



30 years of responding to social justice policy

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The Beginning



- **1983 Stan McCormack created “the Epistle Centre” ex-offender drop in centre in Fitzroy (staffed largely by volunteers)**
- **1987 The Epistle Centre received (SAAP) funding to establish McCormack House a half way house for male ex-prisoners**
- **30 years on ACSO has assisted more than 100,000 offenders transition into the community, many with complex needs**

The 90's



Evolving from 90's era of change

1. Closure of psychiatric institutions:

- * Left many at risk of homelessness, particularly at times of acute illness and contributed to heightened risk or incidence of involvement with criminal justice system for those with serious mental illness (Robinson 2003)**

2. Changes to sex offender legislation (1990s)

- * Exit points for sex offenders were restricted as accommodation option subject to environmental scans to maximise community safety.**

3. Changes in public housing focus (1990s & 2000s)

- * No new stock for singles the focus was to on families.**
- * Decline in the availability of low cost housing.**

Meeting the need with new support options

- * **Supported Residential Houses x 6**

Starting with Francis House for I.D & Dual Disability offenders

- * **Forensic disability and Psychiatric**

prison in-reach and community outreach services

- * **Specialist Sex offender supports**

pioneered by a Sister Claire McShee

- * **Forensic employment support (I.D and mental health)**

- * **McCormack House**

Became specialist offenders with a severe psychiatric illness at risk of homelessness

McCormack House

The Psychosocial experiment



Staff Quote

“Their illness creates challenges for us, but when the illness is treated they can revert back to their youth stuff,

but these guys were not young anymore. Their personalities were frozen in time, as if the illness came in and stopped them progressing from an adolescent mindset.

when these guys got together in the house they often would resurrect the ‘posse’ creating real challenges for staff...”

Former Staff Member

More than just accommodation

“Most of our residents can’t connect, they're chronic bridge burners, their only networks are drug dealers or people from prison; they’re often exploited by other crims.

So getting along with each other was a big deal.

The communal TV room and the Foxtel was like a candle to moths forcing them to sit, share and negotiate programs.

Then you’d get a bit of a social thing going on which they probably hadn’t had for many, many, years, if ever.”

Former staff member

The F word



Prisons the new Asylums



From 2009 Victorian Governments Mental health matters campaign

Victorian prisons currently hold approximately 1150 people with diagnosed mental illness (28 % of prisoners).500 have psychosis and 700 have depressive conditions.

The prevalence of psychiatric illnesses is (three to five times more common among prisoners) compared to the general community.

Stella

Case Study one

Stella was placed into foster care at eight years old due to a history of abuse in her family

- **Stella started using drugs in her early teens**
- **14 years was charged for theft.**
- **17 Incarcerated first time driving unlicensed**
- **17 Pregnant, child removed at 3 months**
- **18 years commenced self harming,**
- **At 42 Stella has been incarcerated thirteen times mostly for bank fraud, theft and burglary, including eight failed paroles and has breached bailed on several occasions.**

Rebuilding Stella

Services provided by ACSO included:

- **Pre-release 2 months negotiations with the APB and VLA**
- **Negotiated with mental health services which typically did not offer a service to individuals with client's diagnosis**
- **Linked in with counsellor re: AoD and abuse issues**
- **Linked in with local GP**
- **Liaison with TAC and solicitors**
- **Negotiation with Office of Housing to maintain stable housing**
- **Extensive outreach and emotional support**
- **After hours on-call support**
- **Arranging access to Disability Support Pension**
- **Linked into Employment Program**

Turn lives around at first correctional contact

It is our view that had Stella received seamless provision of support services from (first point of contact with the criminal justice system), her capacity to comply with community based dispositions or parole at an earlier time in her offending career would have been enhanced. Stabilisation of Stella's housing was critical to reducing the likelihood of her re-offending.



The story so far

Stella completed her parole for the first time in her offending career. She has not offended for nearly two years. She has maintained stable accommodation and reunited with her daughter & family.

Stella has reduced her illicit drug taking and no longer self harms. Stella has completed a TAFE course and gained some part-time work



Souvlaki with the lot

Stan's Story

Stan is a 33 year old man of Greek origin with a long offending history. Stan has collectively spent 12 years in prison .

Stan's presenting problems are:

- **Schizophrenia**
- **Drug & Gambling addiction**
- **Non compliancy with treatment**
- **Borderline intellect**
- **Borderline personality traits**
- **No insight / Impulsivity**
- **Anti social behaviours**
- **Aggression especially towards family**



Recipe for disaster

The list of problems:

- ‡ Had not been referred to ACSO or any service
- ‡ No clinical follow up had been arranged
- ‡ The list recommendations was ignored despite the same C.C.O being appointed
- ‡ No welfare payment reinstatement was arranged
- ‡ No pharmacotherapy had been arranged despite being on methadone in prison.
- ‡ No release medication for his Mental illness was given upon release
- ‡ No release papers needed to establish his benefit were given



Wish list

- **Recognize and applaud the new initiatives & the changes thus far**
- **At first contact identify and engage the specialist services needed for special needs offenders**
- **Resource services for assertive response and not drawn out referral processes**
- **Release planning at the front door of corrections**
- **Shared data set between correctional, clinical and social services; including eligible NGO's**
- **Training for agencies working with people on orders or with offending histories**



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