisoners and staff.
• Initial process implementation and a final process evaluation report have been made to the Victoria Department of Justice and Regulation.
• Incident data has been received from Correction Victoria.
• A final report is being prepared for submission to Victoria Department of Justice and Regulation in December 2016.
Staff initiated research

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 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.
• Disseminating the findings in referred journals and at conferences.

Methodology:
The following three sets of data will be collected:
1. Data related to incidents of conflict and containment.
2. Data related to the ward atmosphere (EssenCES).
3. 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 to train all Canning staff on the Safewards model and five of the ten interventions.
• EssenCES data was collected at the beginning of the year prior to the workshops.
• The five interventions are currently being implemented.
• Further workshops and implementation of the next five interventions are planned for the second half of the year.

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 will evaluate:
• How Forensic mental health service users respond to a Qigong intervention?
• 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.
• Response to Qigong were measured using an adapted version of Gilbert’s Positive Affect Rating Scale following each group.
• The addition of three qualitative questions were added to provide greater understanding of the person’s experience.

Progress:
• The results strongly suggest that participants experience a reduction in their perception of feeling unsafe, with strong feelings of personal warmth and feeling highly relaxed and calm.
• Qualitative responses from service users correlate well with scale results, supporting the limited evidence that Qigong can reduce the experience of feeling stressed, increase sense of personal relaxation, and improved mood.
• Data collection with both service user groups has been completed. Analysis and reporting are in progress.
Doctor of Psychology

What’s it like on the inside? The impact of the self-concept on the educational engagement and delinquency of young incarcerated offenders.
Rana Abou-Sinna
Supervisors: Michael Daffern, Pamela Snow, Stuart Thomas

Rationale and aims:
• Disengagement with school is associated with an increased likelihood of academic failure, school dropout, and substance abuse and offending.
• An increasing number of Australian offenders in detention have a history of academic difficulties and have become disengaged from education.
• Educational success and school attachment are key protective factors in preventing offending by young people.
• Little research has examined the relationship between self-concept and educational engagement in young offenders.
• This study aims to address this gap using a mixed methods research design

Methodology:
• Participants comprise 70 young adolescent males aged between 14 to 19 years (M=16.53, SD=1.00) incarcerated in a youth custodial setting.
• Self-concept assessed across multiple domains including personality, self-esteem, self-efficacy and schema.
• Self-concept was further explored in this study using a narrative inquiry into young offenders’ life histories.

Progress:
• Thesis is in the process of being written up.

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
Supervisors: James Ogloff, Michael Daffern

Rationale and aims:
• There is no Australian research and only limited research international research evaluating the predictive validity of the HCR-20 (Version 3)(HCR-20 V3) and Violence Risk Appraisal Guide – Revised (VRAG-R).
• This project aims to evaluate the predictive validity of the HCR-20 V3 and the VRAG-R in a sample of Australian forensic psychiatric patients post discharge from a secure forensic mental health facility (Thomas Embling Hospital) to either a prison or community setting.

Methodology:
• Violence risk assessment tools were scored based on retrospective file review of 100 patients who were admitted to Thomas Embling Hospital between April 2000 – July 2013.
• A maximum follow-up period for the study is approximately 13 years.
• Recidivism data was sourced from Victoria Police.

Progress:
• Thesis is ready for submission.

2015–2016 project outputs:
Psychological distress: Identifying and treating distress among incarcerated offenders.

Jacinta Connor
Supervisors: Michael Daffern, Jason Skues

Rationale and aims:
• Mental illness occurs at a disproportionately high rate in incarcerated offenders.
• The prison environment introduces stressors likely to elevate an inmate’s level of distress.
• 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.

Methodology:
• Approximately 1,100 prisoners will be invited to complete an anonymous survey.
• Associations between variables measured will be analysed to determine the relationship between stress and wellbeing.
• The data will be analysed to determine the most salient factors that contribute to the wellbeing.
• Based on these results, efficacy of a brief psycho-educational intervention designed to reduce psychological distress levels in prisoners will be measured.

Progress:
• 10,000-word literature review has been completed.
• Ethics approval has been received.
• Over 520 surveys completed.

Youth intimate partner violence in an Australian sample

Elizabeth Daff
Supervisors: 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 impact certain cognitive and affective factors such as relationship scripts, relationship rumination, hostile attribution bias, self-control, anger and jealousy/dominance have both independently and on each other in relation to youth intimate partner violence.

Methodology:
• Survey of adolescents in Year 10 across a number of Melbourne schools. They will be asked about their relationships and how they relate to a range of cognitive and affective factors. The survey will be analysed to explore a number of hypotheses.

Progress:
• The current project is in the recruitment phase. Ethics for the project has been approved by Swinburne University Human Research Ethics Committee, and the Department of Education and Training.
• School in Melbourne’s South East are currently being approached and invited to participate in the study.
• The questionnaire, information statements, and consent forms have all been written and are ready to be completed by participants.
Elucidating the relationship between personality disorder traits and aggression: A way forward using the General Aggression Model and a dimensional-categorical model for personality disorder diagnosis

Ashley Dunne
Supervisors: Michael Daffern, Flora Gilbert

Rationale and aims:
- The relationship between personality variables, psychological mechanisms, and violence is multifaceted and poorly understood.
- A new dimensional measure of personality dysfunction the Personality Inventory for DSM-5 (PID-5), which is likely to become the dominant measure used to understand and diagnose personality according to the Diagnostic and Statistical Manual of Mental Disorders (DSM), has not yet been used within a forensic population.
- This research will examine the relationship between Personality Disorder (PD) traits and aggression and the psychological characteristics of high risk offenders with PD.

Methodology:
- Participants comprise 208 males, aged 18 years and above who are on remand at the Metropolitan Remand Centre (MRC).
- Participants completed the PID-5, measures of cognitive schemas, and measures of violence and aggression.
- Correlation and regression analyses will be used to determine relationships between the different variables.

Progress:
- Ethics approval has been received from the Department of Justice Human Research Ethics Committee (JHREC) and the Swinburne Human Research Ethics Committee (SUHREC).
- Recruitment, data collection and data entry has now been completed.
- Data analysis has been completed and three empirical papers have been submitted for publication.
- The fourth empirical paper is underway and expected to be submitted in September.

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

Trish Evers
Supervisors: James Ogloff, Jeff Pfeifer

Rationale and aims:
- Correctional officers (COs) often experience a complex and difficult work environment, with daily exposure 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 wellbeing by implementing a targeted intervention and evaluating its efficacy in improving and maintaining officer wellbeing.

Methodology:
Approximately 450 correctional officers at 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:
- Commencement of systematic review
- Provisional ethics approval received from Corrections Victoria.
- Provisional ethics approval received from Department of Justice Human Research Ethics Committee.

2015–2016 Project outputs:
Beyond prediction: A prospective validation study of a clinical decision making application of the Dynamic Appraisal of Situational Aggression

Jessica Griffith  
Supervisor: 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:
- A preliminary review of the literature has been undertaken.
- Ethics approval will be sought by October 2016.
- The trial is currently envisaged to start in early 2017.

Assessing the health and socioeconomic burden of child sex abuse

Ahona Guha  
Supervisors: 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 outcomes such as the long-term incidence of high-prevalence mental health disorders (such as anxiety and depression), use of psychotropic medication and poor 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 medication, long-term mental health disorders and physical health outcomes, including chronic disease.

Methodology:
- This project utilises a pre-existing database of participants. It includes details of CSA victims medically verified by the Victorian Institute of Forensic Medicine (VIFM, then Office of Forensic Medicine) to have been sexually 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:
- A systematic review of the literature is underway.
- Ethics applications have been approved and data linkage is currently underway.
- Receipt of data is anticipated by mid-September 2016.
Overview of 1 July 2015–30 June 2016
Research in progress

Doctor of Psychology

Psychosis and violence: Adverse outcomes and effective intervention
Cieran Harries
Supervisors: 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 adverse outcomes has not been evaluated.
• This study will examine and model the temporal relationships among psychosis, violent offending, and victimisation.

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:
• This is a new project, developed in mid-2015. Ethical approval for the project was granted in December 2015.
• The data have been collected and are in the process of being analysed.

