NHMRC Australian Centre of Research Excellence in Offender Health
Annual Report (2017)
Table of Contents

Introduction .............................................................................................................................................. 3
Vision Statement ......................................................................................................................................... 3
Governance Structure ................................................................................................................................. 5
Member organisations ................................................................................................................................. 5
People .......................................................................................................................................................... 6
  Associate investigators and research staff ............................................................................................ 7
Projects ...................................................................................................................................................... 0
  A comparison of court-based approaches in Australia for people with mental disorders ....... 0
  Reducing offending behaviour in repeat-violent offenders using omega-3 fatty acids: A RCT feasibility study .............................................................. 1
  Health research involving prisoners: assessing stakeholders views on research priorities and ethical issues .............................................................................. 1
  Improving mental health screening of prisoners .................................................................................. 2
Health care for offenders: Assessing the societal and prisoner perspectives of its value .... 3
Comparing the psychosocial health status of sex and non-sex offenders in NSW prisons ... 4
Building the infrastructure for antiviral treatment of chronic hepatitis C in prisoners across Australia ......................................................................................................................... 4
Reducing impulsivity in repeat violent offenders using a Selective Serotonin Reuptake Inhibitor (SSRI) – the REINVEST study ................................................................. 5
Stages of Psychosis in Prison (SOPP) study .............................................................................................. 6
A follow-up study of NSW juvenile offender health survey participants using data-linkage to examine juvenile offender health and justice outcomes ......................................................... 6
Text Mining the “Computerised Operational Policing System” (COPS) to inform prevention strategies in family and domestic violence ................................................................. 7
New UNSW Courses developed and delivered for the first time in 2017! ............................................. 9
  Public Health and Corrections (CRIM3022) .......................................................................................... 9
  Inside the Criminal Mind (SOMS1501) ................................................................................................. 9
Seminars hosted by the CRE in Offender Health .................................................................................... 10
Workshops hosted by the CRE ................................................................................................................ 13
Publications .............................................................................................................................................. 17
Conference presentations ......................................................................................................................... 19
CRE in Offender Health Annual Symposium ......................................................................................... 21
Introduction
Prisoners have some of the worst health outcomes of any population group and are one of the most marginalised and stigmatised groups in Australia. Each year more than 50,000 people cycle through Australian prisons, with the number of ex-prisoners in the community estimated to be around 400,000 nationally. Due to lack of engagement with health services, many of these individuals enter the criminal justice system with pre-existing health conditions and most go undetected or untreated during incarceration. Epidemiological studies have consistently shown rates of mental illness and bloodborne viral infections (e.g. hepatitis C and hepatitis B) to be much higher among prisoners than in the general population. In addition to this, many engage in health risk behaviours such as injecting drug use, tobacco and other drug use at high levels. Prisoners also show increased mortality particularly from drug overdose, suicide and violence.

The Australian Centre for Research Excellence (CRE) in Offender Health was funded by the Australian National Health and Medical Research Council in 2013. Prior to this CRE, there was no national (or international) centre focused on offender health, despite the large discrepancies that exist between the overall health of prisoners and those in the general population.

The CRE in Offender Health brings together a team of internationally recognised researchers from across Australia who specialise in various aspects of offender health to advance research and policy in the area and to improve health outcomes for this population group. The CRE prioritises two overall research themes – mental health and infectious diseases – both are in line with national priority areas and reflect the burden of diseases posed by these areas on the offender population. The two primary themes fall under three research strands: Surveillance and monitoring, Treatment interventions and Evaluation. See Table 1 for a summary of research projects by theme and strand.

Vision Statement
The NHMRC Centre for Research Excellence in Offender Health is committed to the conduct of innovative, policy-relevant and culturally appropriate research to improve health outcomes for those in contact with the criminal justice system in the infectious diseases and mental health areas.

Website
Please visit our website for the latest news, events and publications: www.offenderhealth.net.au. We are also on twitter @offendhealthCRE.
<table>
<thead>
<tr>
<th>Table 1: Summary of projects by research theme and research strand</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Infectious Disease</strong></td>
</tr>
<tr>
<td><strong>Surveillance and Monitoring</strong></td>
</tr>
<tr>
<td>• Enhancing infectious disease surveillance in prison (National Prison Entrants Bloodborne Virus Survey)</td>
</tr>
<tr>
<td>• A follow-up study of NSW juvenile offender health survey participants using data-linkage to examine juvenile offender health and justice outcomes</td>
</tr>
<tr>
<td>• A follow-up study of NSW juvenile offender health survey participants using data-linkage to examine juvenile offender health and justice outcomes</td>
</tr>
<tr>
<td><strong>Treatment Interventions</strong></td>
</tr>
<tr>
<td>• Reducing impulsivity in repeat violent offenders using a Selective Serotonin Reuptake Inhibitor (SSRI) – the REINVESt study</td>
</tr>
<tr>
<td>• Reducing impulsivity in repeat violent offenders using omega-3 fatty acids: A RCT pilot study</td>
</tr>
<tr>
<td><strong>Evaluation</strong></td>
</tr>
<tr>
<td>• A comparison of court liaison and court diversion services in Australia for people with mental disorders</td>
</tr>
<tr>
<td>• Health research involving prisoners: Assessing stakeholders views on research priorities and ethical issues</td>
</tr>
</tbody>
</table>
**Governance Structure**

The CRE is led by Professor Tony Butler (Kirby Institute, UNSW Australia) with the support of the other nine Chief Investigators who meet annually.

The day-to-day running of the CRE is managed by the Executive Committee (Prof Tony Butler, Prof Andrew Lloyd, A/Professor Peter Schofield and A/Professor Kimberlie Dean) who meet frequently throughout the year. Dr Melanie Simpson is the CRE Co-ordinator.

Projects approved within the CRE also receive feedback from the Aboriginal Research Reference Group (Dr James Ward, South Australian Health and Medical Research Institute; Dr Jill Guthrie, Australian National University; Dr Megan Williams, University of Technology Sydney, Mr Michael Doyle, University of Sydney; Dr Jocelyn Jones, University of Western Australia).

