

2025 30 Sep - 2 Oct

Safer communities conference: Creating better outcomes for justice involved people







PRATO 2025

Safer communities conference: Creating better outcomes for justice involved people

Monash University Prato Campus 30 September - 2 October 2025

Proudly partnered with Monash University, sponsored by Forensicare







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DISCLAIMER: At the time of publication, all information contained in this booklet is correct; however, the organising committee, its sponsors and its agents cannot be held responsible for any changes to the final structure or content of the program, or any other general or specific information published here.

WELCOME

Incapacitation and retribution are 'default' responses to people who commit crime in many jurisdictions around the world. These responses have broad and lasting social, legal, economic and health consequences. Media and public discourse around crime is typically reactionary, particularly for youth crime, where punishment and control are emphasised despite most crimes being rooted in broader social circumstances. Expanding prisons and relying on surveillance and punishment is unsustainable and unnecessary since many prevention and intervention strategies can deter crime and facilitate desistance.

This 'Safer Communities' conference is designed to bring together practitioners, legal decision makers, advocates, researchers and policy contributors to explore new and different ways of responding to criminal behaviour and the people who commit criminal acts, creating lasting positive impacts for people of all ages. We invite presenters to take a life-course perspective and to consider how efforts at various stages of the lifespan can enhance community safety and improve the trajectories of people who are justice involved.

We look forward to welcoming you to Prato.

Rosemary Sheehan and Michael Daffern

Conference Convenors

IMPORTANT INFORMATION

PRESENTERS

Presenters using data projectors are asked to load their presentations onto the computer in the room where they will be presenting in a break prior to the presentation. If you need help with this, please see the technician or ask at the Registration Desk. Presenters are asked to convene at the front of the appropriate room with the Chair of their session a few minutes before the start of the session.

NAME BADGES / TICKETS

Admission to all sessions and catering is by the official conference name badge – please wear it at all times when at the conference. Tickets are necessary for non-delegates at the Forensicare welcome reception and conference dinner.

SOCIAL PROGRAM

The Forensicare Welcome Reception will be held at Interludio il Ristorante from 5.30pm at Via Pomeri, 64. Entry to the welcome reception is included in the registration fee, all delegates are invited to attend. If you require an additional ticket for a guest, please ask at the registration desk. The venue is a 10-minute walk from the conference venue, we will walk as a group directly from the conference centre to the welcome reception venue.

Delegates will enjoy the stunning surroundings of the Villa II Granduca for the Conference Dinner on Wednesday 1st October. Villa II Granduca, located in Carmignano, is a beautiful Tuscan villa located in the Medici hills. The Villa is surrounded by expansive gardens, and offers a spectacular view toward Florence's Battistero and Duomo. Delegates will be transported from the Monash University Prato campus to the venue via bus. Dinner is included in the registration fee, if you require a ticket for a guest (cost is AU\$165 per person) please ask at the registration desk, late bookings may be possible.

Please assemble on the street in front of the Monash Campus at 5.15pm SHARP. The group will then walk to the bus departure point (a very short walk).

SPECIAL DIETARY REQUIREMENTS

There will be ample vegetarian and gluten free options for all lunches, these will be found on the main catering tables. At the dinner, those who provided dietary information will need to identify yourself to catering staff.

INTERNET ACCESS

Instructions for accessing wi-fi are available at the registration desk. Delegates are welcome to use the desk top computers in the computer lab. Photocopying and printing can be arranged on a user-pays basis.

MONASH PRATO CAMPUS FLOOR PLAN **KEY ROOMS** Ground floor: Piano terra 1 Sala Caminetto (Registration desk) Vicolo Fior di Vetta Salone Grollo 2 Sala Veneziana 6 7 Espresso bar Sala Biliardo 8 (Catering) 9 Sala Specchi (Catering) **COURTYARD** 15 Sala Giochi 20 Terrace Via Puglies, 26 27 Computer lab First floor: Primo piano Via Giuseppe Garibaldi 15 7 **COURTYARD** 6 20 27 2 1

Via Pugliesi, 26

MONDAY WORKShops SEPTEMBER 29

9.00am - 12.30pm Workshops 1 and 2

Workshop 1: Andrew Carroll

Sentencing and Psychopathology: addressing contemporary challenges

Workshop 2: Barry Rosenfeld

Recent Developments in Culturally-Sensitive Forensic Mental Health

Assessments

10.40am - 11.00am Morning tea

11.00am - 12.30pm Workshops 1 and 2 (second half)



2.00 pm Walking tour

Meet at the entrance to the Monash Prato

campus.

4pm Wine tasting (session one)

Meet at aTipico Shop. Via Benedetto

Cairoli, 14

5pm Wine tasting (session two)

Meet at aTipico Shop. Via Benedetto

Cairoli, 14

Bookings essential for all of the above. Tickets are available on the conference website unless sold out.

TUESDAY SEPTEMBER 30

8.30am - 9.00am Registration

9.00am - 9.15am Welcome and conference opening

Professor Michael Daffern

9.15am - 10.15am Keynote Address: Susan McVie

Chair: Michael Daffern

10.15am – 10.35am Morning tea

10.35am - 11.35am Morning parallel sessions 1A, 1B and 1C

11.35am - 11.40am Session transition

11.40am - 12.40pm Morning parallel sessions 2A, 2B and 2C

12.40pm - 1.30pm Lunch

1.30pm - 2.30pm Afternoon parallel sessions 3A, 3B and 3C

2.30pm - 2.35pm Session transition

2.40pm - 3.40pm Afternoon parallel sessions 4A, 4B and 4C

3.40pm - 4.00pm Afternoon tea

4.00pm - 5.00pm Keynote Address: Carlo Garofalo

Chair: Michael Daffern

5.30pm - 7.30pm Forensicare welcome reception

MORNING PARALLEL SESSIONS 1A - 1C

| SESSION 1A SALONE GROLLO | SESSION 1B SALA VENEZIANA | SESSION 1C SALA GIOCHI |
|---|--|---|
| Papers Working together to improve forensic systems and practice | Papers Cultural considerations in justice | Papers Novel prevention and intervention practices |
| Chair: Rachael Fullam | Chair: Benjamin Spivak | Chair: Margaret Nixon |
| 10.35am Everyday Respect: Reducing professional stigma in forensic mental health Shelley Turner, Julia Douglas page 55 | 10.35am Responding to criminal behaviour among Indigenous youth: Finding a better balance. Julia Loane page 38 | 10.35am Systemic Interventions for High-Risk Sexual Offenders: A Community-Based Approach to Enhance Desistance and Community Safety Laura Jakul page 38 |
| 11.05am Establishing Standards of Care for Forensic Mental Health Systems: An International Delphi Consensus-Building Study Marichelle Leclair page 42 | 11.05am Centering Culture in Sentencing: The Role of Cultural Assessment Tools in Criminal Justice Mitigation Shawna Paris page 47 | 11.05am Evaluating Sexual Homicide Offender Typologies Aleshia Nanev page 46 |

Session close: 11.35am

MORNING PARALLEL SESSIONS 2A - 2C

| SESSION 2A SALONE GROLLO | SESSION 2B SALA VENEZIANA | SESSION 2C SALA GIOCHI |
|---|--|--|
| Papers Advances in understanding and intervening in youth justice | Round table Bridging the Divide: An exploration of the transitions between custodial settings and community based options for people deemed unfit to plead or mentally impaired. | Papers Managing risk and consumer safety |
| Chair: Ashley Batastini | 11.40am Chair: | Chair: Michael Daffern |
| 11.40am | Jacqui Brown | 11.40am |
| Integrating Trauma Informed Care and the Risk-Need- Responsivity Model to Support Case Planning with Adolescents Experiencing Youth Justice Involvement Keith Cruise page 34 | page 59 | Examining Aggression Prevention Interventions in Acute Mental Health Inpatient Units Gracie Tan-Singh page 54 |
| 12.10am | | 12.10am |
| Young People's Meaning Making of Pathways between Care and Custody: 'We all see the same things, some are just lucky enough to stay with family' Jordan White page 56 | | Development of Safewards Secure for Custodial Mental Health settings Tess Maguire page 44 |