The socio-demographic, personal history and offending characteristics of online child pornography offenders: A comparison with contact-only and dual sexual offenders
Marie Henshaw
Supervisors: James Ogloff, Jonathan Clough

Rationale and aims:
• This project aims to enhance our understanding of those who engage in online child pornography offending.
• Phase 1: aims 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: aims 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.

Progress:
• All data linkage, coding and analyses have now been completed, as has the write up of the study results.
• Final chapter revisions and thesis preparation are currently being undertaken and will be completed within the coming months.

2015–2016 project outputs:
Developing an understanding of the General Aggression Model's knowledge structure, aggressive script rehearsal, to inform intervention strategies.

Julia Hosie
Supervisors: 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 related 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:
• All participant data has been collected. All data has been double entered and compared to prevent entry error.
• Analysis of data for a paper that will provide a working definition on aggressive scripts is almost final and the paper is currently being drafted.
• Two further papers have been proposed to investigate the connection of script to fantasy, rumination and compulsive thought. The data for these papers has been entered.

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

Gabrielle Klepfisz
Supervisors: Michael Daffern, Andrew Day, Kate O’Brien

Rationale and aims:
• Research investigating the efficacy of violent offender treatment programs has typically focused 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 factors should reduce violence propensity.

Methodology:
• Retrospective archival analysis of offender case files from Corrections Victoria.
• Information regarding offender demographics, offending history, Violence Risk Scale scores and participation in treatment will be collected.
• A number of structured psychometric instruments will be 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 protective factors for violent reoffending in adults” is currently being written for a special issue in the journal Aggression and Violent Behavior. This paper will form part of the literature review for this thesis.
• An ethics application has been prepared for submission to Corrections Victoria and the Department of Justice Human Research Ethics Committee.
• Data collection is anticipated to commence in September 2016.

2016–2016 project outputs:
Rationale and aims:
• There has been increasing acknowledgement that family 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 family violence risk assessments used by police officers;
  • To explore what risk management strategies are being used by police officers and to determine which appear to be most effective in reducing subsequent family violence incidents.

Methodology:
• Data will be collected by accessing collateral information recorded on Victoria Police databases (i.e., LEAP and Interpose) for family violence incidents in the ND2 region which result in police presence during the data collection period, July 2016 – December 2018.
• Information such as the demographics of the perpetrator and victim, the family violence risk assessments and frontline and law enforcement risk management strategies will be collected.

Progress:
• In the process of writing up a publication in collaboration with my supervisors on the predictive accuracy of the Ontario Domestic Assault Risk Assessment in an Australian sample. We will be submitting this to the Journal of Criminal Justice Behaviour.
• Prepared for data collection for the Enhancing Police Responses to Family Violence Project by getting oriented to Laverton and Werribee police station and becoming familiar with the police databases LEAP and Interpose.

Investigating a group treatment for violent offenders with aggressive scripts
Fiona Morrison
Supervisors: 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:
• A literature review has been conducted, and is being written up for publication.
• A tentative treatment plan has been formulated with regards to what the group therapy for aggressive scripts will consist of.
• Currently exploring the option of delivering treatment at the Melbourne Remand Centre in collaboration with the Mobile Forensic Mental Health Service.
Consequences of intimate partner violence: Physical health, psychological health and service utilisation in victims and perpetrators

Julia Nazarewicz
Supervisor: Troy McEwan

Rationale and aims:
Given the prevalence and already documented consequences of intimate partner violence, 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:
• Collect data on IPV incidents that come through three Family Violence teams at the Victoria Police (approx. 2,000 cases)
• Once collected, take a randomly selected sample from this group and provide names to data linkage services.
• Provided ethics approval is granted, 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
• Compare this collected data with a comparable sample of non-IPV individuals from the 2000 AEC.

Progress:
• Ethics has been approved for the first stage of data collection, which involves liaising with the Victoria Police.
• After initial meetings and training held regarding the collection of police data, data collection has recently begun at two police sites.

The long-term consequences of child sexual abuse: Exploring victim to perpetrator and victim to re-victim trajectories

Nina Papalia
Supervisors: James Ogloff, Stefan Luebbers

Rationale and aims:
• International epidemiological studies have estimated child sexual abuse (CSA) prevalence rates of up to 30 per cent in communities, with more severe forms of CSA involving sexual penetration occurring at a rate between 5 and 10 per cent.
• Research demonstrates significant links between a history of CSA and a broad range of adverse emotional, behavioural and social outcomes for victims, expressed both in childhood and adulthood.
• This research will investigate the link between CSA and subsequent offending and re-victimisation, and will consider the extent to which other clinical outcomes (e.g., mental illness, drug abuse, unnatural death) may co-occur with and/or mediate the relationship between CSA and offending and re-victimisation.

Methodology:
• The study utilises an existing database (developed for a previous project undertaken by the CFBS), consisting of a sample of 2,759 children confirmed to have been sexually abused between the years of 1964 and 1995 and a matched comparison group (n = 2,677).
• The sample was subsequently linked with administrative psychiatric and police (offending and re-victimisation) and coronial databases. Each case is followed for a period of 13 to 45 years and contains detailed information on the nature of the abuse, and subsequent offending and re-victimisation.

Progress:
• All data coding and analyses are complete
• Three empirical manuscripts have been drafted; one has been accepted for publication and is currently in press, and two are currently under review.

2015–2016 project outputs
Doctor of Psychology

Co-occurring mental disorders and behavioural disturbance among prisoners
Mateja Popovic
Supervisors: 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 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 data base regarding previous mental health service use, and Corrections Victoria data on institutional incidents, such as aggression, drug offences, and self-harm.

Progress:
• Ethical approval has been granted and data collection has commenced.
• At 30 June 2016, 92 Mobile Forensic Mental Health Service clients have agreed to participate in the study.

Trauma and criminal offending in culturally and linguistically diverse populations
Arran Rose
Supervisors: James Ogloff

Rationale and aims:
• There are a number of CALD communities which are overrepresented in Australia’s prison population.
• This study will seek to investigate whether risk factors identified in previous forensic literature can be used to predict criminal offending in CALD populations.
• The study will also examine exposure to trauma in CALD populations as a risk factor predicting criminal offending in these groups. This focus on trauma is significant given the difficult pre and post – migration experiences encountered by many people from CALD backgrounds.

Methodology:
• Interviews with prisoners at Port Phillip Prison. This will involve using a questionnaire and interviews with prisoners to determine demographics and background information.
• The study will also make use of assessments including the RISK-Needs-Responsivity assessment, Criminal Thinking Styles assessment and a yet to be determined measure of trauma.
• It is hoped that up to six hundred prisoners from a diverse range of CALD and non-CALD backgrounds will take part in this project.

Progress:
• A literature review is currently being completed.
• Application for ethical approval is currently being formulated.
Understanding children who abuse: What constitutes child-to-parent violence and why does it occur?

Melanie Simmons
Supervisors: Troy McEwan, James Ogloff

Rationale and aims:
• Existing research into child-to-parent violence is flawed often because definitions of abuse have ignored 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;
  ○ The risk factors related to perceptions and experiences of abuse;
  ○ Whether child-to-parent violence is a risk factor for abusive adult romantic relationships.

Methodology:
• Recruitment will take place 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) will complete parallel surveys.
• Participants will be provided a list of 44 behaviours and asked to rate how often each behaviour has to occur before it is considered to be abusive.
• Participants will also complete measures on demographics, as well as violent cognitions and behaviours.
• At the conclusion of the survey, participants will be asked to report how frequently they have experienced each behaviour.

Progress:
• Ethics approvals have been received for both the Swinburne and Headspace studies.
• Approximately 700 participants have been recruited through Swinburne’s Research Experience Program. Approximately 400 participants have been recruited through Headspace website.
• A literature review of risk factors and correlates has been drafted.
• Outlines for remaining papers have been drafted.
• One conference presentation has been presented.

2015–16 project outputs:

Does desistence from contact sexual offending increase the likelihood of internet sexual offending: a comparison of group membership and treatment outcomes among three groups of sexual offenders?