**Member organisations**

Members of the CRE in Offender Health are affiliated with a range of organisations throughout Australia. Current affiliations are listed below:

- Australian National University
- Justice Health & Forensic Mental Health Network
- Kirby Institute, UNSW Sydney
- National Drug Research Institute, Curtin University
- Neuropsychiatry Service, Hunter New England Mental Health
- Queensland Forensic Mental Health Service
- South Australian Health and Medical Research Institute
- The University of Newcastle
- The University of New South Wales
People
The CRE in Offender Health is led by 10 chief investigators.

Professor Tony Butler
Justice Health Research Program, Kirby Institute, UNSW Australia

Professor Andrew Lloyd
Viral Immunology Systems Program, Kirby Institute UNSW Australia

A/Professor Peter Schofield
School of Medicine & Public Health, University of Newcastle

Dr James Ward
Infectious Diseases Research Aboriginal and Torres Strait Islander Health, SAHMRI

Scientia Professor Phil Mitchell
School of Psychiatry, UNSW Australia

Professor David Greenberg
Statewide Community and Court Liaison Service, Justice Health & Forensic Mental Health Network

Dr Jill Guthrie
National Centre for Epidemiology and Population Health, ANU

Scientia Professor John Kaldor
Public Health Interventions Research Group, Kirby Institute, UNSW Australia

A/Professor Kimberlie Dean
Chair, Forensic Mental Health, School of Psychiatry, UNSW Australia

A/Professor Georgina Chambers
National Perinatal Epidemiology and Statistics Unit, Centre for Big Data, UNSW Australia
**Associate investigators and research staff**
A large number of people are involved in projects funded and/or supported by the CRE in Offender Health.

**Associate investigators**
- Dr Stephen Allnut, UNSW Australia
- Professor Kate Dolan, National Drug and Alcohol Research Centre
- Dr Peter Frost, South Australian Prison Health
- Luke Grant, Corrective Services NSW
- Dr Edward Heffernan, Queensland Forensic Mental Health
- Dr Adeeba Kamarulzaman, University of Malaya
- Dr Azar Kariminia, Kirby Institute
- A/Professor Stuart Kinner, Griffith University
- Professor Michael Levy, ACT Health & Australian National University
- Dr Ray Lovett, Australian National University
- A/Professor Eva Malacova, University of Western Australia
- Dr Bradley Mathews, Kirby Institute
- A/Professor Richard Matthews, NeuRA
- Professor James Ogloff, Swinburne University of Technology
- Prof David Preen, University of Western Australia
- Dr Alun Richards, Queensland Department of Health
- Dr Nurlan Silitonga, Angsamerah Institutio
- Dr Andrew Vallely, Kirby Institute
- Dr Chris Wake, Tasmanian Health Services
- Dr Megan Williams, University of Technology Sydney
- Professor David Wilson, Burnet Institute
- Dr Zunyou Wu, UCLA Fielding School of Public Health

**Research staff**
- Dr Jocelyn Jones, Research Fellow, University of Western Australia
- Dr Armita Adily, Research Fellow, Kirby Institute
- Dr Paul Simpson, Research Fellow, Kirby Institute
- Dr Lorraine Yap, Research Fellow, Kirby Institute
- Dr Melanie Simpson, Research Associate, Kirby Institute
- Laura Miles, Clinical Trials Manager, Hunter New England Mental Health
- John Nguyen, Clinical Nurse Consultant, Kirby Institute
- Lee Knight, Clinical Nurse Consultant, Kirby Institute
- Dr George Karystianis, Research Fellow, Kirby Institute
- Dr Michael Doyle, University of Sydney

**Post graduate students**
- Fiona Davidson, University of Queensland
- Stella Nalukwago, Kirby Institute
- Matthew Gullotta, Kirby Institute
Projects

A comparison of court-based approaches in Australia for people with mental disorders

Project members: Fiona Davidson (UQ, Queensland Forensic Mental Health Service, Queensland Centre for Mental Health Research), Assoc. Prof Ed Heffernan (Queensland Forensic Mental Health Service, Queensland Centre for Mental Health Research), Prof David Greenberg (JH&FMHN, UNSW), Prof Philip Burgess (UQ), Prof Tony Butler (Kirby Institute, UNSW).

Project description: Forensic mental health services in Australia have developed in response to the high rates of mental illness among offenders. A key component of forensic mental health services are Court Liaison Services. This type of forensic mental health service can provide early mental health intervention and, in some cases diversion from the criminal justice system to the mental health care system for the mentally ill. The components of service delivery and legislative options available differ across jurisdictions in Australia. The Australian Health Ministers’ Advisory Council (AHMAC) Principles for Forensic Mental Health Services, along with several other policies, call for services to be provided in an efficient and effective manner. To date, there is limited research regarding how performance should be measured and defined for forensic MHS.

A benchmarking project for mental health court liaison services throughout Australia to compare the various legislative frameworks, models, inputs, outputs and outcomes has been undertaken. It is anticipated that the findings of this project will have implications for future mental health policy. This project forms the basis of Fiona Davidson’s PhD and is comprised of four components:

1. A national survey of court based mental health programs;
2. A review of current legislative approaches relevant to court liaison service provision;
3. The development of a set of national key performance indicators for court liaison services in Australia;
4. The national court liaison services benchmarking project.

Project status: A national survey of available court-based diversion options in Australia has been completed, with a report and peer-reviewed article published. A National Mental Health Court Liaison Performance Working Group was formed with nominated representatives from each jurisdiction and an Aboriginal and Torres Strait advisor. National workshops were held with this group and have led to the development a national framework and a set of key performance indicators (KPI’s) for Court Liaison Services. A technical report describing the performance indicators has been released and a peer reviewed publication describing the process and measures has been published. A peer reviewed publication comparing legislative approaches to court liaison and diversion in Australia has also been published.

All States and Territories participated in the National Court Liaison Service Benchmarking Project. The benchmarking project commenced in March 2017 and concluded with a national workshop in September 2017 with representatives from each Australian jurisdiction.
in attendance. Throughout the project Court Liaison Services trialled the KPI’s and compared service performance. A report describing the key performance indicator results has been released and a paper describing the findings of the project is being prepared for submission.