Session close: 12.40pm

AFTERNOON PARALLEL SESSIONS 3A - 3C

| SESSION 3A SALONE GROLLO | SESSION 3B SALA VENEZIANA | SESSION 3C SALA GIOCHI |
|--|--|--|
| Papers Understanding and preventing family violence | Papers Family violence, maltreatment and child welfare | Papers Preventing revictimisarion |
| Chair: Troy McEwan | Chair: Tess Maguire | Chair: Nathan Kolla |
| 1.30pm A long-term study of same victim and different victim stalking recidivism Catie Bridgeman page 32 | 1.30pm The Voice of Early Childhood Educators: Supporting the Social Functioning of Children Exposed to Intimate Partner Violence Madison Schulz page 50 | 1.30pm Are generations of traditional practices "packed away and left behind" when one migrates or flees from their country of origin seeking safety and security? Judy Saba page 49 |
| 2.00pm Enhancing the safety and wellbeing of women and children affected by domestic violence Susanne Strand, Martina Vikander page 53 | 2.00pm Parent-child relationship risk factors for child maltreatment: Confirmation of the evidence-base through a systematic review Maddison Riachi page 48 | 2.00pm Can Insights from Domestic Violence Homicides Inform Indicators and Risk Factors to Mitigate Future Homicides? Amy Mouafi page 45 |

Session close: 2.30pm

AFTERNOON PARALLEL SESSIONS 4A - 4C

| SESSION 4A SALONE GROLLO | SESSION 4B SALA VENEZIANA | SESSION 4C SALA GIOCHI |
|---|--|---|
| Symposium Gender and Crime: Female Sex Offending, Pink-Collar Criminals, and Avoiding Gender Bias | Papers Advances in understanding and intervening in youth justice | Papers Taking a Closer Look at Personality Disorder |
| Chair: Susan Hatters Friedman | Chair: Tess Maguire | Chair: Michael Daffern |
| 2.40pm Avoiding Gender Bias Andrew Howie Female Sex Offending Renee Sorrentino Pink-Collar Crime: Gender, Embezzlement, and | 2.40pm Outcome and economic evaluation of the Embedded Youth Outreach Program Rachael Fullam page 35 | 2.40pm The Specificity, Validity, and Clinical Utility of Criterion A of the Alternative Model of Personality Disorders for Antisocial Personality Disorder and Antisociality Nathan Akoka page 30 |
| Narcissism Susan Hatters Friedman page 62 | 3.10pm Hooks for Change- Early intervention in the youth offending cycle Brendon Crompton page 33 | 3.10pm Targeting opioid neurotransmission in borderline personality disorder with self-harming behavior: Preliminary findings of a [11C]NOP- 1A positron emission tomography study Nathan Kolla page 40 |

Session close: 3.40pm

WEDNESDAY OCTOBER 1

9.00am - 10.00am Keynote Address: Nicola Carr

Chair: Rachael Fullam

10.00am - 10.20am Morning tea

10.20am - 11.20am Morning parallel sessions 5A, 5B and 5C

11.20am - 11.25am Session transition

11.25am - 12.25pm Morning parallel sessions 6A, 6B and 6C

12.25pm - 1.10pm Lunch

1.10pm - 2.10pm Keynote Address: Andrew Carroll

Chair: James Ogloff

2.10pm - 2.15pm Session transition

2.15pm - 3.15pm Afternoon parallel sessions 7A, 7B and 7C

3.15pm - 5.15pm Free time

5.15pm - 5.30pm Walk from Monash campus to bus departure point

5.30pm - 6.00pm Bus to Villa il Granduca, Carmignano

6.00pm - 10.00am Conference dinner

WEDNESDAY

MORNING PARALLEL SESSIONS 5A - 5C

| SESSION 5A SALONE GROLLO | SESSION 5B SALA VENEZIANA | SESSION 5C SALA GIOCHI |
|---|--|---|
| Papers Navigating Complexity | Papers Rehabilitation and reintegration in forensic mental health services | Papers Understanding violence and the assessment of risk |
| Chair: Nichola Tyler | Chair: Troy McEwan | Chair: Caleb Lloyd |
| 10.20am Seeing Complexity Clearly: Introducing the PRISM Model as an Intersectional Framework for Supporting Complex Clients Jessica Griffith page 36 | 10.20am Core Forensic Model: An innovative structured clinical approach to facilitate a clear and cohesive pathway for consumers and clinicians throughout the recovery journey Tobias Mackinnon page 43 | 10.20am A meta-analysis comparing risk scores and recidivism prediction across ethnicity subgroups within female samples Will Liheng Xu page 57 |
| 10.50am Inter-Departmental Clinical Panels: Enhancing accountability and outcomes for people with complex needs Renee Sinclair page 52 | 10.50am Worlds Apart: An occupational therapy perspective on the transition from institutional to community settings Victoria Athanasiadis page 30 | Preliminary Validation of the Italian Version of the Functions of Aggression Questionnaire Irene Severi page 51 |

Session close: 11,20am

WEDNESDAY

MORNING PARALLEL SESSIONS 6A - 6C

| SESSION 6A SALONE GROLLO | SESSION 6B SALA VENEZIANA | SESSION 6C SALA GIOCHI |
|---|---|---|
| Papers Improving the lives of Incarcerated mothers | Papers Better outcomes for young people in care | Papers Culture, crime and rehabilitation |
| Chair: Maddison Riachi | Chair: Margaret Nixon | Chair: Ashley Batastini |
| Supporting incarcerated mothers and their children in a new, co-created model for individual-, family- and systems-level change Susan Dennison page 35 | 11.25am "I believe they could have done better": A Retrospective Exploration of Pathways to Unlawful Behaviour among Adults placed in Youth Residential Care Jessica Kent page 39 | 11.25am Learning from our neighbours: An exploration of rehabilitation approaches for people who have offended in Asia Michael Daffern page 34 |
| 12.05pm Transforming the Lives of Incarcerated Mothers: Exploring the Safety, Stability, Wellbeing and Desistance Goals of Women in an Individually-Tailored Support Program Carleen Thompson page 54 | 12.05pm Research Praxis that Supports Desistance from Crime? An Exploration of the Transformative Power of Participatory Research with Young People who Experience Dual Intervention Jordan White page 56 | 12.05pm Revisiting an Untold Narrative, Stories of Trauma, Racism and Cultural Disconnection. Implications for Integrating Cultural Humility within a Multi-Cultural Mental Health Context. Mayio Konidaris page 41 |

Session close: 12.25pm

WEDNESDAY

AFTERNOON PARALLEL SESSIONS 7A, 7B and 7C

| SESSION 7C SALONE GROLLO | SESSION 7B SALA VENEZIANA | SESSION 7C SALA GIOCHI |
|---|--|--|
| Symposium Evaluating police responses to stalking Chair: Nichola Tyler | Round table A live applied diversity of thought roundtable exploring the conscious and unconscious bias' that impact decision making | Papers Innovative approaches to reducing seclusion Chair: Rachael Fullam |
| 2.15pm The Victoria Police Stalking Response Model Pilot: Experiences of victims. Margaret Nixon Police responses to stalking: An interjurisdictional review | by formal and informal responders to Domestic, Family and Sexualised Violence. Police exist within an ecosystem of responder, yet their impact on response, intervention, and prevention is still perceived as most significant. | 2.15pm From Confinement to the Community; Ending a Long-term Seclusion in NSW and Ongoing Challenges Calum Smith page 53 |
| Troy McEwan Impacts of the Victoria Police Stalking Response Model Benjamin Spivak page 65 | 2.15pm Chair: <i>Judy Saba</i> page 60 | 2.45pm Psychological Interventions in Close Management Units: Current Trends and Unresolved Needs Ashley Batastini page 31 |