Angela Sorotos
Supervisor: James Ogloff

Rationale and aims:
• It is unclear how internet sex offenders differ from contact sex offenders. It is not known if one type of sex offending predicts membership to another type of sex offending. It is necessary to understand how exactly internet sex offenders differ from contact sex offenders to ascertain if a unique intervention for this population is warranted.
• The aims of this investigation are to:
  ○ determine whether desistence from contact sex offending predicts internet offending;
  ○ determine whether internet sex offending predicts contact sex offending;
  ○ create an Australian demographic profile of internet sex offenders.

Methodology:
• Comparative examination of retrospective data held by the Department of Justice on internet, contact and mixed group sex offenders.
• Participants with an intellectual disability and psychosis will be excluded.
• Quantitative and qualitative data gathered from all three groups of participants will be used to ascertain significant differences and relationships between groups.

Progress:
• Data collection is now complete and data is being prepared for analysis. 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. It is anticipated that data analysis will be completed by the 19th August 2016 with a final thesis submitted by the 30th December 2016.
• Literature review is currently being prepared for publication.
Doctor of Psychology

Presentence reports and sentencing comments: An examination of expert reports in sentencing decisions
Mingwai Tam
Supervisors: Michael Daffern, James Ogloff

Rationale and aims:
• Judges take into account a range of individual, contextual, and legal factors when making sentencing decisions. Expert witness evidence concerning an offender’s mental health is one of the many factors judges request to aid sentencing decisions.
• The current study focuses on judges’ uses of written psychological or psychiatric report on offenders’ mental health in sentencing decisions. Whilst some studies find that judges solicit and accept recommendations provided by experts in sentencing decisions, other studies find that psychological reports explain a small amount of variance in sentencing decisions.

Methodology:
• 178 pairs of presentence reports and sentencing comments will be coded by a single rater (a PhD-level graduate student in clinical and forensic psychology) in consultation with a second rater (a clinician and forensic psychologist).
• Reports will be coded using a 142-item coding sheet developed from factors identified in the literature and modelled after Hart, Sturmey, Logan, & McMurran’s (2011) case formulation quality checklist. Based on previous research findings, the factors listed in the coding sheets are anticipated to influence sentencing outcomes.

Progress:
• The project is currently half way into data collection. Data collection is expected to be completed in August 2016.

PhD

Assessing fitness to stand trial in Australia and New Zealand
Grant Blake
Supervisors: 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, we will analyse Forensicare (VIC) and ForensiClinic (TAS) expert fitness assessment reports to determine report quality, predictors of unfitness and fitness, and the assessment procedures used.
• We will then modify an international fitness assessment tool 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:
• Literature review is currently being conducted.
The role of procedural justice reasoning in the reintegration of sexual offenders into the community
Mickael Bojczenko
Supervisors: Diane Sivasubramaniam, Ann Knowles, James Ogloff

Rationale and aims:
• The primary aim of the project is to investigate the degree to which utilitarian and retributive principles drive justice reasoning and decision making regarding ongoing detention and supervision orders for serious sex offenders.
• The secondary aim of the project is to test the ways in which justice reasoning and decision making are moderated by several contextual variables identified as important in the justice literature; these variables are associated with the perceiver (specifically: attitudes toward sex offenders, political orientation, preference for intuitive versus deliberative reasoning, and focus on legislation) and the offender (specifically: responsibility for offending and remorse).

Methodology:
• The project will be undertaken through four experimental studies; three online studies, and one lab-based study.
• The experimental manipulations of Carlsmith, Monahan and Evans (2007; risk of recidivism and punishment sufficiency) will serve as the core manipulations of the four experimental studies. The vignette will be adapted for the Australian (particularly, Victorian) context, and additional variables will be examined in each study, to examine the conditions under which participants’ support for preventative detention is driven by retributive versus utilitarian motives.

Progress:
• Data collection for studies 1 (N = 407) and 2 (N = 408) and 3 (N = 310) has been completed.
• The fourth study (lab study) is still in data collection (N = 136). The first three studies are currently being written up.
• Studies 1 and 2 are being finalised, and study 3 write-up has commenced. Preliminary data analysis of study 3 has been conducted and results are as expected.
• It is anticipated that data collection for study 4 will be completed following the upcoming on-campus REP term.

Effectiveness of the Mobile Forensic Mental Health Service group treatment programs.
Zsuzsanna Horvath
Supervisors: Michael Daffern, James Ogloff, Rachel 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 psycho-educational interventions in offender populations.
• The aims of this study are to:
  ✓ Examine the impact of brief psycho-education 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:
• Ethical approval for the study has been obtained.
• Participant recruitment and follow-up commenced in May 2016.
• The sample size at 30th June 2016 was 20 participants.
PhD

Association between dual diagnosis and offending in a forensic psychiatric population. Identification of factors that reduce the likelihood of offending

Anthea Lemphers
Supervisors: James Ogloff

Rationale and aims:
• Dual diagnosis (co-occurring substance misuse/dependence and mental illness) is associated with a significantly higher risk of offending than mental illness alone.
• There are few prospective examinations of the association between dual diagnosis and offending and only limited research regarding factors that may mitigate the risk of offending. This study aims to:
  • help identify the legal contexts and the components of treatment services which effectively prevent violence among persons with major mental disorders;
  • provide information about the types of patients who benefit from such programmes;
  • assess the validity of the HCR-20 to predict the risk of criminality and violence among persons suffering from major mental disorders.

Methodology:
• Participants comprise 65 patients discharged from the Thomas Embling Hospital.
• A semi-structured interview was used to obtain socio-demographic information.
• The Structured Clinical Interview for DSM-IV (SCID – Axis I and II) was used to determine participants’ psychiatric diagnosis.
• Other information collected related to history of psychiatric treatment, criminal history, history of aggressive behaviour, history of psychosocial functioning, mental disorder and criminality among family members.
• Risk of future offending and aggressive behaviour was assessed using the HCR-20, Psychopathy Checklist, Revised, 2nd Edition (Hare, 2003) and Level of Service Inventory Revised (LSI-R).
  Participants were followed up in the community to determine their offending behaviour and contact with psychiatric services.

Progress:
• Baseline data collection has been completed.
• Follow-up data to be obtained from Victoria Police.
• Data analysis is ongoing.

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

Tessa Maguire
Supervisors: Michael Daffern, Brian McKenna, Steven Bowe

Rationale and aims:
The aim of the project are to:
• Determine the impact of day-to-day risk assessment 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.
• 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 one will consist of:
  (1) an archival case file study designed to elucidate effective aggression prevention interventions for different risk-state levels,
  (2) a literature review of aggression prevention intervention strategies to better understand the impact of particular interventions, and to shape risk management and intervention guidelines, and
  (3) a survey of DASA users to better understand the impact of DASA use in mental health units.
• Study two, the final phase, will consist of a prospective pre and post intervention study designed to test the intervention guidelines developed in study one.

Progress:
• Currently in the process of data analysis and writing up the results from the archival case file study and the literature review has just been commenced.
Development and evaluation of a psychometric questionnaire to assess forensic mental health nurses’ practice competencies.

Rebecca Millar
Supervisor: Natasha Sands

Rationale and aims:
- Previous studies have investigated nurses’ competencies in general mental health settings (Watson, Stimpson, Topping & Porrock, 2002; Speers, 2007). The present study involves the development and testing of a questionnaire to evaluate forensic nurses’ competencies. Practical uses of the questionnaire in the future will include the evaluation of forensic nurses’ competencies using a validated and reliable questionnaire. This will be the first questionnaire designed specifically for determining the competencies of forensic mental health nurses.
- The aims of this study are to:
  (i) Establish the clinical practice competencies required of a forensic mental health nurse;
  (ii) To develop a questionnaire to assess forensic nurses’ clinical competencies using the Delphi method;
  (iii) To pilot test the questionnaire;
  (iv) To determine the questionnaires psychometric properties, including its reliability and validity;

Methodology:
- Phase One – a review of the literature will be conducted to determine what are currently considered competencies required of forensic mental health nurses.
- Phase Two – a Delphi technique will be used to develop a questionnaire to identify forensic nurses’ clinical competencies.
- Phase Three – the competencies derived from Phase Two will be turned into questions that will be used in the tool. They will be tested for content validity using panels of experts in the field. In Phase Four, the final questionnaire will be pilot tested and its psychometric properties evaluated.