Reducing offending behaviour in repeat-violent offenders using omega-3 fatty acids: A RCT feasibility study

Project members: A/Prof Peter Schofield (Neuropsychiatry, HNE Health), Prof Tony Butler (Kirby Institute), Laura Miles (Neuropsychiatry, HNE Health), Dr Melanie Simpson (Kirby Institute), Prof Lisa Wood (U of Newcastle)

Project description: Significant numbers of men come into contact with the criminal justice system as a result of committing violent offences. Few interventions, however, exist for this population as many treatment programs and post-release (from prison) schemes exclude those with histories of violent offending. Evidence implicates reduced levels of omega-3, a consequence of the modern diet, in increased anxiety, aggression, and impulsivity and studies (some conducted in custodial settings) have shown that supplementing omega-3 Fatty Acid levels can lead to reductions in aggression, anger and anti-social behaviour. No study has however looked at the potential benefits of omega-3 supplementation in an adult community offender population.

The primary aim of this study is to demonstrate the feasibility of conducting a three-month double-blind, randomised placebo-controlled trial (RCT) of omega-3 supplementation in a community sample of impulsive men with histories of violent offending. A secondary aim of the study is to collect information on the effectiveness of omega-3 supplementation on behavioural measures such as impulsivity, anger, aggression and irritability. Changes in self-reported offending over the three month period will also be assessed.

Project status: This project has now been completed and a peer-reviewed article has been published. This study demonstrated that repeat violent offenders living in the community are willing to participate in trials and adhere to medical regimens up to three months. The Omega Index blood levels provided evidence that Omega-3 supplementation was adhered to by the majority of participants who completed the trial. Based on the small sample size (N=44), an adequately powered RCT of this intervention is warranted.

Health research involving prisoners: assessing stakeholders views on research priorities and ethical issues

Project members: Prof Tony Butler (Kirby Institute), Dr Jill Guthrie (ANU), Dr Paul Simpson (Kirby Institute), Dr Jocelyn Jones (UWA); A/Prof Peter Schofield (Neuropsychiatry, HNE Health),

Project description: The use of prisoners as research participants is contentious and complex. Alcohol and other drug use, mental illness, and hepatitis C disproportionally affect
prisoners, and are thus expected to be the preferred areas of research interest for prisoners. However, how prisoners see their involvement in such research in terms of risks and benefits medically, psychologically and socially within the prison setting and beyond remains unknown. In recent years there has been increasing interest in using deliberative democracy to involve communities in decision-making about policy development and program delivery. Citizens Juries (CJ) are one such approach, having been used in various policy fields internationally, including in Australia. CJ involve bringing together a randomly selected group of citizens or a particular group of citizens, providing them good information on the issues to hand and asking them, as community representatives, about their preferences for certain policy options or priorities for resource allocation.

Consultation and input from key affected communities identified in national health strategies are important for determining research priorities, processes and translation, that in turn maximise opportunities for improved health outcomes of those affected communities. This study seeks input from a key affected community rarely consulted with in terms of research priorities (those with lived experience of prison), in addition to key prison health service personnel and ethics committee members/experts. As such, the project will inform and help evaluate research portfolio content under the CRE in offender health in order to improve the health outcomes of prisoners.

**Project status:** Two national roundtables assessing the views of prison health directors and ethics committee chairs have been completed. Outcomes reports from each roundtable have been prepared, in addition to one peer-reviewed publication and one publication in-draft. Negotiations to conduct the Citizens Juries with prisoners in six NSW and Queensland prisons are currently underway.

Improving mental health screening of prisoners

**Project members:** A/Prof Kimberlie Dean (JH&FMHN), Scientia Prof Philip Mitchell (School of Psychiatry, UNSW), Dr Sophie Davison (Clinical Research Centre)

**Project description:** Individuals entering prison are typically screened for physical and mental health problems, in order to identify those requiring further assessment and treatment. Approaches to mental health screening have been little studied and in many Australian jurisdictions screening tools have simply been borrowed from other non-custodial settings with little or no evaluation. This study will trial a newly developed prison mental health screening tool and compare it to the current approach used in NSW. The study will involve recruitment of male and female prisoners from the Metropolitan Remand and Reception Centre (MRCC) and the Silverwater Women’s Correctional Centre respectively; recruited following reception into prison. The study will involve two interviews, one shortly following reception (including both the current and the new screening tools) and a second validating interview (including a diagnostic assessment). Face-to-face interviews will be complemented by data obtained from electronic records.
**Project status:** Data collection for the male and female samples has been completed. Initial analyses have been completed. The new tool has been demonstrated to have considerable advantages over the current approach in NSW and the new tool is being implemented across prison reception sites in NSW. Conference presentations have highlighted the study findings. A report of findings has been provided to the Chief Executive of Justice Health and Forensic Mental Health Network. Manuscripts for publication are in preparation. The study findings have supported development of a related project (a pilot trial of a Critical Time Intervention for prisoners with mental illness on prior to and during release from prison). Funding to support the pilot trial has been successfully obtained from the NSW Health Translational Research Grants Scheme.

---

Health care for offenders: Assessing the societal and prisoner perspectives of its value

**Project members:** Prof Tony Butler (Kirby Institute), A/Prof Georgina Chambers (NPESU), Dr Marian Shanahan (NDARC), Stella Nalukwago (Kirby Institute)

**Project description:** This study proposes to evaluate societal and offender preferences for healthcare spending, using a number of solicitation methods (including Contingent Valuation (CV) and Discrete Choice Experiments (DCE)) and analyse the perceived social benefits of such an intervention. The findings of such analyses can then be combined with economic costs, and clinical outcomes to present evidence on intervention cost-effectiveness and cost-benefit analyses. This study will provide valuable information for policy makers, treatment providers, other practitioners and ethics committees and health economists regarding the strengths of preferences of society and prisoners to provide healthcare within prisons. The study will provide a monetary valuation of the health benefits relative to costs, and will help to promote a better understanding of some of the difficult issues faced by ethics committees in considering research proposals in offender health. Insofar as such difficulties relate to not knowing how acceptable to the public various changes in policy towards offender health might be.