Session close: 3.15pm

THURSDAY OCTOBER 2

9.00am - 10.00am Morning parallel sessions 8A, 8B & 8C

10.00am - 10.20am Morning tea

10.20am - 11.20am Keynote Address: Barry Rosenfeld

Chair: Troy McEwan

11.20am - 11.25am Session transition

11.25pm - 12.25pm Morning parallel sessions 9A and 9B

12.25pm - 1.10pm Lunch

1.10pm - 2.10pm Afternoon parallel sessions 10A and 10B

2.10pm - 2.15pm Session transition

2.15pm - 3pm Plenary Panel and conference close

Chair: Michael Daffern

THURSDAY

MORNING PARALLEL SESSIONS 8A - 8C

| SESSION 8A SALONE GROLLO | SESSION 8B SALA VENEZIANA | SESSION 8C SALA GIOCHI |
|---|---|---|
| Papers Improving the lives of women across the lifespan | Round table Nurturing connections between educators and psychologists: Strategies | Papers Safer futures for children |
| Chair: Caleb Lloyd | to facilitate alignment of service delivery within secure youth justice. | Chair: Michael Daffern |
| 9.00am Navigating Complexity: Improving Pathways of Justice and Care Experienced Girls and Women Donna-Maree Humphery page 37 | 9.00am Chair: Stavroola Anderson page 59 | 9.00am Longitudinal Trajectories of Dual (Online and Contact) Child Sexual Offending James R. P. Ogloff page 47 |
| 9.30am Understanding Aboriginal and Torres Strait Islander Women's connection to their Social and Emotional Wellbeing across the life span. April Goldring page 36 | | 9.30am The Lived Experiences of Individuals who Engage in Online Child Sexual Exploitation and Abuse Nicola Tyler page 46 |

Session close: 10.00am

THURSDAY

MORNING PARALLEL SESSIONS 9A - 9B

| SESSION 9A SALONE GROLLO | SESSION 9B SALA VENEZIANA |
|---|--|
| Papers Better outcomes for children | Papers Instrument validation |
| Chair: Benjamin Spivak | Chair: James Ogloff AM |
| 11.25am Balancing Protection and Connection: Contact Reluctance in Child Protection Matters Maddison Riachi, Lisa Forrester page 48 | 11.25am Are Malingering Screens Fit to Stand Trial? Nishant Krishnan page 41 |
| 12.05pm Advancing Risk Assessment in Cases of Child Maltreatment: An Analysis of Current Practices in the Children's Court of Victoria Caitlin Cohen page 32 | 12.05pm Predictive Discrimination and Calibration for a Dynamic Risk Tool Across Gender and Ethnicity Subgroups Within the Female Subsample in Aotearoa New Zealand Will Liheng Xu page 58 |

Session close: 12.25pm

THURSDAY

AFTERNOON PARALLEL SESSIONS 10A - 10B

| SESSION 10A SALONE GROLLO | SESSION 10B SALA VENEZIANA |
|---|---|
| Papers Preventing family violence | Symposium Can risk assessment ever be fair? It depends on what you mean by fairness |
| Chair: Rachael Fullam | Chair: Benjamin Spivak |
| 1.10pm The Role of Maternal Depressive Symptoms and Maternal Engagement as Mechanisms Between Intimate Partner Violence Exposure During Infancy and Social Functioning in Middle Childhood Madison Schulz page 51 1.40pm | 1.10pm Fairness in risk assessment: An overview of key concepts and debates Benjamin Spivak Fairness in IPFV Risk Assessment: The Good, the Bad, the Feasible? Houda Boucetta |
| What might be a next-generation intervention for people who have used family violence?: Considerations from the design and evaluation of Family Life's Talk4Change program Caleb Lloyd page 43 | LS-RNR Disparities in Australian Aboriginal Offenders: Statistical and Ethical Considerations Benjamin Spivak page 63 |

Session close: 2.10pm

FRIDAY WORKSHOPS OCTOBER 3

9.00am - 12.30pm

Workshops 3 and 4

Workshop 1: Nicola Carr

Community Sanctions and Measures – Alternatives to Custody or Widening the

Net of Punishment?

Workshop 2: Ashley Batastini

Using technology to support the delivery

of forensic mental health services

10.40am - 11.00am

Morning tea

11.00am - 12.30pm

Workshops 3 and 4 (second half)

WORKSHOPS

Monday September 30th

WORKSHOP 1

Title: Sentencing and Psychopathology: addressing contemporary challenges

Speaker: Andrew Carroll

Time: 9.00am - 12.30pm

Room: Sala Veneziana

In common law countries, the presence of mental health problems at the time of a criminal offence or at time of sentencing may play a key role in determining what penalty to impose on people convicted of an offence. As a result, forensic mental health evidence often plays a role in sentencing hearings. The relevant jurisprudence has evolved significantly over the past two decades.

In this workshop Dr Carroll will consider some of the challenges that now arise for both experts and lawyers in the generation and delivery of evidence at presentence hearings. In doing so, he will draw upon both empirical research and a selection of relevant cases.

In the first half Dr Carroll will consider the challenges related to retrospective analysis of factors relevant to the offending itself, including:

- childhood adversities;
- personality dysfunction; and
- factors proximal to the crime, including symptoms of mental illness.

He will discuss the pitfalls inherent to the task of considering the connections between such factors - sometimes called 'causal links' - and offending behaviour.

In the second half, Dr Carroll will consider the challenges related to prospective analysis of mental health factors relevant to sentencing, including:

- prospects for rehabilitation;
- reoffending risk; and
- the anticipated burdensomeness and psychiatric harms of imprisonment.

The workshop will be of particular interest to forensic mental health experts who conduct presentence assessments and also legal practitioners (both defence and prosecution) working in crime.

MONDAY September 30th

WORKSHOP 2

Title: Recent developments in culturally-sensitive forensic mental health

assessments

Speaker: Barry Rosenfeld

Time: 9.00am - 12.30pm

Room: Sala Giochi

This half-day workshop will cover a range of issues related to forensic mental health assessment (FMHA) of individuals from diverse ethnic and linguistic backgrounds. The last decade has witnessed a surge in awareness of the many challenges that arise when applying forensic evaluation techniques to individuals from a different language or culture. This workshop will address a number of recent developments in culturally-sensitive assessments, with particular emphasis on steps that can or should be taken in advance of the assessment, the impact of language and culture on the therapeutic alliance, cultural influences on violence risk assessment, and decision-making regarding psychological testing. Relevant ethical issues related to cross-cultural forensic assessment will be integrated throughout the workshop, as appropriate and case vignettes will be used to highlight relevant issues and techniques.

FRIDAY October 3rd

WORKSHOP 3

Title: Community Sanctions and Measures – Alternatives to Custody or Widening

the Net of Punishment?