Progress:
- The first Delphi phase has commenced.
- Currently making amendments to the methodology to include additional phases, including an observational phase to observe FMHN practice for competencies used and also a consumer and carer perspective phase.

Fire targets and the arson action systems

Vindy Nanayakkara
Supervisor: James Ogloff, Stuart Thomas

Rationale and aims:
- Classification research provides an opportunity to better understand groups of individuals, such as firesetters, by categorising them into meaningful groups within which there is increased commonality among group members.
- Classification will be used as a means by which to empirically link characteristics and motives of firesetters with firesetting behaviours of mentally disordered firesetters, female firesetters and the contentiously termed ‘serious’ firesetters (whose actions cause injury, death or sizeable damage).
- The project is divided into three studies, each of which will focus on one of the sub-groups of firesetters, and will apply a classification model referred to as the arson action system (Cantor & Fritzon, 1998) to examine the characteristics, actions and motives of the individuals in each sub-group. Additionally, variables relating to bushfire arson, which is relevant to the Australian context, will be explored in the studies.

Methodology:
- Data will be drawn out of information in clinical reports and files of 100–110 firesetters who have been 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), for assessment.
- We will also utilise information from NSW Coroner’s reports and files of fires that have resulted in injury, death, or damages over $100,000.

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.
- It is anticipated that data collection with the NSW and VIC Community Forensic Mental Health Services will be completed by the end of 2016.
PhD

Perceptions of remorse in forensic patients and forensic mental health professionals
Jamie O'Donahoo
Supervisor: 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.
  • 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 have been 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 is being analysed and themes extracted using the qualitative approaches of Interpretative Phenomenological Analysis for the Forensic Patients’ data and Thematic Analysis for the forensic mental health professionals’ data.

Progress:
• The thesis structure has been developed, the write-up has progressed to the Results stage, and data analysis is underway.

Wrinkles in sexual behaviour: What is the risk of sexual abuse in an aged population?
Beatrice Raymond
Supervisors: 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. To be advised.

The identification and management of prisoners with mental illnesses in Victoria
Michelle Schilders
Supervisors: James Ogloff, Stuart Thomas

Rationale and aims:
• Comparison of the number, type and length of lifetime mental health contacts and diagnoses between male prisoners and controls.
• Investigation of diagnostic stability of mental illness among prisoners.
• Evaluation of the screening outcomes and the range of referrals that are made at the time of reception into prison.
• Identification of the timeframe that psychiatric referrals made at the time of reception were received by prisoners.
• Mapping and analysis of the key trajectories that prisoners follow prior to entering prison, while in prison and upon release from prison.
• Identification of the range of rehabilitation services afforded to prisoners while incarcerated.

Methodology:
• A retrospective case linkage methodology was employed in the current study, which identified and extracted records from the Corrections Victoria database pertaining to all male prisoners that were sentenced to a term of imprisonment during 2006 and 2007 in Victoria.
• In total, 5,402 prisoners were sentenced during the two year period and for each individual their records were extracted from the Victoria Police and Department of Health databases.

Progress:
• Data collection, analysis and write-up is now complete.
• The study thesis will be submitted for examination by the end of 2016.
**Relationship cognition in intimate partner violence and stalking**

**Svenja Senkans**  
Supervisors: 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:**
- Survey methodology using a large sample of older university students from Swinburne University.

**Progress:**
- Acceptance of paper.
- Completion of data collection in January 2016.
- Full drafts of four papers (planned submissions in September 2016).
- Accepted into International Society for Research on Aggression (ISRA) Young Investigators Program.

**2015–2016 Project outputs**


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**Measuring the progress and outcome of patients at Thomas Embling Hospital**

**Gregg Shinkfield**  
Supervisors: James Ogloff, Stuart Thomas

**Rationale and aims:**
- The present study seeks to evaluate the accuracy of the Routine Outcome Measures (ROMs) currently mandated for use in Thomas Embling Hospital (TEH), and to appraise the utility of these measures in relation to other available forensic specific tools.

**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.

**Progress:**
- All data collection has been completed.
- Two journal articles have been prepared and published based on the findings of this study, a third has recently been resubmitted following initial feedback / review.
- Thesis will be submitted for examination in January 2017.

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**Improving observers’ evaluations of eyewitness evidence through expert testimony**

**Alena Skalon**  
Supervisor: Jennifer Beaudry

**Rationale and aims:**
- Identifications made by eyewitnesses are one of the most important pieces of evidence in a trial, although studies show that they frequently result in wrongful convictions. One of the reasons behind this is that jurors often lack appropriate knowledge regarding eyewitness evidence.
- In an attempt to educate jurors, lawyers may invite expert psychologists to testify in a courtroom. To date, experts are only allowed to provide testimony about general results in eyewitness research rather than comment on the particular case.
- The project aims to examine additional ways that expert testimony may be presented in court to improve evaluators’ ability to assess eyewitness testimony.

**Methodology:**
- A series of laboratory-based experiments will compare the efficacy of classic verbal testimony and testimony combined with video-recorded identification procedure.
- Mock jurors will view a video-recording of a simulated trial, including a case summary, testimony of an eyewitness, and expert testimony on eyewitness identification.
- We will examine how general testimony differs than specific testimony, and how specific expert testimony may be combined the presentation of video-recorded identification procedure to improve evaluators’ assessments of suggestive procedures.
- The key dependent variables include perceived credibility of an eyewitness, the suggestiveness of identification procedures, ratings of guilt and knowledge regarding particular eyewitness factors.

**Progress:**
- Literature review now complete.
- Completed a pilot study that evaluated how strength of circumstantial evidence influences jurors’ willingness to convict the defendant.
- Obtained ethics clearance for two studies.
- Created stimuli material for the first study.

**2015–2016 project outputs:**

PhD

**Asking the right questions: Examining the utility of fact based directions using a simulated trial paradigm**

*Benjamin Spivak*

*James Ogloff, Jonathan Clough*

**Rationale and aims:**
- In the modern institution of trial-by-jury, the jury's role is narrowly circumscribed. The role of the jury 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.
- The jury-process is contingent on the ability of jurors with little or no prior acquaintance with the law to comprehend and apply governing legal principles.
- Numerous studies have reported that jurors struggle to adequately fulfil this task.

**Methodology:**
- The research project used a simulated trial to assess the utility of four different styles of instruction in terms of comprehension of legal concepts and application of legal concepts during the decision-making process.
- The study made use of a number of self-report tests to assess comprehension of legal concepts and considered whether the results of these tests were associated with observable group decision-making behaviour. The deliberation of each group was recorded through visual and audio recording devices.

**Progress**
- All data collection and analyses is now complete
- The thesis has been submitted and is currently under examination

**2015–16 project outputs:**

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

*Zora Sukabdi*

*Supervisors: 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 is 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 standardized 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:**
- Two studies have been completed.
- Data collection for the final studies is nearly complete.
- Preliminarily analysis is underway.
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
Supervisors: 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 20 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 will be interviewed and individualised behavioural predictions will produce a behavioural checklist. Participants and custodial staff will be asked to complete 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 will be conducted in partnership with Corrections Victoria, using the Satisfactory Behaviour Rating Scale as a measure of behaviour change, in release decision-making.

Progress:
- The preliminary study was completed and a paper was accepted and published in the International Journal of Forensic Mental Health.
- Data collection for the main study was completed after the final participant completed treatment.
- Data analysis has commenced for the main research study, in relation to the pre- and post-treatment psychometric test packages as a measure of change.
- Data entry is nearing completion for the third study.

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

Justin Trounson
Supervisors: 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.

Progress:
- All data collection analysis and write up is now complete.
- The thesis has been submitted for examination.

2015–2016 project outputs
Honours

Measuring stalking behaviour: The reliability and validity of the Stalking Tactics Scales
Taryn Clothier
Supervisor: Troy McEwan

Rationale and aims:
• The Stalking Tactics Scale is a behavioural measure which classifies stalking based on the number of unwanted intrusions and the duration the contact goes on for. It consists of two separate scales, one measuring stalking perpetration and the other stalking victimisation. The aim of the present research is to investigate the reliability and validity of the STS.
• The present study will explore the relationship between stalking perpetration and aggression, repetitive negative thinking, relational rumination and goal disengagement/reengagement.