**Project status:** A systematic review of economic evaluations for offender treatment interventions was completed published in the American journal of criminal justice. To contribute to the literature on assessing societal perspectives of offender health care, a methods paper was also written and submitted to the BMJ open journal

Phase 1 study of the study was completed. It included focus group discussions with three groups; offenders, family members of offenders and members of the general public, and a Delphi method process with 13 experts from the Justice and Health space. The focus group discussions explored the preferred characteristics of treatment programs for violent impulsive offenders. From these attribute and attribute levels for the DCE were developed and further refined using the Delphi method. A manuscript detailing the process of development of attribute and attribute levels for the DCE has been submitted to the value in health Journal. An abstract has also been accepted at the Law enforcement and public health conference in Toronto, Canada.
Data collection for Phase 2 of the study was completed and analysis and write up is ongoing. It included a DCE and CV survey with the general population to allow the preferences of offender healthcare and the value of offender programs to be quantified. An abstract on the CV has been accepted for presentation at the Australian Health Economics Society Conference.

--------------------------------------------------------------------------------------------------------------------------

Comparing the psychosocial health status of sex and non-sex offenders in NSW prisons

Project members: Prof David Greenberg (JH&FMHN), Prof Tony Butler (Kirby Institute), Dr Armita Adily (Kirby Institute), Matthew Gullotta (Kirby Institute)

Project description: Little is known about the physical and mental health status of those convicted for sex offences. Preliminary research has been inconclusive and limited by small samples and lack of non-offender comparison groups. Increasing evidence about the mental, physical and social factors of sex offenders is important in understanding of the aetiology and mechanism of sex offences. It also contributes to better risk assessments, predicting recidivism and selecting treatments. Such research may also assist in the development of public policy. This study will utilise data from three waves (1996, 2001 & 2009) of the NSW Inmate Health Survey to examine the differences in the health status of sex and non-sex offenders.

Project status: Data analysis for this study is complete. A peer-reviewed publication focusing on methodology and health status of sex offenders is now being prepared.

--------------------------------------------------------------------------------------------------------------------------

Building the infrastructure for antiviral treatment of chronic hepatitis C in prisoners across Australia

Project members: Prof Andrew Lloyd (Kirby Institute), Prof Tony Butler (Kirby Institute)

Project description: Prisoners have been identified in the Fourth National Hepatitis C Strategy 2014–2017 as a priority population for hepatitis C treatment with over 50,000 individuals passing through the prison system annually. Although approximately one in four prisoners are chronically infected with hepatitis C only a small minority receive antiviral treatment in this setting. Professor Lloyd has led the development and implementation of an innovative nurse-led model of care in the NSW prisons, incorporating protocols for assessment and monitoring, telemedicine for specialist input, and portable fibroelastography (to measure scarring of the living) to facilitate increased uptake of decentralised care. The model was safe, effective in increasing treatment rates, and well accepted by prisoners, as well as custodial and health care staff.
The overall goal of this CRE project is to facilitate scale up of testing and treatment of prisoners with chronic HCV in Australia. The specific aims are: 1) to establish a national prison hepatitis network; 2) to develop and evaluate a simplified nurse-led health service model for the assessment and care of patients with chronic HCV using all oral, DAA-based HCV therapies; 3) to evaluate the utility of point-of-care testing for detection of HCV antibodies and quantitation of HCV RNA in the simplified health care model; and 4) to develop, implement and evaluate prison-focussed education programs to raise awareness of HCV, and enhance testing and treatment in the prison sector.

Project status:

Aim 1: A National Prisons Hepatitis Network has been formed, an inaugural national meeting held, and a ‘national dashboard’ describing testing and treatment rates for each state and territory has been initiated. A manuscript describing the prisons contribution to the national goal of hepatitis C elimination by 2030 has been submitted for publication. Aim 2: The protocol and proformas for the nurse-led model of care adapted for the simplified treatments of the direct-acting antiviral (DAA) era was developed and implemented in NSW and in the Victorian prisons. Two retrospective analyses of the first 12 months of DAA treatment uptake in the NSW prisons and the Victorian prisons have been completed demonstrating dramatic increases in the number of prisoners with chronic hepatitis C being treated annually. Both analyses are now submitted for publication. Aim 3: In addition to support from the CRE, the point-of care (PIVOT) study has been funded by Abbvie and is currently awaiting finalisation of the protocol, and thence contracts and ethics approvals with a view to likely commencement of this 12 month study in January 2019. Aim 4: The prison-focussed education project has in principle approval for support from Eliminate C (Ramsay foundation funded national HCV elimination project) as well as from Gilead and Abbvie. The resources will target prisoners, custodial officers, and clinicians in the prison sector. Resource development for the peer-to-peer prisoner education component is well advanced. A research evaluation of the effectiveness of the education programs in both knowledge transfer as well as behaviour change is planned.

----------------------------------------

Reducing impulsivity in repeat violent offenders using a Selective Serotonin Reuptake Inhibitor (SSRI) – the REINVEST study

Project members: Prof Tony Butler (Kirby Institute), A/Prof Peter Schofield (Neuropsychiatry, HNE Health), Prof David Greenberg (JH&FMHN), Prof Philip Mitchell (School of Psychiatry, UNSW), Jocelyn Jones (UWA), Lee Knight (Kirby Institute), John Nguyen (Kirby Institute)

Project description: Violence is a leading cause of death and injury worldwide and a large percentage of prison inmates have histories of violent offending. Between 1996 and 2006, violent crimes (homicide, assault, sexual assault, robbery) in Australia rose by 30%. While just under half of those convicted for violent offences such as assault (44%) and robbery (47%) return to prison within two years. Numerous studies suggest a strong association
between poor impulse control (impulsivity) and crime, including violent crime. There is strong evidence from animal and human studies, pharmacological, imaging, and receptor sub-typing research of a relationship between serotonergic dysfunction and aggression and impulsivity. While violence and offending behaviour are complex issues, the biological, behavioural, psychiatric, criminological and pharmacological evidence provides compelling support for the role of serotonin dysfunction in impulsive-violence. The REINVEST study aims to examine the effectiveness of an SSRI (sertraline) in reducing recidivism and other behaviours (e.g. impulsivity, irritability, anger & aggression) among impulsive-violent offenders.