Speaker: Nicola Carr

Time: 9.00am - 12.30pm

Room: Sala Veneziana

Community Sanctions and Measures (CSMs) such as probation and community service have long been advocated as alternatives to custody. In many countries the use of such measures as well as the range of conditions and options that can be attached has proliferated, however, there is mixed evidence about the overall impact on the reduction of prison populations. In Europe for instance, there is evidence that in some contexts the expansion of community sanctions and measures has widened the net of punishment while in the United States there have been calls to abolish community sanctions in the wakes of 'mass supervision'. This workshop will explore these tensions as well as the underpinning arguments and evidence base.

In the first part of the workshop Professor Carr will explore the rationalities underpinning the use of CSMs and research evidence regarding their use and effectiveness. This will include an outline of:

- · International standards promoting the use of community sanctions and measures;
- · Research evidence regarding implementation and impact.

The second part of the workshop will explore recent empirical research on how community sanctions and measures are practiced and experienced. This will include an exploration of some of the innovative methodologies and approaches used in this research.

This workshop will be of particular interest to practitioners working the field of community sanctions and measures and prisons as well as legal practitioners.

FRIDAY October 3rd

WORKSHOP 4

Title: Using technology to support the delivery of forensic mental health services

Speaker: Ashley Batastini

Time: 9.00am - 12.30pm

Room: Sala Giochi

For many forensic mental health clinicians across the globe, the onset of COVID-19 forced a reconsideration of what best practices look like. While technologies like videoconferencing platforms were more widely embraced by other sectors of mental health well before the pandemic, forensic professionals tended to lag in their acceptance. To justify their resistance, there was relatively little guidance for forensic mental health in either the research or practice literature. But, how much farther have we come in the past five years? Is there anything else we need to know? And, what other technological advances relevant to forensic work might be coming up on the horizon?

The first third of this workshop will outline the historical progression and current knowledge base regarding the application of videoconferencing technologies (VCT). Topics covered will include:

- 1. The emergence of VCT as a supportive tool in providing mental health services generally and within forensic psychology and psychiatry specifically.
- Broader practical benefits and meta-analytical findings regarding the effectiveness of VCT vs. traditional in-person service delivery.
- 3. The impacts of COVID-19 on forensic mental health practice, particularly regarding assessments.
- Several key research findings on the acceptability, feasibility, and reliability of using VCT to administer forensic assessment tools.
- 5. Current research limitations and areas of additional research need.

The second third of the workshop will focus on practice recommendations when incorporating VCT including:

- 1. Determining the appropriateness of VCT
- 2. Preparing for a VCT session
- 3. Maximizing individual privacy and security of information

- 4. Ensuring validity is not compromised when modifications are made to accommodate the virtual environment.
- 5. Monitoring engagement and handling difficult response styles
- 6. Transparency in report-writing

The final third of the workshop will introduce attendees to emerging technologies (e.g., machine learning) that have implications for forensic mental health practice, provide guidance on how to appropriately integrate technology into everyday practice, and share several precautions and moral anchors to keep in mind as the field continues to evolve.

This workshop would likely be of interest primarily to forensic practitioners who conduct evaluations for the courts; however, some discussion will centre on how technology can be used for forensic clinical care services.

KEYNOTES

Protecting the Public or Punishing the Child? Juvenile Criminal Records and Human Rights Standards

Nicola Carr

Professor and Chair of Social Work and Social Policy in Trinity College Dublin

The long-lasting impacts of criminal records has been the subject of increased research and scholarly debate in many countries. The expanding reach of criminal record disclosure requirements has negative impacts on people's life prospects, including limiting access to employment, housing and other citizenship rights. At the same time, an increased emphasis on public protection, safeguarding and risk prevention has provided a justification for wider criminal record disclosure. While many countries have different disclosure regimes for criminal records acquired in childhood, including provisions for sealing or expungement of such records, there are multiple examples of increased blurred boundaries between youth and adult systems, particularly in cases of serious offending. International instruments such as the UN Convention on the Rights of the Child and the Beijing Rules emphasise privacy, reintegration, and the non-use of juvenile records in adult life. Youth justice systems should be grounded on principles of welfare, confidentiality, and the recognition that most young people grow out of crime. The disclosure of juvenile criminal records compromises these principles. Drawing on empirical research and international comparisons, this presentation will highlight some of the difficulties and paradoxes with current regimes.

The long road to Bondi Junction: six shifts that made schizophrenia unrecognisable

Andrew Carroll

Adjunct Associate Professor at the Centre for Forensic Behavioural Science

The coronial inquest into the tragic events at Bondi Junction (Sydney, Australia) in 2024 involving Joel Cauchi, a man suffering from treatment resistant schizophrenia, brought into focus the treatment that he received in the preceding years. The inquest heard that his mother told police: "I don't know how we're going to get him treatment unless he does something drastic." Such pleas for proactive treatment of a treatable disease before it results in preventable harm are alarmingly common in contemporary mental health care. Why is this, and what does it say about our current approach to treating mental illness?

In this presentation, jointly developed with a fellow forensic psychiatrist Dr Calum Smith, I argue that Bondi Junction and similar tragedies are best understood as the end point of an unwitting paradigm shift in our approach to severe mental illness - exemplified in our treatment of schizophrenia - and the risks that such diseases entail.

I outline six mutually interacting shifts that have underpinned this change. The key shift, still largely under-recognised, has been the impact on our understanding of the disease secondary to the process of deinstitutionalisation. I will argue that this impact, together with associated sociopolitical shifts, signals a new episteme with respect to schizophrenia. This new episteme frames what we 'know' about schizophrenia: its presentation, its progress, its risk, and its treatment - in a radically different way.

I argue that the outcome of this epistemic shift is what we see today: systematic neglect of the needs of people suffering with schizophrenia, with associated failure to act on pleas from family members to treat a treatable illness. This neglect not only results in preventable suffering and criminalisation of those with severe mental illness, but has significant implications for community safety. After this I offer some tentative ideas for a way out of this dangerous situation.

Nobody's Patients: Historical, Contemporary, and Future Perspectives on Treatment and Rehabilitation for Individuals who have Offended in Italy

Carlo Garofalo

Senior Assistant Professor at the University of Perugia (Italy), Department of Philosophy, Social Sciences and Education

The goal of this talk will be to provide an overview of historical traditions as well as current practices in research and interventions with individuals who have offended in the Italian context. Departing from a general description of patterns of crime in Italy, a brief history of societal approaches to deal with and care for individuals who have committed crimes and present with mental health needs will be traced. Further, the talk will focus on the current situation that sees forensic mental health patients lie at the intersection between the Criminal Justice and Mental Health systems and an arbitrary divide between "mental health" and "psychological well-being" services. Finally, future perspectives on forensic mental health will be presented based on the recently published National Plan for Actions on Mental Health 2025-2030. Within this context, arguments and approaches for scaling up psychological research and interventions aimed at preventing and countering criminal behavior will be presented focusing on new avenues in research on emotion regulation, motivation, and personality functioning across the lifespan, and - more generally - on a transition towards dimensional models of psychopathology that focus on mechanisms and processes rather than diagnostic entities. In conclusion, examples of current regional best practices for psychological interventions for individuals who have offended will be presented.

Policing vulnerability: Generating insights through administrative data linkage

Susan McVie

Chair of Quantitative Criminology at the School of Law, University of Edinburgh

A high proportion of people who pass through justice systems have underlying health vulnerabilities, including mental illness and drug or alcohol addictions. As gatekeepers into the system, police officers play a key role in managing a host of social ills, many of which stem from system failures in other public or third sector services. And yet there is a distinct lack of information and evidence about the nature and extent of the vulnerabilities which underpin a growing rate of demand for frontline police service. In particular, the health needs and concerns of those who are classed by officers as vulnerable are largely unknown, which creates difficulties in ensuring they are dealt with appropriately. In an innovative new study, data from policing and health is being linked through administrative systems in Scotland to enable insights to be gleaned about a large cohort of vulnerable individuals who have been subject to police intervention. In this presentation, I will use empirical data to highlight the strong connections between health vulnerabilities and policing and illustrate how this leads to justice inequalities. I will conclude by arguing for a 'whole system' partnership approach that places stricter parameters around the role of the police and ensures earlier and more effective health service supports for vulnerable people.