Methodology:
• The sample will consist of up to 300 university students recruited via the Swinburne Psychology Research Experience Program (REP), however depending on the number of REP hours granted the sample size will likely be reduced.
• The study is a two-part study with Part 1 consisting of demographic questions, the STS and the aggression and psychological characteristics questionnaires.
• Three weeks after the completion of Part 1 students will be invited to complete Part 2 of the study consisting of the STS and the stalking attitudes questionnaire only.
• The analysis will consist of data screening, correlational analysis and analyses to investigate the convergent validity and of the STS with the aggression and psychological characteristic questionnaires and its test-retest reliability.

Progress:
• Data collection is ongoing for both Part 1 and Part 2. Data collection will continue until mid-late August 2016 before beginning data analysis.

Social work service models for women in forensic mental health systems
Rebecca Diss
Supervisors: Marty Grace, Leila Rahimi, Fiona Jessep

Rationale and aims:
• Female prisoners within the State of Victoria serve their sentences in women-only prisons, whereas women forensic patients are committed to a mixed gender facility. Women in forensic mental health services are a minority group within a service designed around the requirements of men (Dominelli 2002).
• Women accounted for 30% of the total admissions to Thomas Embling hospital over the 2014–2015 period (Victorian institute for forensic mental health 2015). Very little research has been conducted into the services for female patients in forensic mental health systems, resulting in a significantly limited evidence base to inform social work practice.
• The aim of the proposed research is to explore staff experiences of current support services for female forensic patients 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 study will utilise an online survey and semi-structured interviews with current staff members that work with female forensic patients.
• Interviews with current staff will provide an in-depth and rich understanding of their perceptions and experiences of the services and needs of female forensic patients at Thomas Embling Hospital.
• The student researcher will seek participants (approximately 15) for online surveys that work on the following units – Daintree, Barossa and Jardine, as these units accommodate women forensic patients.

Progress:
• Currently awaiting ethical approval.
Assessing change in dynamic risk factors in male and female forensic psychiatric inpatients: Relationship with psychopathy and violent recidivism

Bianca Mastromanno
Supervisor: Michael Daffern

Rationale and aims:
• The purpose of this study is to examine whether violence risk, as measured by the HCR-20 v3, 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 will examine whether these dynamic, changeable risk factors can be improved upon with the interventions and treatments received during inpatient care.
• The study also seeks 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 is scored on the HCR-20 v3 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 are 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.

Progress:
• A full literature review has been completed and data collection is being undertaken with the aim of completing all data collection by the end of July 2016.
Overview of 1 July 2015–30 June 2016
Completed research

Grant funded research
Aboriginal prisoners with cognitive impairment – Is this the highest risk group
Criminology Research Council Project Grant 2015–2016 ($58,467)
James Ogloff, Stephane Shepherd, Yin Paradies, Jeffrey Pfeifer

Rationale and aims:
• Despite high incarceration rates for Aboriginal Australians who represent around one-quarter of Australia’s custodial population, little is known about the cognitive functioning of Aboriginal and Torres Strait Islander people in custody and even less is known about its association with recidivism.
• The purpose of this study is to identify the extent of cognitive impairment among Aboriginal offenders in custody and the association between cognitive impairment, recidivistic outcome and unmet needs. The study has a number of aims:
  • To ascertain the prevalence of cognitive impairment in adult Aboriginal offenders in custody in Victoria, Australia.
  • To determine the level of dual diagnosis among the cohort.
  • To explore group differences (cognitive impairment) across Social and Emotional Wellbeing factors.
  • To examine the level of unmet custodial needs across disability groups.
  • To examine differences in offending patterns pre and post release for offenders with and without cognitive impairment.

Methodology:
• The study will utilise the Koori Mental Health and Cognitive Function Study database compiled by the Centre for Forensic Behavioural Science (CFBS) for the Victorian Department of Justice in 2013.
• The database comprises cognitive functioning, mental health and social and emotional wellbeing information for 122 adult Koori male (n = 107) and female (n = 15) prisoners in Victoria who were interviewed between January 2012 and October 2012.
• Assessment measures include the Kimberley Indigenous Cognitive Assessment, the WASI (Matrix Reasoning and Block Design components); a Social and Emotional Wellbeing questionnaire, the MINI and the Camberwell Assessment of Need – Forensic Short Version (CANForSV).
• Offending histories were obtained from the Victoria Police LEAP database.

Results:
• Results revealed an over-representation of cognitively impaired prisoners in the sample. The prevalence of mental illness was exceptionally high, and so there was a large minority with concomitant illness/disability.
• Indigenous offenders with cognitive impairment were more susceptible to harmful coping mechanisms in the face of stressors such as drug and alcohol abuse. They were also more likely to perceive discrimination, have family members in custody and have trouble managing acute emotions compared to non-cognitively impaired offenders.
• The cognitively impaired subgroup were more likely to re-offend, were younger at first offence, and had greater numbers of prior offences.

Formal service evaluation
An evaluation of the Problem Behaviour Program: A community based model for the assessment and treatment of problem behaviours
Jennifer McCarthy, James Ogloff, & Troy McEwan

Rationale and aims:
• The Problem Behaviour Program (PBP) is an internationally recognised community based service that provides assessment and treatment to individuals with high-risk problem behaviours, including sexual offending, violence, threatening behaviour, stalking and fire-setting.
• This project aimed to evaluate the Program’s efficacy in reducing offence-specific recidivism and forms part of a wider evaluation of the PBP.

Methodology:
• Police and justice outcome data was used to conduct a recidivism analysis of 824 PBP clients accepted for assessment (n=610) and/or treatment (n=214) between 2006 and 2011.
• The wider evaluation used feedback from stakeholders and consumers to determine if the PBP is meeting the needs of the community in relation to the nature and quality of service provision.
• The nature and frequency of mental health contacts amongst PBP clients was examined to establish a mental health profile of this client group.

Results and conclusions:
The project report was completed in late 2015 and made available for distribution. Key findings include:
• 90% of PBP clients have contact with the public mental health system, despite only 30% of referrals coming from mental health services.
• Psychotic disorders were the most prevalent diagnoses (28%), followed by depressive disorders (15%) and paraphilias (13%).
• 66% of clients who attended the PBP for assessment did not have subsequent charges during the follow-up period. Clients averaged 4.9 charges in the two years prior to PBP contact, which dropped significantly to an average of 2.5 charges in the two years after PBP contact.
• Clients who completed treatment reoffended significantly less often and more slowly than clients who were either not recommended for treatment or who were recommended but dropped out of treatment.
• 25% of PBP clients are referred for PBP treatment. There was a high level of treatment drop out, with only 40% of treatment recommended clients completing treatment satisfactorily.
• There was a significant reduction in the number and acuity of mental health contacts by clients after assessment and/or treatment at the PBP.
• Clients reported overall high levels of satisfaction with the service and identified that it assisted them in understanding and managing their behaviour.
Consultancy

Scoping exercise for Violence Risk Scale validation
Funded by Corrections Victoria, Department of Justice & Regulation ($19,699)

James Ogloff, Michael Daffern, Dan Shea

Rationale and aims:

• Under the auspices of Corrections Victoria, the Offender Behaviour Programs have been using the Violence Risk Scale (VRS) with prisoners:
  1) to identify those who might benefit from Violence Intervention Programs (VIPs) intended to reduce the risk of violent reoffending, and
  2) to evaluate treatment change following treatment completion.
• Despite this, the VRS has not been empirically validated. In recognition of this fact, Corrections Victoria (CV) has elected to commission an evaluation of the VRS to assess its validity and utility for these purposes. Prior to releasing this project to an open tender process, CV commissioned the Centre for Forensic Behavioural Science to conduct a preliminary scoping exercise to clarify the likely scope, timelines and costs associated with the main project.

The scoping exercise aimed to:

• Identify the number of prisoners with usable VRS scoring records;
• Estimate the time taken to process each file, and to identify relevant factors influencing these processing times;
• Develop a final report outlining the expected scope, workforce, time and costing for the CFBS to complete the main VRS validation project.

Methodology:

• Members of the research team reviewed all files at the locations with the largest file repositories. They recorded all VRS scoring, noting the timing and nature of scoring (including whether each file had pre- and post-treatment scoring).
• Researchers also noted factors they judged pertinent to processing time, such as file age, retrieval latency, length and organisation. As the files reviewed represented a subset of the files of interest, estimates were then generated by extrapolating from the patterns observed during the scoping exercise.