Project status: In early 2018 the trial received additional funding from the Department of Justice. As a result of this increased funding, the trial has been able to upscale to eight courts within Sydney Metro, Sydney Western Suburbs and the Central Coast. Recruitment of staff is underway and the trial is expected to be fully staffed and operational by mid-September 2018. Recruitment for the study is ongoing and predominantly recruits from Local Courts and Community Corrections.

---------------------------------------------------------------------------------------------------

Stages of Psychosis in Prison (SOPP) study

Project members: A/Prof Kimberlie Dean (JH&FMHN), Natalia Yee (JH&FMHN), Dr Daria Korobanova (JH&FMHN), Prabin Chemjong (JH&FMHN)

Project description: The Stages of Psychosis in Prison (SOPP) study is investigating the prevalence of early psychosis, established psychosis and at-risk mental states among those referred to prison mental health services, both male adult offenders and juvenile offenders. The SOPP study also aims to establish the demographic, clinical and forensic characteristics of individuals identified to be within each of the three study groups, providing invaluable information to inform the development of a needs-responsive intervention.

Project status: Data collection for this study is now complete. Data analysis is currently underway and includes a comparison with data from the Network Patient Health Survey. The first papers arising from the project are in preparation.

---------------------------------------------------------------------------------------------------

A follow-up study of NSW juvenile offender health survey participants using data-linkage to examine juvenile offender health and justice outcomes

Project members: Prof Tony Butler (Kirby Institute), Prof David Greenberg (JH&FMHN), Dr Melanie Simpson (Kirby Institute), Dr Claire Gaskin (Sydney Children’s Hospital), Dr Jocelyn Jones (UWA), Dr Azar Kariminia (Kirby Institute)
**Project description:** This study examines predictors of health and justice outcomes of young people who have been in contact with the criminal justice system using data-linkage. The study links baseline data collected from three health surveys of young offenders in NSW the 2003 and 2008 Young People in Custody Health Surveys (YPiCHS), and the 2006 Young People on Community Orders Health Survey (YPoCOHS) to a range of administrative health and justice datasets to examine offending, physical and mental health outcomes, contact with health services and mortality. The cohort consists of young people (1,403; 88% male) between 12-22 years at the time of the baseline surveys; over one-third identified as Indigenous. Findings of this study will lead to the development of targeted and effective interventions aimed at improving the health, wellbeing and justice outcomes of young people who come into contact with the criminal justice system. Specific focus will be on opportunities for post-release support and continuity of care, improving individual and environmental factors and criminal justice processes to interrupt offending trajectories, promote desistance and improving overall health and wellbeing.

**Project status:** Approvals are currently being sought from all relevant ethics committees and data custodians.

--------------------------------------------------------------------------------------------------------------------------

**Text Mining the “Computerised Operational Policing System” (COPS) to inform prevention strategies in family and domestic violence**

**Project members:** Prof Tony Butler (Kirby Institute), Prof David Greenberg (JH&FMHN), Prof Peter Schofield (Neuropsychiatry, HNE Health), A/Prof Handan Wand (Kirby Institute), Dr Stephan Anthony (Zetaris Pty Ltd.), Dr Azar Kariminia (Kirby Institute), Dr Armita Adily (Kirby Institute), Prof Louisa Jorm (Centre for Big Data Research in Health), Dr Chris Devery (NSW Police), Dr George Karystianis (Kirby Institute)

**Project description:** Vast numbers of domestic violence incidents are attended by the police each year and recorded in Australia as both structured quantitative data and unstructured free text in the WebCOPS - a web-based interface for the Computerised Operational Policing System - database. The wealth of information in WebCOPS regarding the victim’s and person of interest’s (POI) incident details, particularly with respect to the unstructured text (Domestic Violence (DV) event narratives), remains widely untapped. We seek to explore whether text mining can automatically identify mental health disorders from this unstructured text. We used a small training set of DV recorded events to design a knowledge-driven approach based on lexical patterns in text suggesting mental health disorders related to POIs and victims. The precision returned from an evaluation set of DV events was 97.5% and 87.1% for mental health disorders related to POIs and victims respectively. After applying our approach to a large-scale corpus of almost half a million DV events, we observed that 77,995 events (16%) mentioned mental health disorders, with 77% of those linked to POIs versus 16% for the victims and 6% for both. Depression was observed to be the most prevalent mental health disorder for both victims (22%; 3,258) and POIs (19%; 8,918), followed by alcohol abuse for POIs (12%; 5,829) and various anxiety disorders for victims (11%; 1,671). The results suggest that text mining can automatically extract targeted
information from domestic violence police recorded events to support further public health research.

**Project status:** Design and implementation of a text mining methodology to extract targeted information (mental health disorders of mental health disorders of victims and offenders, action performed by offenders, victim injuries sustained, weapons used by the offenders and causes of the domestic violence event) from police event narratives related to domestic violence has been completed. The designed methodology has been successfully applied in a large data cohort of roughly 500,000 police events related to domestic violence. A paper that describes in detail the design, implementation and evaluation of this method has been accepted in a high-profile journal. Further analyses will look at identifying temporal trends for offenders and victims with various mental health disorders such as weapons used, and exploring if offenders with mental health issues are more violent when involved in a domestic dispute versus offenders without.
New UNSW Courses developed and delivered for the first time in 2017!

For the first time, the Justice Health Research Program at the Kirby Institute, led by Professor Tony Butler, developed and delivered two courses at UNSW, one was an elective offered within the Criminology undergraduate program within the Faculty of Arts and Social Sciences, and the other was a general education elective offered by the School of Medical Sciences within the Faculty of Medicine. A brief description of the courses is included below.