Forensic psychological assessment in a class action civil lawsuit: Assess "damages" in refugees from a foreign war?

Barry Rosenfeld

Professor of Psychology and Adjunct Professor of Law at Fordham University

Forensic mental health assessments are usually associated with high profile criminal cases but many of the same issues are equally applicable to the civil law. In fact, many civil cases draw as much, if not more attention than criminal cases (e.g., in the U.S., the Johnny Depp/Amber Heard trial or E. Jean Carroll v. Donald Trump case). This presentation will focus on a large class action lawsuit involving refugees from a civil war in Africa who are suing a major international bank that facilitated the genocide of large segments of the country. The case will serve as a vehicle to discuss a range of issues related to civil forensic assessment broadly, as well as the mechanics of consulting on a lawsuit involving large numbers of individuals, how cultural and linguistic diversity complicates psychological assessments generally, and the legal standards and challenges to expert testimony on these topics.

PAPERS

Papers are displayed in alphabetical order by first author surname

The Specificity, Validity, and Clinical Utility of Criterion A of the Alternative Model of Personality Disorders for Antisocial Personality Disorder and Antisociality

Mr Nathan Akoka¹, Associate Professor Gillinder Bedi ², Doctor Ashley Dunne ¹, Professor Michael Daffern

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Concern with traditional categorisation of personality disorders and advancements in the classification led to the development of the Alternative Model of Personality Disorders (AMPD) which was included in Section III of the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5). The Alternative Model includes two primary dimensions: impairments in self and interpersonal functioning (Criterion A, assessed by the Levels of Personality Functioning Scale, LPFS) and pathological personality traits (Criterion B), While much research has focused on Criterion B, there has been limited exploration of Criterion A, particularly in relation to antisocial personality disorder (ASPD) and antisociality more broadly. Evidence points to the potential benefit of using ASPDspecific Criterion A measures for assessing antisociality, rather than the LPFS which is a transdiagnostic conceptualisation of personality dysfunction. This presentation will discuss the ability of the LPFS to predict antisocial behaviour and its concordance with personality constructs related to antisociality (e.g., schema modes, early maladaptive schemas, antisocial beliefs, psychopathy). Additionally, the LPFS will be compared to ASPD impairment specific measures of Criterion A when determining its construct validity. Preliminary findings will be presented from a research project with approximately 100 young adult participants (18-25 years old) recruited from substance use treatment centres who completed semi-structured interviews and self-report measures. Clinical implications and recommendations for future research will be discussed.

Worlds Apart: An occupational therapy perspective on the transition from institutional to community settings

Ms Victoria V Athanasiadis

Complex Psychology, Melbourne, VICTORIA, Australia

There is a high prevalence of people with a disability in the forensic system who are afflicted by a history of generational trauma, failed systemic experiences and enduring

complex needs. In a climate of high demand and limited funding, forensic disability clients often fall through systemic gaps, leading to a pattern of repeated crises, which often leaves the complex, multiple needs of the individual unaddressed. Ultimately, this contributes to an enduring cycle of re-offending.

This presentation explores the challenges associated with individuals being released into the community who have become institutionalised, due to restrictive settings and experiential deprivation. Key observations about how occupational therapy can assist clients and their care teams to increase quality of life and support their successful transitions from institutional settings will be outlined. A detailed comparison of how the Model of Human Occupation (MOHO) can assist people transitioning from institutional to community settings, including how that model through an occupational therapy lens helps to understand the experience of an individual. Case studies will be explored that demonstrate how the role of an occupational therapist through appropriate assessment, planning and intervention has been particularly central for people with highly complex forensic and disability needs and future directions for interdisciplinary approaches will be discussed.

Whilst the presentation focuses upon the Victorian system, participants from all jurisdictions can benefit from this presentation, aimed at promoting the positive effects that early, proactive and person-centred intervention can have on all clients.

Psychological Interventions in Close Management Units: Current Trends and Unresolved Needs

Associate Professor Ashley Batastini

Centre for Forensic Behavioural Science, Swinburne University of Technology, Alphington, Victoria, Australia

While representing a relatively small proportion of the prison population, individuals who are currently housed in close management units, or are at risk of being placed on such units, are difficult to treat not only because of their complex mental health and rehabilitative needs, but also because the restrictive nature of the environment creates inherent barriers to intervention delivery. In this session, we will briefly summarise the history of close management, the research debate concerning the psychological effects of placement, and more recent efforts by researchers, policy-makers, and program developers to provide humane care to these individuals and reduce their time in high security units without jeorpadising institutional safety. Within this discussion, we will discuss extant program evaluation research and a recent systematic review on therapeutic alternatives to these units. Unfortunately, this subpopulation has received limited attention overall and best practices remain underdeveloped. We'll conclude by outlining additional considerations in the assessment and treatment of individuals in or at-risk of close management custody.

A long-term study of same victim and different victim stalking recidivism

Ms Catie Bridgeman, Prof. Troy McEwan, Dr Margaret Nixon

Centre for Forensic Behavioural Science, Swinburne University of Technology, Alphington, Victoria, Australia

Stalking is a complex behaviour that varies in motivation, actions, and victimology, and poses unique challenges for those seeking to assess and manage risk of harm. Little research has examined differences between individuals who reoffend against the same victim versus those who target a new victim. This study examined long-term stalkingrelated recidivism among people who attracted criminal justice attention for stalking in Victoria, Australia, from 2002 to 2013. Two hundred and twenty-one individuals charged with a stalking offence were recruited from a community-based forensic mental health service. Police charge data was then used to characterise who went on to stalk again, whether this was the same or a different victim, and length of time to reoffence. Nearly 1 in 3 recorded a second stalking-related offence over a mean follow-up of 11.1 years. The majority of those who reoffended targeted a different victim, however those who targeted the same victim resumed stalking more quickly. Chi-square and survival analyses revealed that individuals who are preoccupied with the index victim are more likely to stalk again, target the same victim, and be charged with a stalking offence earlier. Our findings highlight the importance of distinguishing same victim and different victim stalking recidivism and point to individual risk factors of interest for further research, assessment, and intervention efforts.

Advancing Risk Assessment in Cases of Child Maltreatment: An Analysis of Current Practices in the Children's Court of Victoria

Ms Caitlin L Cohen^{1,2}, Dr Maddison Riachi^{1,3,2}, Dr Harry J Dent^{4,2}, Dr Abigail T Sheed^{1,2,3,5}, Dr Nina L Papalia^{1,2}, Professor James Ogloff^{1,2}, Dr Benjamin L Spivak^{1,2}

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Child maltreatment is a widespread public health issue with profound and lasting consequences for survivors, families, and communities. Global estimates suggest that one in fifteen children experiences at least one form of maltreatment each year, and approximately 41,000 children die annually from maltreatment-related injuries. The long-term impacts of abuse and neglect are well-established, including increased risks of mental illness, substance use, educational disruption, and future involvement with child protection and justice systems.

Structured risk assessment is increasingly used in child protection and family law contexts to support the systematic evaluation of concerns about child safety and caregiver

functioning. This presentation will share preliminary findings from a broader validation study of two structured professional judgement (SPJ) tools currently used in Victoria: the Child Abuse Risk Evaluation (CARE) and the Child Protection Removal Assessment (Chi-PRA). Drawing on retrospective file reviews of 119 families referred to the Children's Court Clinic between 2017 and 2022, we independently coded 467 parent-child dyads to examine key psychometric properties and clinical utility.