Results:

• The scoping exercise was completed, and a final summary report delivered to CV in November, 2015.
• The CFBS was subsequently invited to formally submit a tender for the main VRS validation project, which was submitted in May, 2016. As of July, 2016, this tender has been accepted, and planning is currently underway to commence the main project, which will now also include an evaluation of the violence intervention programs themselves.
• The research team for the VRS validation project has not yet been finalised, but Prof Ogloff and Daffern will reprise their roles as Chief and Co-Investigator, respectively, and Dr Shea will again be a Research Fellow attached to the project.

Doctor of Psychology

Law enforcement decision-making in stressful, ambiguous and potentially violent situations

Innes Seric
Supervisors: Michael Daffern, Pamela Green, Stuart Thomas

Rationale and aims:

• The current research project aims to explore the correlates of law enforcement decision-making.
• The following exploratory research questions sought to investigate processes:
  - How does the decision-making process unfold amidst dynamic and fast-paced circumstances?
  - What information or strategies do police officers use to arrive at a decision outcome?
  - Can naturalistic decision-making principles be applied to law enforcement?

Methodology:

• Qualitative interviews with Victorian Police officers focusing on critical events.
• The project utilised constructivist grounded theory; a qualitative research method that involves a series of iterative, analytic steps that direct the researcher to move back and forth between data and development of theoretical concepts or themes.
• The product of this process is a middle-range theory that is grounded in the data and developed in relation to the interpretations of people experiencing the phenomenon.

Results and conclusions:

• The current research identified the presence of multiple interactions between organisational sociology (e.g., the rank hierarchy), situational ambiguity (e.g., intoxication suspect) and individual characteristics (e.g., police officer's level of experience) in the production of a decision outcome.
• Differences across geographical locations were identified such that the function and tactical operation of the police varied across rural and urban regions.
• A model of the complex interplay between the above identified factors is presented and highlights the need for a social leadership framework within the police organisation.

Clinical implications and research translation:

The results of the research:

• Identified organisational, social and individual factors that influence police decision making in ambiguous police-citizen encounters,
• Identified regional variation in police practices,
• Identified avenues for improvement in police training practices in order to facilitate more effective decision making in the field.
Doctor of Psychology

The impact of interpersonal style and the therapeutic alliance in sexual offender treatment

Rachael Watson
Supervisors: Michael Daffern, Stuart Thomas

Rationale and aims:
• The focus of the research project is to expand understanding of treatment process and responsivity in offender populations, by looking at interpersonal style (IPS; a characteristic pattern of interacting with others) and the therapeutic alliance.
• This will be explored by analysing the impact of interpersonal style on the therapeutic alliance within the therapeutic relationship, including analysing ruptures in the therapeutic relationship, as well as the impact of interpersonal style and the alliance on treatment gain.

Methodology:
• The study sample comprises males recruited from prison and community starting the Sex Offender Program.
• Participants completed psychological tests that assessed their interpersonal style, readiness for treatment, the therapeutic alliance, and any breakdowns in the therapeutic relationship.

Results and conclusions:
• Sexual offender interpersonal style was found to impact both the treatment process via the therapeutic alliance, as well as treatment gain directly. Both therapists’ and sexual offenders’ hostile or dominant interpersonal styles impacted the strength of the alliance.
• Complementarity in interpersonal styles was not found to be important for a strong therapeutic alliance. Specifically, hostile or hostile-dominant offender interpersonal styles increased the chance of ruptures in the therapeutic relationship, however offender dominance did not.
• Offender dominance, hostile-dominance, psychopathic personality and the therapeutic alliance were all found to be related to treatment gain. Therefore, it appears that hostile offenders are more likely to have a poorer view of the therapeutic relationship, whereas dominant offenders have difficulty making within-treatment changes.
• Those offenders who experienced no rupture in the therapeutic relationship had a stronger view of the therapeutic alliance than offenders who experienced a rupture in the therapeutic relationship that was not repaired. However, there was no significant difference between those that experienced a rupture with repair. This is inconsistent with theories that suggest repairing a rupture in the therapeutic relationship can strengthen the alliance compared to those who experience no ruptures.
• Overall, the expected relationship that offenders’ interpersonal styles impacts treatment gain through its moderation of the therapeutic alliance was not supported. Therefore, the mechanisms of how offenders’ interpersonal styles impact this change process need further empirical investigation.

Clinical implications and research translation:
• The findings from the thesis can inform clinical practice by adding to the understanding of offender responsivity factors (interpersonal style) and its impact upon the therapeutic relationship and treatment gain.
• It further adds to the understanding of the treatment process (such as the therapeutic alliance and therapist characteristics) in sexual offender treatment, and how this may impact therapeutic outcomes.
• Clinicians can be aware that different offender interpersonal styles may relate to different therapeutic challenges and have different impact upon change.

Publications and presentations resulting from the research project
PhD

Intellectual disability, criminal offending and victimisation: A longitudinal data linkage study

Margaret Nixon
Supervisors: Stuart Thomas, Michael Daffern

Rationale and aims:
• Anecdotal evidence suggests that people with intellectual disability (PWID) are overrepresented in the criminal justice system as both offenders and victims of crime.
• This study aims to examine factors that may increase risk or, conversely, act to protect against such involvement and the efficacy of present interventions over time.

Methodology:
• This research study utilised a large sample of PWID (n=2220) from a database held by the Department of Human Services in Victoria, Australia, and matched these with contact-based records from Victoria Police and the Department of Health to quantify the risk for offending and victimisation, and consider any impact of dual disability on this risk.
• Data was compared to a community sample to determine the differences in risk between PWID and the general population.

Results and conclusions:
• Results indicated increased risk for offending in PWID when compared to the community sample, particularly for violent and sexual offence types.
• PWID were less likely to have been a victim of crime overall, but their risk for being a victim of violent or sexual offences was far greater than people without an ID.
• Dual disability increased risk for offending and victimisation over and above ID; however, the nature of this relationship remains complex. This suggests a lack of specialised services necessary to support and protect these individuals. Providing training to employees in justice, health and disability services to identify and treat the mental health issues of PWID may go a long way to redressing the balance.

Clinical implications and research translation:
• The increased risk of sexual offending and victimisation in PWID compared to the community would indicate the need for specialised services related to sexual offending tailored for PWID.
• Accurate estimates of prevalence for people with intellectual disability (PWID) as victims and offenders will aid in the provision of services and support for this vulnerable population.
• High rates of dual disability in the intellectually disabled sample were identified, however information related to mental health diagnoses was not consistent across services. Given the increased risk that individuals with dual disability have to being both a victim and an offender, the research has highlighted the need for integrated approaches to service delivery for PWID.

Publications and presentations resulting from the research project:
Overview of 1 July 2015–30 June 2016
Completed research

Honours

Filicide in Australia: Comparing perpetrator mental illness, substance misuse and suicide for male and female offenders

Jessica Bowling
Supervisors: Lillian De Bortoli, James Ogloff

Rationale and aims:
• Research literature on filicide is under-developed and to date, has largely been conducted overseas. Few studies compare female and male perpetrators and many are limited by fragile methodologies including inconsistent definitions of filicide, biased samples or small sample sizes.
• The purposes of the present study were to overcome some of the methodological problems associated with existing research literature and fill the gap in Australian experience of filicide from a national perspective.
• The primary aim of the current study was to compare the characteristics of filicidal males and females in Australia for mental illness, substance misuse and perpetrator suicide. In addition, the study aims to explore these comparisons for biological perpetrators.

Methodology:
• Comparison of the characteristics of male and female filicide perpetrators based on a pre-existing data set of filicide cases.
• Cases were sourced from Australian states and territories, excluding Western Australia. The data set included 123 filicide victims and 103 perpetrators (48 females and 55 males).
• Filicide cases were identified in the National Coronial Information System and data was supplemented by information from Supreme Court Judgments (AustLII) and media articles (NewsBank).
• Data were coded and analysed in a de-identified, non-re-identifiable format.