Public Health and Corrections (CRIM3022)

In this course students learn about the complex health needs of those in contact with the justice system and the importance of these for offender rehabilitation. Experts in this field (e.g. a former prisoner, prison administrator, prison doctor and prisoner support worker) will present and discuss the challenges and controversies in prisoner and offender health (e.g. harm reduction strategies in prison, treatment of the mentally ill in the justice system), researching offenders, ethical dilemmas, health service delivery in prison, and prevention and intervention strategies. A visit to a prison provides an opportunity to reflect on some of these issues.

Inside the Criminal Mind (SOMS1501)

This course is aimed at students with a general interest in the forensic area who may wish to pursue a professional career or research in this fascinating field. This course complements existing offerings at UNSW such as undergraduate courses in medicine, psychology, social work, criminology, and law, as well as postgraduate courses in forensic mental health, forensic psychology, criminology and the law. The course takes a lifecycle approach by examining the antecedents of offending, genetic influences, and the detection, prosecution, treatment, and punishment of this group.
Seminars hosted by the CRE in Offender Health

2018
Royal Australian and New Zealand College of Psychiatrists Faculty of Forensic Psychiatry Conference
6th-8th September, 2018.

The CRE supported a keynote speaker from the UK, Dr Richard Latham, and held a symposium session on the first day to showcase mental health research funded by the CRE. Dr Latham spoke about 'The death penalty: law, psychiatry and politics' and the symposium session chaired by A/Prof Kimberlie Dean included talks on the following project topics: prison mental health screening (Dr Daria Korobanova), trialling an SSRI to treat impulsivity (Prof Tony Butler) and the health of sex offenders (Mr Mathew Gullotta).

The conference, convened by A/Prof Kimberlie Dean, was well attended by around 200 delegates from across Australia, New Zealand and beyond, representing a wide range of clinical, professional and academic disciplines with an interest in forensic mental health. The sponsored keynote address and symposium session were well received by delegates.

--------------------------------------------------------------------------------------------------------------------------

2018
Diversion of persons with mental illness from jail: Intervention outcomes across ten county jails presented by Professor Sheryl Kubiak, Michigan State University, USA

Within the United States, between a quarter and one third of those entering county jails have a serious mental illness. It has been suggested that using a Sequential Intercept Model (SIM) to identify salient points of intervention across the criminal legal continuum, may be one method of decreasing the number of individual with serious mental illness (SMI) entering local jails. Using this SIM approach, ten counties in Michigan have been working with the Governor’s Diversion Council, the Department of Health and Human Services and a university evaluation team to improve identification of and responses to individuals with SMI involved in the criminal justice system. This presentation details the system and project-based evaluations, emphasizing identification, referral, and treatment within jails, as well as outcomes related to recidivism and treatment engagement post release.

--------------------------------------------------------------------------------------------------------------------------

2017
Breaking into prison to improve continuity of care: The project START+ model presented by Mr Barry Zack, Assistant Clinical Professor at the University of California, San Francisco and the CEO of Corrections & Health at the Bridging Group.

Continuity of Care for people returning home from prison requires collaboration between governmental and community entities and jurisdictions that do not often work together. Though the mission of public health can be viewed as similar to public safety, these systems often take diametrically opposed approaches to their mission. Barry will
present a brief overview of the U.S. criminal justice system focusing on incarceration (the U.S. represents about 5 percent of the world’s population and nearly one-quarter of the entire world’s prison population) and prison models of disease screening and continuity-of-care. The focus of this presentation will be on Project START, an evidenced based prevention & continuity-of-care model currently being implemented in 8 countries and in multiple U.S. prisons and remand centres.

2015

Breaking into prison to improve continuity of care: The project START + Model presented by Mr Barry Zack, Assistant Clinical Professor, University of California and CEO of Corrections and Health, Bridging Group. 8th April 2015, Kirby Institute, UNSW Australia.

Continuity of Care for people returning home from prison requires collaboration between governmental and community entities and jurisdictions that do not often work together. Though the mission of public health can be viewed as similar to public safety, these systems often take diametrically opposed approaches to their mission. Barry will present a brief overview of the U.S. criminal justice system focusing on incarceration (the U.S. represents about 5 percent of the world’s population and nearly one-quarter of the entire world’s prison population) and prison models of disease screening and continuity-of-care. The focus of this presentation will be on Project START, an evidenced based prevention & continuity-of-care model currently being implemented in 8 countries and in multiple U.S. prisons and remand centres.

2014

Indigenous women in the Canadian criminal justice system presented by Dr Alexandra King, 2014-2015 James Kreppner Fellow, Canadian HIV Trials Network, Simon Fraser University, Canada. 28th August 2014, Kirby Institute UNSW Australia.

For millennia, Indigenous people have lived on the land that has become Canada. They organized into their own nations and societies and enjoyed excellent health. Following contact, they became known as the First Nations, Inuit and Métis peoples. The process of colonization has wreaked havoc on Indigenous people – at the societal and individual levels. As a consequence, they now face severe challenges because of deficits in many health determinants, coupled with socio-political structures that have eroded and compromised their historic self-governance. The First Nations people in Canada experience huge disparities in health vis-a-vis their non-Indigenous counterparts; HIV/AIDS and hepatitis C exemplify this. Indigenous people have also become increasingly over-represented in the criminal justice system (CJS). This is particularly the case for Indigenous women; however, their numbers are small. As a consequence, there is less programming for women while incarcerated, and little that addresses colonization and other underlying health determinants relevant to First Nations women, who also experience increased disease burden for STBBIs, addictions and mental illness. Women who transition to community after release from incarceration in British Columbia (BC) face numerous challenges in being linked
with, accessing and receiving social and clinical services. Furthermore, most discharge planning is tailored for men.