The presentation will highlight early insights into the reliability and interpretability of SPJ ratings in complex family contexts and consider their relevance for clinicians working in child welfare and court-informed settings. Particular attention will be given to the importance of clear item definitions, shared rating frameworks, and structured guidance in supporting consistent and defensible practice. By contributing to the limited evidence base in this area, the project aims to support improvements in the quality, reliability, and transparency of risk assessment in child maltreatment cases.

Hooks for Change- Early intervention in the youth offending cycle

Mr Brendon S Crompton

Auckland University, Auckland, New Zealand. New Zealand Police Headquarters, Wellington, New Zealand

Hooks for Change is an early intervention program in New Zealand where an intensive personalised mentoring program is put in place for young people on their first appearance in the Youth Court and prior to the statutory Family Group Conference process. The program looks to provide support and guidance to the young person and where required their family immediately after the offending has occurred. This recognises that the young person maybe at a point of crisis and that by only following the statutory process, (which is not immediate) an intervention may not be allocated till several months later in this young person's life.

Results have shown a distinct reduction in breaches of bail and further offending for the cohort on the Hooks for Change program when compared with a similar cohort that is not.

Research of the program has shown that for every \$1 spent on the program it saves the Government over \$7 in future costs.

This program could be easily adapted to work in other youth justice jurisdictions internationally.

Integrating Trauma Informed Care and the Risk-Need-Responsivity Model to Support Case Planning with Adolescents Experiencing Youth Justice Involvement

Dr. Keith Cruise

Fordham University, Bronx, NY, USA

Advances in understanding the impact of trauma have increased attention to trauma informed approaches to service planning with adolescents experiencing system involvement. Trauma informed approaches can be viewed by professional as conflicting with the risk-needs-responsivity approach to service planning in how to prioritize and deliver services. This paper presentation will highlight preliminary findings from a systematic literature review examining associations between traumatic event exposures, trauma reactions, and dynamic delinquency risk factors. Integrating these two approaches should be informed by the empirical evidence unpacking and highlighting the complexity of these associations to inform service planning. Focusing on two dynamic delinquency risk factors (e.g., substance abuse, family problems), this presentation will highlight and summarize findings examining (a) evidence of cumulative traumatic events and association with delinquency risk, (b) associations between trauma reactions and delinquency risk, (c) any evidence of indirect effects attributed to trauma reactions, and (d) differential patterns by key demographics. Through this systematic approach, we can better understand trauma as a responsivity factor and how trauma influences these dynamic delinquency risk factors which are critical to supporting youth recovery and delinguency risk reduction.

Learning from our neighbours: An exploration of rehabilitation approaches for people who have offended in Asia

Professor Michael Daffern

Centre for Forensic behavioural Science, Melbourne, Victoria, Australia

Rehabilitation approaches for criminal justice and forensic mental health services originated in the West and have spread around the world. However, questions have been raised about whether these models are appropriate in Asian jurisdictions that have very different histories, cultures and resources. It is also increasingly clear that various therapeutic modalities and ways of working with people who have offended exist. The need for openness to explore various ways of helping people change and a comparative analyses of interventions and rehabilitative approaches is burgeoning. This presentation provides an overview of rehabilitation approaches in multiple Asian jurisdictions, exploring the extent to which Western models have been imported and how they have been adapted. It also describes some different approaches that are embraced in some Asian jurisdictions. Such information may help practitioners and policy makers create new services and adapt their own practices to meet the needs of the communities they serve.

Supporting incarcerated mothers and their children in a new, co-created model for individual-, family- and systems-level change

<u>Professor Susan Dennison</u>, Professor Tara R McGee, Professor Janet Janet, Dr Carleen Thompson, Ms Tina Lucas-Smith, Ms Jaime O'Donovan

Griffith University, Brisbane, QLD, Australia

It is well established that women's pathways into justice-involvement differ to men's, and that maternal incarceration can have profound and lasting impacts on children. Disrupting intergenerational cycles of disadvantage, trauma, and offending requires addressing the complex and interacting social determinants of justice involvement. The Transform Lives Program commenced in Queensland (Australia) in 2024 to deliver a transformative system of practice for incarcerated mothers and their children, empowering families to have safe, dignified and fulfilling lives. The program was co-created with women in prison and is nested within a broader socioecological model, including activities to remove system barriers for effective and integrated service delivery and promote and sustain systems change across key government agencies. Through a case study, we will explore the individualised, multi-systemic support provided to mothers and their children, for up to 6 months prior to mother's release and for up to three years post-release. This includes intensive and complex case management, advocacy, therapeutic interventions, and service integration, while holding women's and children's voices at the centre of all support. Using the case study, we also highlight where and why case escalations to senior levels of government have been required to overcome system barriers, how this occurs, and the meaningful outcomes that can be achieved when women and children receive the right support at the right time. By working simultaneously across the family, social service and criminal justice systems, we demonstrate how an innovative model can lead to transformative change across the life course of both women and children.

Outcome and economic evaluation of the Embedded Youth Outreach Program

<u>Associate Professor Rachael Fullam</u>, Dr Ariel Stone, Dr Janet Ruffles, <u>Dr Benjamin</u> Spivak

Centre for Forensic Behavioural Science, Swinburne University of Technology, Melbourne, Victoria, Australia

The Embedded Youth Outreach Program (EYOP) is an innovative Victoria Police led program designed to meet the needs of young people with whom the police come into contact. The program is a collaborative initiative which sees a police officer paired with a youth worker for attendance at scene. The program aims to reduce long-term involvement in the criminal justice system by engaging with the young person and their family, assessing their needs and referring them to youth-specific supports.

The EYOP commenced operation in 2018 across two Melbourne metropolitan sites and

has been subject to ongoing evaluation by the Centre for Forensic Behavioural Science at Swinburne University of Technology. Data will be presented regarding the impact of the EYOP on offending and family violence outcomes across an extended period of program operation. We will also present the results of an economic evaluation of the program and highlight the complexity of assigning economic value to intervention programs within this context.

Understanding Aboriginal and Torres Strait Islander Women's connection to their Social and Emotional Wellbeing across the life span.

Ms April Goldring ^{1,2}, A/Prof Caleb Lloyd ^{1,2,3}, A/Prof Sadie Heckenberg ⁴, Dr Justin Trounson¹

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This research seeks to gain a deeper understanding of the lived experiences of Indigenous women across different life stages, from early childhood to incarceration. The study explores the complex intersectionality of experiences on how the justice system's involvement exacerbates the Social and Emotional Wellbeing challenges faced by these women. Given the ongoing overrepresentation of Indigenous Peoples in the Australian justice system, which stems from a combination of historical and contemporary factors, and by acknowledging that this issue is multifaceted, the study will investigate how incarceration intersects with, and often deepens, these challenges. This presentation discusses preliminary themes that arose from a series of in-depth qualitative interviews with knowledge holders across Queensland correctional facilities, exploring all Social and Emotional Wellbeing domains. The research adopts a strengths-based approach and integrates Indigenous methodologies and methods to ensure cultural safety and respect for Indigenous ways of knowing, being and doing. By focusing on their narratives, this research seeks to provide a platform for these women to share their truths and contribute valuable insight and perspective into the broader conversation about justice, wellbeing, and Indigenous reform. This research aims to inform policy, training, and strengthbased interventions that are sensitive to gender, cultural, and diversity considerations, contributing to the ongoing dialogue on improving justice system responses to Indigenous women and enhancing their wellbeing in correctional facilities.