Results and conclusions:
• For male and female comparisons, diagnoses of mental disorders were more frequent amongst filicidal females but no difference was found for substance abuse or suicide attempts at the time of filicide.
• For biological and non-biological relationship comparisons with victims, biological parents were more likely to engage in suicidal behaviour at the time of the filicide and were more likely to have been diagnosed with a mental disorder. There was no difference however for substance abuse.
• For males and female comparisons amongst the biologically related perpetrators, there was no difference between mental illness, substance abuse or suicidal behaviour at the time of filicide.

Clinical implications and research translation:
• The distinction between biological and non-biological relationships between perpetrator and victim is important in developing typologies for understanding filicidal perpetrators.
• A improved understanding of filicide which incorporates relationships between perpetrator and victim will potentially improve the responsibility of clinical practitioners working with vulnerable children living with high risk offenders.

Stalking Attitudes Questionnaire: Factor structure, validation, and reliability

Angus Cooper
Supervisor: Troy McEwan

Rationale and aims:
• Most psychological literature of the last decade has focused on the prevalence and nature of stalking and risk assessment of stalkers, there has been a lack of literature focusing on why individuals stalk. One of constructs thought to be influential in understanding why people stalk is attitudes and normative beliefs, however at present there is no valid and reliable way of measuring these types of cognition.
• The current study aims to develop a measure of stalking-related attitudes and beliefs. Furthermore, the current study aims to establish construct and criterion validity of the new instrument, the Stalking Attitudes Questionnaire (SAQ).

Methodology:
• Two existing samples of data have already been collected. The first sample was collected from the community in 2013. The second sample was collected in 2014–15 from Swinburne University Research Experience Program.
• Exploratory factor analysis was used to determine which of the original 63 items in the SAQ contributed most to its performance. A shorter version of the SAQ was developed based on the results of the exploratory factor analysis, which will be tested using confirmatory factor analysis in the 2014–15 sample.
• Construct validity was tested by examining correlations between the SAQ and measures of violence supportive attitudes.

Results and conclusions:
• The study demonstrated a three factor instrument that measures attitudes justifying stalking, minimising its impacts and blaming victims for stalking.
• Results on the SAQ correlated positively with measures of attitudes supportive of violence and intimate partner violence. In addition, participants who self-reported stalking scored significantly higher on the SAQ than those who did not report stalking.

Clinical implications and research translation:
• The SAQ provides a validated and standardised measure of stalking related attitudes that can be used in future research.
• The SAQ can be used in studies with offenders to examine the kinds of attitudes that might contribute to stalking behaviour.
• The SAQ can be used to measure the presence of attitudes supportive of stalking in the community.

Publications and presentations resulting from the research project:
Smoking as an occupation: Occupational therapists’ perspectives
Hannah Wilson
Supervisors: Marissa Davidson-Blue, Ian Davey, Louise Farnsworth

Rationale and aims:
• Forensic settings have enforced smoke-free environments through adopted smoke-free policies. Evidence suggests when patients receive appropriate cessation advice and support, potential adverse effects such as aggression and violence associated with implementing smoke-free policy, do not occur.
• Literature addressing best practice for smoking cessation has focussed primarily on nicotine replacement therapy. This only provides intervention/support for the nicotine addiction associated with smoking and not for other purposes and roles of smoking.
• Further research in this area from an occupational perspective may clarifying the role of occupational therapists in providing cessation support, help add to the provision of ‘appropriate support’ and consequently reduce potential negative effects associated with smoke-free policy.
• This study aims to identify the occupational therapists perspective of the occupational impact of smoke-free policy and the role of occupational therapy within smoking cessation support.

Methodology:
• 16 occupational therapists within Forensicare were asked to complete an online survey and take part in up to three focus groups with 3–6 participants to each group at the Thomas Embling Hospital.
• The survey instrument and focus group topics were derived from current research.

Results and conclusions:
• The purposes of smoking behaviours were identified as different for each person. The unique culture and environment within the forensic setting were identified as supporting such behaviours.
• The impact of smoking cessation was identified as a transitional process from short term negative impacts to more long term positive impacts identified. What would be impacted was also identified as individual to each patient.
• The role of OT’s in smoking cessation consisted of generic and specialised OT practices, working with others and doing what was required. What was involved in the specialised OT support, the skills required to undertake it, and the theories to guide practice were broad potentially due to the ‘client centred’ nature of OT, smoking being ‘just like any other occupation’ and/or professional identity issues resulting in a lack of understanding of what the specialised OT role consists of in smoking cessation.
• The role of OT was dominated by meeting the multi-disciplinary team expectation to provide diversional activity, facilitating multi-disciplinary team buy in to smoking cessation initiative planning and implementation, doing what is required and OT group intervention. These dominating aspects of the role were perceived to have reduced the time and opportunity available for OTs to engage in providing individualised occupational specific support for smoking cessation.
• This research supports further exploration, development and implementation of a more specialised role for OT’s in smoking cessation. The development and evolution of OT practice is important and will allow the discipline to have a role in key health priority areas.

Clinical implications and research translation:
• Currently, the OT’s at Forensicare provide a central role in smoking cessation initiatives. However, participants believed that the expectation to engage in services in smoking cessation was challenging because it was seen as providing a generic practice driven by perceived multi-disciplinary team expectations, organisational pressure and it created time pressure to engage in additional organisational services. While these issues were identified by participants, there was also little actual evidence provided to support these notions.
• It is recommended that further OT team discussions and planning take place to empower OTs to integrate smoking cessation as a specialised service.
• Further continuing professional development may also assist a greater understanding of how occupation can be used to promote wellbeing through the smoking cessation transition. This may strengthen the professional identity required to establish and maintain a balance between required generic practices and specialised service provision.
• Documentation of the use of specialised OT services is important for recording the outcome of interventions. It potentially could be used as a means of advocacy to support ongoing research, development and integration of specialised OT smoking cessation services into smoking cessation program planning.
## Published research

### Number of publications by type: 2006–June 2016

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### Journal titles by country of publication and author July 2015–June 2016

- **Advancing Corrections**: 1, Canada, Trounson, Pfeifer
- **Aggressive Behavior**: 1, USA, Podubinski, Lee, Hollander, Daffern
- **Applied Psychology in Criminal Justice**: 1, USA, Trounson, Pfeifer, Critchley
- **Assessment**: 1, USA, McEwan, Shea, Daffern, MacKenzie, Ogloff, Mullen
- **Australasian Psychiatry**: 2, Australia, Carroll, McSherry
- **Australian and New Zealand Journal of Psychiatry**: 1, Australia, Shepherd, Phillips
- **Australian Social Work**: 1, Australia, O’Donahoo, Simmonds
- **BMC Nursing**: 1, UK, Hall, McKenna, Dearie, Maguire, Charleston, Furness
- **BMC Psychiatry**: 2, UK, Fogden, Thomas, Daffern, Ogloff
- **BMJ Open**: 1, UK, Ning, Zhang, Yang
- **British Journal of Occupational Therapy**: 1, UK, Hitch, Hii, Davey
- **British Journal of Social Work**: 1, UK, De Bortoli, Dolan
- **Child & Family Social Work**: 1, UK, De Bortoli, Ogloff, Coles, Dolan
- **Clinical Psychologist**: 1, Australia, Daffern, Gilbert, Lee, Chu
- **Criminal Behaviour and Mental Health**: 1, UK, Ching, Daffern, Thomas
- **International Journal of Offender Therapy and Comparative Criminology**: 1, USA, Shepherd, Campbell, Ogloff
- **International Journal of Eating Disorders**: 1, USA, Puccio, Fuller-Tyszkiewicz, Ong, Krug
- **International Journal of Forensic Mental Health**: 1, USA, Shepherd, Singh, Fullam
- **International Journal of Mental Health and Addiction**: 1, Canada, Skues, Williams, Oldmeadow, Wise
- **International Journal of Mental Health Nursing**: 1, Australia, Wharevera-Mika, Cooper, Wiki, Field, Huitana, Toko, Edwards, McKenna
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Presentations and research translation activities