A multi-method, community-based, participatory research project, reflecting an Indigenous ethical framework and embracing the Indigenous philosophy of OCAP/OCAS, will be presented. This will begin with a synthesis of an environmental scan which maps existing services and programs in this area, synthesis of literature and other available evidence. From this, plans for interviews with prison health practitioners, key informants, and women with incarceration experience and a gap analysis will be presented. These will lead into a planned pilot intervention to provide wholistic, trauma-informed, culturally appropriate linkage to community care cascades (e.g., HIV/AIDS, Hep C, opioid replacement therapy, mental health and addictions services) that is feasible within the existing system.
Workshops hosted by the CRE

2017
National Prisons Hepatitis Network Meeting
October, 2017

The National Prisons Hepatitis Network Meeting was held in October 2017 with the overarching aim to identify key successes and barriers in achieving current HCV treatment scale up in custodial settings in all Australian jurisdictions.

Delegates at this meeting discussed the need for a national statement on prison-based HCV care to influence meaningful change across all Australian Jurisdictions that would ultimately help improve the capacity and efficiency of HCV assessment and treatment programs within correctional facilities.

The following five actions were proposed as priorities for inclusion in a national statement:

1. Surveillance should be undertaken to estimate the number of prisoners annually who are; at risk of HCV infection, chronically infected with HCV, infected and incarcerated long enough to be able to complete treatment, and infected and initiating DAA treatment.
2. Annual testing and KPI targets should be established in each jurisdiction.
3. Collation of an annual report detailing the national prison HCV assessment and treatment activity, including the estimates detailed in Recommendation 1 against the performance targets in Recommendation 2.
4. Increased advocacy for scale-up of HCV assessment and treatment in the prisons through development of ‘prison-suited’ HCV education programs amongst prisoners and facilitating education and training for all correctional and health care staff.
5. Identification of resources to allow establishment of infrastructure to support the National Prisons Hepatitis Network.

--------------------------------------------------------------------------------------------------------------------------

2017
National Court Liaison Service Benchmarking Forum
1st September, 2017. Stamford Plaza Airport Hotel, Sydney.

The CRE in Offender Health supported the face to face meeting of the National Mental Health Court Liaison Services Benchmarking Working Group.

The Benchmarking Working Group was established to provide advice and oversight for the National CLS Benchmarking project. The Working Group was comprised
of nominated representatives of Forensic Mental Health Services from each Australian State and Territory, an Aboriginal and Torres Strait Islander representative & project investigators from the NHMRC CRE Offender Health (a list of working group members and other contributors to this document is included at the end of this document). Representatives of each jurisdiction agreed to:

- Provide as much information as possible to construct the nationally agreed key performance indicators;
- Ensure that relevant approvals from their jurisdiction were gained to enable participation in the project;
- Participate in discussions to review findings of the project.

The aims of the national benchmarking workshop were to:

- Determine whether KPI’s were worth measuring
- Compare KPI results and explore variation
- Determine the level of confidence of each jurisdiction in the reliability of their data
- Review the usefulness of the benchmarking process.

A report describing the key performance indicator results has been released (attached) and a paper describing the findings of the project is being prepared for submission.

Membership of the National Mental Health Court Liaison Services Benchmarking Working Group:

<table>
<thead>
<tr>
<th>Jurisdiction</th>
<th>Nominated Representative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aboriginal and Torres Strait Islander</td>
<td>Penny Dale – Queensland Forensic Mental Health Service</td>
</tr>
<tr>
<td>ACT</td>
<td>Jaime Bingham – Senior Manager FMHS</td>
</tr>
<tr>
<td>NSW</td>
<td>Professor David Greenberg – Clinical Director State wide CCLS</td>
</tr>
<tr>
<td></td>
<td>Carolynn Dixon – Operations Manager, State wide CCLS</td>
</tr>
<tr>
<td>NT</td>
<td>Maraea Handley – Manager NT Forensic MHS</td>
</tr>
<tr>
<td>QLD</td>
<td>Dr Jane Phillips – Consultant Psychiatrist</td>
</tr>
<tr>
<td>SA</td>
<td>Dr Narain Nambiar – Director of Forensic Mental Health</td>
</tr>
<tr>
<td></td>
<td>Anna Delassandro -</td>
</tr>
<tr>
<td>TAS</td>
<td>Marita O’Connell – Court Liaison Service</td>
</tr>
<tr>
<td>VIC</td>
<td>Patrick Seal – Team Leader, Court Liaison Service</td>
</tr>
<tr>
<td>WA</td>
<td>Iain Hindle – Community Forensic Mental Health Nurse</td>
</tr>
<tr>
<td>NHMRC CRE Offender Health</td>
<td>Fiona Davidson</td>
</tr>
</tbody>
</table>

2016

National Mental Health Court Liaison Performance Working Group meeting
25th February 2016, Stamford Plaza Airport Hotel, Sydney.

The CRE in Offender Health supported the face to face meeting of the National Mental Health Court Liaison Performance Working Group.

The National Mental Health Court Liaison Service Performance Working Group was established to assist in the conceptual development and technical specification of a
performance framework and key performance indicators for specialised Mental Health Court Liaison Services (CLS’s). The Working Group is comprised of nominated representatives of Forensic Mental Health Services from each Australian State and Territory, an Aboriginal and Torres Strait Islander representative & project investigators from the NHMRC CRE Offender Health (a list of working group members and other contributors to this document is included at the end of this document.

The role of the working group is to develop a Court Liaison Service specific framework and a set of key performance indicators that have been formed in consultation with key stakeholders and that complement Australia’s existing national mental health performance measurement approaches.

2016

Brain injury and the criminal justice system
27th June 2016, Kirby Institute, UNSW Australia

Monday June 27th saw an engaging, pioneering and productive workshop centred on the interaction between people with a brain injury and the criminal justice system. Hosted by the NHMRC Centre of Research Excellence in Offender Health and Brain Injury Australia this is the first time a national group has set out to discuss this issue important but neglected issue. As many as 80% of adult prisoners report sustaining a traumatic brain injury. Opened by Dr Mukesh Haikerwal, former president of the Australian Medical Association and Director of Brain Injury Australia, the workshop generated substantial interest from stakeholders and was attended by over ninety people from health, the judiciary, law, corrections, advocacy, and those with the lived experience of brain injury. The workshop produced wide ranging draft recommendations in a number of areas (such as screening, legislation and judicial education) along with commitments to continue the dialogue and to make submissions to a current inquiry for better integrated data sharing across judicial and health areas.