Seeing Complexity Clearly: Introducing the PRISM Model as an Intersectional Framework for Supporting Complex Clients

Dr Jessica J Griffith

Griffith Psychology, Bendigo, Victoria, Australia

Justice-involved individuals frequently present with intersecting challenges across mental illness, disability, trauma, and systemic disadvantage—yet siloed systems of care often result in fragmented, inconsistent responses. The Person-Centred Reflective Integrated Service Model (PRISM) offers a conceptual framework to improve interdisciplinary formulation, service planning, and case management in complex contexts.

PRISM maps eight interrelated domains: Physical Health and Disability, Mental Health and Illness, Neurodevelopment, Socioeconomics, Culture, Gender, Trauma and Attachment, and Substance Use. Each domain is both a discrete area of concern and a lens through which the others are interpreted. This enables a layered, intersectional approach that goes beyond additive models of risk.

PRISM aims to enhance reflective practice and supervision, supporting shared understanding across disciplines and promoting coherent, person-centred care planning. It has applications in community-based forensic services, court-mandated treatment settings, and high-risk youth programs to guide assessment, inform diversion pathways, and identify protective factors that may be overlooked in linear models.

This presentation introduces PRISM and demonstrates its application to forensic and mental health practice through brief de-identified case examples. By bridging interpersonal, intrapersonal, and environmental domains, the model enhances nuanced assessment and interventions—with the ultimate goal of better outcomes for people navigating the criminal justice systems.

Navigating Complexity: Improving Pathways of Justice and Care Experienced Girls and Women

Dr Donna-Maree Louise Humphery

University of Salford, Salford, Greater Manchester, United Kingdom

This article reports on findings from a research project that applies a gendered lens to the intersection of criminal justice and care experience. The study was conducted in three local authorities in England, using semi-structured interviews with 20 youth offending practitioners who were working with girls who were also in care. The findings suggest effective youth offending practice with care and justice experienced girls is distinctive in prioritising complex welfare needs as a route to addressing offending. This is managed in practice through developing strong and supportive relationships that are individualised and led by the young women. However, this bespoke approach to practice creates layers of complexities for youth offending practitioners, as it requires them to navigate unique challenges of the justice and welfare binary. It also raises ethical issues when considering wider systemic structures around these girls and their future outcomes. Therefore, this article argues for an explicit intersectional trauma-informed approach that reframes criminal justice and allows practitioners to navigate the inherent tension in the care and control dichotomy, creating relationships that are containing, predictable and safe for care and justice experienced girls with histories of trauma. However, it proposes that achieving this and supporting the best future outcomes for these young women will require much wider criminal justice and welfare reforms.

Responding to criminal behaviour among Indigenous youth: Finding a better balance.

Professor Julia Ioane

Massey University, Auckland, New Zealand

Whilst there is evidence that youth offending is on the decline globally, Indigenous youth offending is decreasing at a much slower rate, and the severity of youth crime among Indigenous and ethnic-minority youth remains higher than for their ethnic-majority peers. More is needed to understand these trends.

In Aotearoa New Zealand and the South Pacific, a holistic approach provides a strong direction for working with Indigenous and ethnic communities across many social and community issues, including youth crime. However, more is needed beyond responding to offence-related behaviours. Research has shown the need to explore the socio-economic determinants of crime and the impacts of racism and discrimination on youth offending, with more work needed to explore and mitigate risk and enhance protective factors in culturally responsive ways. For many Indigenous and ethnic-minority communities, protective factors can also be risky, e.g., a psychologist providing therapy after offending can be protective, but can be counterproductive and risky when families are not appropriately included nor cultural nuances of collective shame and responsibility understood.

A fine balance between all elements is needed to maximise opportunities to reduce youth offending and recidivism.

This workshop presents an evidence-based, holistic and interconnected model for understanding and responding to youth offending across the globe. It draws on the Fonofale model (an Indigenous model of health) and seeks to address all aspects of a young person's life to ensure opportunities for better life outcomes can be realistically achieved.

Systemic Interventions for High-Risk Sexual Offenders: A Community-Based Approach to Enhance Desistance and Community Safety

Dr Laura A Jakul

Forensic Psychological Services, Winnipeg, Manitoba, Canada. University of Manitoba, Winnipeg, Manitoba, Canada

In many jurisdictions, incapacitation and retribution remain the default responses to criminal behaviour, fueling social, legal, economic, and health challenges. The reliance on punitive measures for managing sexual offenders often overlooks the potential for rehabilitation and long-term community safety.

Forensic Psychological Services (FPS) is a collaborative community-based forensic private practice in Winnipeg, Canada. Our treatment program targets root causes of

offending behaviour through comprehensive assessment and intervention strategies that involve family systems, community resources, and therapeutic alliances. By engaging offenders in structured programs that address cognitive distortions, emotional regulation, and social reintegration, we aim to reduce recidivism and promote positive behavioural change.

Our treatment program includes a range of services that support desistance from crime and community safety, including: individual and group treatment, community-based support that is closely aligned with the therapeutic treatment plan, an Indigenous Traditional healing program, several therapeutic homes, a life skills day program, and a recreational and garden program. By adopting a wholistic, trauma informed life-course perspective, we contribute to a paradigm shift towards prevention and intervention strategies that enhance community safety and foster positive developmental trajectories for individuals involved in the justice system.

This presentation explores a collaborative, community-based approach to systemic work with high-risk sexual offenders, emphasizing prevention and desistance. Drawing from theoretical frameworks and practical applications, this approach integrates multifaceted interventions tailored to the unique needs of individuals within their social contexts. Using case studies, this presentation will explore interventions used to manage high risk sexual behaviours in a community-based setting.

I believe they could have done better: A Retrospective Exploration of Pathways to Unlawful Behaviour among Adults placed in Youth Residential Care

Miss Jessica N Kent¹, Dr Christopher J Kilby ¹, Dr Owen Walker ², Professor Jonathan Mason¹

¹The Cairnmillar Institute, Hawthorn East, VIC, Australia. ²Grampians Health, Ballarat, VIC, Australia

Maltreated children who are placed in out-of-home care, particularly youth residential care, often face poorer psychosocial and behavioural outcomes. Individuals with youth residential care backgrounds are also overrepresented in the justice system. However, it remains unclear whether this is a reflection of factors specific to residential care itself or the broader sequelae of maltreatment. The current study aimed to explore the perceptions of adults with a history of placement in youth residential care to understand its longitudinal impact. To facilitate a nuanced understanding of divergent outcomes, the sample comprised individuals both with and without a history of unlawful behaviour.

Semi-structured interviews using a modified version of McAdam's Life Story Interview, adapted to specifically target the impact of experiences in youth residential care on life trajectory, were conducted with adults with lived experience in youth residential care to explore their perceptions of the impact of youth residential care on unlawful behaviour.

Thematic analysis revealed four themes (attachment, identity, instability, and coping) and

12 subthemes. Findings suggest that participants perceived their experiences of childhood maltreatment and youth residential care to have had profound and sustained impacts on their capacity to understand themselves and others, and to navigate novel and perpetual sources of distress.

This study highlights care-leavers' lived experiences, examining childhood maltreatment, youth residential care, and their impact on life trajectories, including unlawful behaviour. Findings suggest that integrating attachment-focused interventions, emotion regulation, and milieu-level supports to foster stability in care may enhance treatment efficacy and improve outcomes for youth in residential care.