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Current grant applications

- Daffern, Thomas & Ogloff. The efficacy of group-based sexual offender treatment programing: An investigation of the impact of treatment mode on recidivism and change in dynamic risk and protective factors. ARC Discovery Grant application.
- Day & Daffern: Understanding and preventing interpersonal violence in Australia. ARC Discovery Grant application.
- Stanley, March & Ogloff. Building an integrated system for Australian bushfire prevention. ARC Linkage Grant application.
- Ogloff, Shepherd, Sivasubramanian, Spencer & Spivak. Effective judicial supervision of offender rehabilitation project. Victorian Legal Services Board grants program.
- Shepherd, Paradies, Sherwood & Sivasubramian. Bridging the cultural divide: Improving the cultural safety and responsiveness of Australia’s health care services.
## Appendix 1
### Forensicare research strategy 2015–2017

### Detailed strategic plan

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<th>Key research outcome area</th>
<th>Objective</th>
<th>Strategy</th>
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| 1 Evaluating existing clinical programs and interventions. | • To evaluate the effectiveness of clinical programs and interventions, focusing on clinical, person-centred and criminogenic recovery.  
• To evaluate the efficiency of clinical programs and interventions, focusing on activity and sustainability.  
• To support evidence-based practice and continuous improvement of clinical programs and interventions. | • Develop multidisciplinary working groups to guide the evaluation of each program/intervention. Each working group will include a range of Forensicare staff from different disciplines as well as at least one member of the CFBS.  
• Ensure that clinical program evaluations in each Forensicare service setting cover a range of key outcome domains including:  
  ➢ Program activity  
  ➢ Client engagement  
  ➢ Clinical recovery (e.g., symptom improvement, medication compliance, insight, self-harm)  
  ➢ Criminogenic factors (e.g., inpatient aggression, recidivism)  
  ➢ Person centred recovery (e.g., autonomy, responsibility, hope, purpose, meaning, therapeutic alliance).  
• Ensure that evaluation designs include an examination of outcome over time points and across cohorts as appropriate.  
• Work with Clinical Program Managers to ensure accurate and effective data recording to support service evaluation efforts.  
• Establish regular reporting mechanisms to ensure that evidence and evaluation informs and is integrated into service and strategic planning. |
| 2 Evaluating new services and novel clinical programs/interventions. | • To embed an evaluation framework in each new service/intervention.  
• To support prospective evaluation planning for new services.  
• To support innovation in treatment.  
• To investigate and provide novel interventions for complex disorders and behaviours related to mental illness and offending behaviour.  
• To investigate mechanisms of providing a safe and effective therapeutic environment.  
• To support recovery. | • Seek adequate funding for each evaluation (e.g., 5% of any new service budget over $100,000 and 10% of any budget under $100,000 is dedicated to evaluation).  
• Ensure that new service evaluations include the key outcome domains established as described in the strategies for outcome 1.  
• Implement an array of evaluation frameworks or platforms to assist in program evaluation.  
• Work with Clinical Program Managers to develop accurate and effective data recording protocols to support new service evaluation efforts.  
• Encourage Forensicare clinicians to collaborate to develop research and evaluation projects focusing on novel interventions.  
• Give priority to new and continuing projects focusing on:  
  ➢ person focused recovery (e.g., family/carer engagement, consumer autonomy & responsibility, cultural needs)  
  ➢ dual diagnosis and dual disability  
  ➢ problem behaviours  
  ➢ inpatient/institutional aggression  
  ➢ self-harm  
  ➢ seclusion/restraint.  
• Establish regular reporting mechanisms to ensure that evidence and evaluation informs and is integrated into service and strategic planning. |
| 3 Determinants of health and health outcomes. | • To investigate the determinants of health in Forensicare patients/clients.  
• To improve mechanisms to identify health problems.  
• To identify and measure changes in health outcomes.  
• To improve health outcomes in our population. | • Investigating the health status (including cognitive impairment) of our population.  
• Identifying contributors to poor health outcome in our population  
• Develop and evaluate health improvement interventions. |
### Key research outcome area

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| **4 Research leadership, collaboration and governance.** | • To provide oversight and guidance for research activities.  
• To provide research leadership across key disciplines.  
• To set priorities for research.  
• To facilitate the initiation and completion of high calibre evaluation & research activities that link in to organisational priorities.  
• To ensure that all research and evaluation activities are compliant with current research governance and ethical requirements.  
• Strengthen links with Swinburne University and other relevant tertiary institutions.  
• Establish a joint academic position in Forensic Mental Health Nursing between Swinburne University and Forensicare.  
• Establish a research partnership in Forensic Behavioural Science with the Department of Justice and Swinburne University  
• Establish a joint Lecturer/Senior Lecturer in Forensic Psychiatry between Swinburne University and Forensicare.  
• Develop relationships with key academic centres involved in Social Work and Occupational Therapy Research.  
• Review and revise the Forensicare Research Governance Guidelines.  |
| **5 Research capacity.** | • To increase the capacity of the Forensicare workforce to engage in research and evaluation.  
• Support staff to engage in research by providing resources such as financial support, ring-fenced time and professional development credits for specific research activities.  
• Provide clear and accessible guidance regarding research governance and ethical approval for Forensicare based research projects.  
• Provide research training and support to staff involved in research activities.  
• Provide updates regarding funding opportunities and support staff to make funding applications.  
• Assign Honours, Masters, and Doctoral students to relevant projects.  |
| **6 Research translation.** | • To communicate research to a range of key stakeholders using a variety of methods.  
• To ensure that research evidence is translated into clinical practice.  
• To utilise research evidence to influence organisational, state, and federal policy development, service delivery and resource allocation.  
• To establish Forensicare as an innovator in forensic mental health care provision.  
• Explore mechanisms to ensure that important research findings from the wider scientific community are communicated to the organisation.  
• Ensure that researchers report on the clinical implications of their findings in the final project report supplied to the Operational Research Committee.  
• Establish presentations of relevant research results with reference to clinical implications at service and discipline departmental meetings.  
• Encourage and support staff to disseminate research findings at relevant national and international conferences.  
• Develop brief results summaries for public consumption.  
• Publish peer reviewed articles and reports on findings.  
• Publish a quarterly internal newsletter covering research progress and the clinical implications of findings in a user-friendly format.  
• Review and update the intranet and internet to include publication lists, abstracts and summaries of current research activities.  
• Conduct regular seminars at which research findings will be presented.  
• Yearly reporting of research activity in the Annual Report and Annual Research Report. Ensure that these reports are distributed widely.  |
| **7 Sustainable research program.** | • To ensure that research and evaluation is appropriately resourced.  
• To ensure transparency for direct and indirect costs related to research provided by Forensicare, Swinburne, and external sources.  
• Establish mechanisms to fund, develop and sustain a Forensicare based research and evaluation team.  
• Seek adequate funding for each evaluation (e.g., 5% of any new service budget over $100,000 and 10% of any budget under $100,000 is dedicated to evaluation).  
• Enter into a research partnership with the Department of Justice.  
• Apply for competitive grant funding through government and non-government bodies.  
• Investigate and pursue philanthropic funding opportunities.  
• Develop and submit an Australian Research Council Centre of Research Excellence application as a collaboration between Forensicare & Swinburne University.  |
## Appendix 2
### Publications

**Journal articles**


Appendix 2


Troupson, J. S., & Pfeifer, J. P. (2016). Promoting correctional officer wellbeing: Guidelines and suggestions for developing psychological training programs. *Advancing Corrections, 1*(1), 56-64. ISSN 2517-9233


**Journal articles in press**


Ching, H., Daffern, M., & S., T. (In press). Are appetitively violent youth more likely to reoffend than their angry and instrumental counterparts? *Criminal Behaviour & Mental Health*.


**Books and book chapters**


In press

Reports
Appendix 3

Presentations and research translation activities

International

Keynote addresses

Paper presentations

Appendix 3


Shepherd, S. (2016). Are risk violence instruments applicable to minority populations? Paper presented at the International Associations of Forensic Mental Health Services, New York City, USA.


National

Keynote addresses


Paper presentations


Appendix 3


Ogloff J.D, J. R. P. (2016). The provision of mental health services in prison: Evolving models of care, challenges and opportunities, Department of Mental Health, Law and Police, University of South Florida, Tampa, Florida, USA.


Shepherd, S. (2016). Cross-cultural challenges for Forensic Mental Health. Lecture, Department of Psych-Law, University of Nebraska-Lincoln, Lincoln, NE, USA.