2016

Prisoner health research ethics roundtable
4th August 2016, Kirby Institute, UNSW Australia

On the 4th August 2016, the NHMRC Centre of Research Excellence (CRE) in Offender Health convened a national roundtable attended by twenty people involved in university,
Aboriginal, corrections, justice health, justice department and local health district research ethics committees.

The objectives of the day were to identify research ethics committee members’ views on the key ethical issues in health research involving prisoners, and to generate possible strategies for researchers and/or other stakeholders to address these issues.

The roundtable outcomes will form part of a broader consultation with other stakeholders in prisoner health research, including prisoners and prison health service directors, under the Health Research Involving Prisoners Project (HRIP) funded by the CRE.

Anticipated HRIP project outcomes include:
• Generate much needed stakeholder and public dialogue on the ethics of health research that involves prisoners
• Inform responsive, relevant and ethical prisoner health research, including research under the CRE in Offender Health

2015
Prisoner health deliberative roundtable
4th February 2015, Kirby Institute, UNSW Australia.

On the 4th February 2015, the NHMRC Centre of Research Excellence (CRE) in Offender Health hosted a national forum with key personnel involved in the delivery of prisoner health services to identify prisoner health research priorities, the ethical and institutional issues associated with the conduct of research in prisons, and opportunities for national, collaborative research opportunities for this area.

The roundtable outcomes will assist in planning the research agenda of the CRE in Offender Health over the next five years and assist other researchers to pursue policy relevant research. Outcomes of this roundtable will also form part of a broader consultation and research with other stakeholders in prisoner health such as ex-prisoners and Human Research Ethics Committee members.
Publications
Please note this is NOT a list of all publications arising from personnel affiliated with the CRE in Offender Health, rather a list of publications arising from projects funded by the CRE.

Journal articles


Reports


Davidson, F. (2015). Mental Health Liaison and Diversion: Court Liaison Services and Mental Health Court Programs in Australia. NHMRC Centre of Research Excellence in Offender Health, Kirby Institute, UNSW Australia.


**Submissions**

**Theses**
Gullotta, M. The Mental Health of Incarcerated Sex Offenders in New South Wales, submitted in partial fulfilment of the degree Master of Psychology (Forensics), UNSW.
Conference presentations

Please note this is NOT a list of all presentations arising from personnel affiliated with the CRE in Offender Health, rather a list of presentations arising from projects funded by the CRE.


Davidson, F. (2016). The benefits of cross border collaboration for court based forensic mental health services. Griffith University Forensic Mental Health Forum, Brisbane, Queensland, 24th June.


CRE in Offender Health Annual Symposium

Each year the CRE in Offender Health hosts an annual symposium with chief investigators and project team members to discuss the progress of projects over the past year and to discuss future directions of the CRE in Offender Health. Key stakeholders within the prison health and criminal justice system are also invited to attend the symposium’s.

Since the commencement of the CRE in Offender Health, there have been two annual meetings designed to showcase the diversity of the projects funded and/or supported by the CRE. Speakers have ranged from Professors to Masters students to give those at all levels the opportunity to discuss their work. In addition, projects presented have varied in stages of development, with those in the earlier stages benefiting from attendee feedback and suggestions.

The CRE plans to host future events that bring together individuals and organisations interested in the offender health field, including annual thematic workshops.
Below is a list of the presentations included in the past two annual symposiums.

**CRE in Offender Health Annual Symposium 2015**
1. Views of prisoners on the involvement of prisoners in research – A citizen’s jury approach (Dr Paul Simpson, Kirby Institute)
2. Reducing offending behaviour in repeat violent offenders using omega-3 fatty acids: A RCT feasibility study (Laura Miles, Neuropsychiatry, HNE Health)
3. Comparing the psychosocial health status of sex and non-sex offenders in NSW prisons (Mathew Gullotta, Kirby Institute)
4. Sex offenders in NSW: A study linking health service contact and other health outcomes (Prof David Greenberg, JH&FMHN)
5. Improving mental health screening of prisoners (A/Prof Kimberlie Dean, JH&FMHN)
6. A comparison of court liaison and court diversion services in Australia for people with mental disorders (Fiona Davidson, UQ/QLD Forensic Mental Health team)
7. Building the infrastructure for antiviral treatment of chronic hepatitis C in prisoners across Australia (Prof Andrew Lloyd, Kirby Institute)
8. Juvenile offending and later health outcomes: A data linkage study (Dr Melanie Simpson, Kirby Institute)
9. Healthcare for prisoners: Assessing the societal and prisoner perspectives of its value (A/Prof Georgina Chambers, NPESU)

**CRE in Offender Health Annual Symposium 2016**
1. Introduction by A/Prof Richard Matthews (NeuRA Board of Directors)
2. Reducing offending behaviour using omega-3 fatty acids: A RCT feasibility study (A/Prof Peter Schofield, Neuropsychiatry, HNE Health)
3. 2016 National Prison Entrants’ Bloodborne Virus Survey (Dr Melanie Simpson, Kirby Institute)
4. Health research involving prisoners: Assessing stakeholder views on research priorities and ethical issues (Dr Paul Simpson, Kirby Institute)
5. Psychosis and offending in NSW - A data linkage study (Dr Armita Adily, Kirby Institute)
6. Stages of psychosis project/improving mental health screening of prisoners (A/Prof Kimberlie Dean, JH&FMHN)
7. A comparison of court liaison and court diversion services in Australia for people with mental disorders (Fiona Davidson, UQ)
8. Reducing impulsivity in repeat violent offenders using an SSRI (Lee Knight, Kirby Institute)
9. Health care for prisoners: Assessing the societal and prisoner perspectives of its value (Stella Settumba, Kirby Institute)
10. Comparing the psychosocial health status of sex and non-sex offenders in NSW prisons (Mathew Gullotta, Kirby Institute)