Targeting opioid neurotransmission in borderline personality disorder with self-harming behavior: Preliminary findings of a ["C]NOP-1A positron emission tomography study

Professor Nathan J. Kolla¹, Ms. Fooroogh Raeisi Makiani², Dr. Stefan Kloiber²

¹Swinburne University of Technology, Melbourne, Australia. ²University of Toronto, Toronto, Canada

Background: Individuals with borderline personality disorder (BPD) are frequently encountered in forensic settings. Non-suicidal self-injury (NSSI) is a core symptom of BPD. Reduced pain sensitivity and increased pain threshold have been reported in BPD, pointing to altered pain perception. However, research investigating biomarkers contributing to attenuated pain sensation in mental disorders is limited. The brain nociceptin/orphanin FQ peptide (NOP) receptor is involved in pain transmission.

Objectives: Our study focused on measuring NOP receptor in BPD with NSSI using positron emission tomography and the radiotracer ["C]NOP-1A. We hypothesized that BPD+NSSI would have lower levels of NOP compared to healthy controls (HCs) in brain regions altered in BPD and emotional pain processing, including the anterior cingulate cortex, amygdala, and thalamus.

Method: 13 BPD+NSSI participants were compared with 16 HCs. Participants were between 18 and 50 years old. BPD+NSSI subjects were not taking psychotropic medications or recreational substances. BPD+NSSI participants had at least 7 NSSI episodes in the 4 months before study enrolment.

Results: NOP levels were 4.9% lower in amygdala (p-value = 0.048) and Brodmann Area 25 (p-value = 0.046) in BPD+NSSI participants versus HCs.

Conclusions: Although these results are preliminary, attenuated NOP signaling in limbic areas suggest that an endogenous imbalance could be present, which may be a contributing factor to dampened pain sensation in BPD+NSSI. The limbic regions investigated in our study are known to be involved in processing affective aspects of pain, while emotional instability is a cardinal feature of BPD.

Revisiting an Untold Narrative, Stories of Trauma, Racism and Cultural Disconnection. Implications for Integrating Cultural Humility within a Multi-Cultural Mental Health Context.

Dr Mayio Konidaris

Victoria University, Melbourne, Victoria, Australia

Severe and persistent mental illness has social, psychological, and material burdens for individuals and their families. In training it is of critical importance to prepare future practitioners for competent mental health practice. One effective way to do this is to build understanding and empathy about lived experiences. There is very little literature that captures the lived experience of individuals from diverse cultural backgrounds. This presentation explores the experience of being second-generation migrant of culturally diverse background, living with serious mental illness. The approach adopted is a phenomenological single case story, drawn from a qualitative research study with recruitment from within an Australian inner-urban community mental health centre. In-depth interviewing methods were utilised, exploring respondents' experiences growing up in two cultures and living with a mental illness. This case story emphasised high levels of cultural disconnection shaped by early traumatic experiences of loss and grief, trauma, and racism, including the impact of negative cultural stereotypes. Themes generated demonstrate traumatic disconnection from culture of origin and impact on the self and ethnic identity development. Despite such significant consequences the case story respondent did not emphasise the connection between their experiences and their second-generation migrant status. These issues of traumatic disconnection continued to resonate in their life, but remained covert to the outside world, particularly within the mental health setting. Helping professionals have a responsibility to elevate secondgeneration migrants' experience in the context of their family. If cultural issues are not explored, features of trauma are likely to be missed.

Are Malingering Screens Fit to Stand Trial?

Mr Nishant Krishnan

Centre for Forensic Behavioural Science, Melbourne, Victoria, Australia

It is estimated that approximately 25% of accused individuals intentionally feign mental impairment during fitness to stand trial evaluations. Despite this, research shows that only 19% of fitness reports in Victoria explicitly consider the possibility of feigning. This presentation summarises findings from three thematically linked studies aimed at identifying feigning measures fit for use in Australian fitness evaluations. Studies 1 and 2 meta-analysed the extent to which two established measures: the Atypical Presentations (ATP) Scales and Miller Forensic Assessment of Symptoms Test (M-FAST), discriminate between honest responders and feigners in fitness evaluations. Thirteen studies yielding 18 effect sizes were identified (n = 1,872). Findings showed both the ATP Scales and

M-FAST discriminated between honest responders and feigners. Among their respective subscales, ATP-Psychotic and Rare Combinations performed best. Using the manualised cut-scores, both measures demonstrated high sensitivity, and negative predictive power, with moderate positive predictive power. Specificity was high for the M-FAST and moderate for the ATP Scales. Findings from Studies 1 and 2 identified the ATP Scales as the most empirically supported candidate for further validation within the Australian context. Study 3 then evaluated the diagnostic performance of the ATP Scales using a simulation paradigm (n = 85). Findings indicated that the ATP Scales are effective at ruling out individuals who do not require further symptom validity testing. However, considering the high false positive rate (71%), positive results necessitate careful follow-up evaluation. Implications for using this tool in Australian fitness to stand trial evaluations, including interpretive caveats will be discussed.

Establishing Standards of Care for Forensic Mental Health Systems: An International Delphi Consensus-Building Study

<u>Marichelle Leclair</u>¹, Arianne Imbeault², Brian McKenna³, Tonia Nicholls⁴, Anne Crocker², Lindsay Thomson⁵

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Forensic mental health systems worldwide are under pressure to deliver effective care that is both person-centered and responsive to increasingly complex clinical, legal, and social needs. Yet there is currently no international consensus on what constitutes a high-functioning, equitable, and sustainable forensic system. This study addresses that gap by using an international Delphi methodology to identify key components of effective forensic mental health systems.

Nineteen experts from ten countries—including researchers, clinicians, policymakers, and individuals with lived experience—participated in a three-round Delphi process. Participants rated 59 initial statements derived from the literature and previous case studies across 12 thematic areas (e.g., access, continuity, culture, safety, recovery, legal interfaces). Iterative rounds allowed for refinement of items based on both quantitative ratings and qualitative feedback, culminating in a final consensus meeting.

Preliminary findings show strong convergence on the importance of person-centered care, culturally responsive practices, and environments that support holistic health, including physical activity, nutrition, and sexual well-being. Disagreement centered on the integration of peer support workers and the definition of "forensic mental health systems," which proved especially variable across jurisdictions. Participants also introduced new themes such as spirituality, restorative justice, and stigma reduction.

This work contributes to international efforts to define quality standards in forensic mental health. The resulting consensus statements can serve as a foundation for benchmarking, service design, and policy guidance across diverse legal and clinical systems.

What might be a next-generation intervention for people who have used family violence?: Considerations from the design and evaluation of Family Life's Talk4Change program

Dr Caleb D Lloyd, Dr Margaret Nixon, Dr Nicola Tyler, Dr Rachael Fullam, Dr Janet Ruffles, Prof Troy McEwan

Centre for Forensic Behavioural Science, Swinburne University of Technology and Forensicare, Melbourne, VIC, Australia

Interventions designed to support change among people who have used violence against family members are a critical component of addressing this important social problem, but evaluation of and innovation within these programs has been mostly stagnant. We conducted a conceptual review and initial evaluation of Talk4Change, a newly implemented intervention program designed and delivered by Family Life, a specialist family services provider that assists vulnerable children, families, and communities, We collected and analysed program documentation among the first four cohorts of men attending Talk4Change, including intake assessments and self-reported experiences in the program. We conducted qualitative interviews with program participants who volunteered and program facilitators. We analysed transcripts of interviews conducted with affected family members. We conducted a focus group with sector stakeholders. There are several unique features of Talk4Change, including its program structure designed to offer both individual sessions and group sessions. Program participants who voluntarily attended Talk4Change typically did so in the context of legal / justice involvement and were complex in terms of their behavioural histories, intervention needs, and poor mental health presentation. Program participants generally demonstrated engagement in the program content. Both program attendees and facilitators placed high value on Talk4Change's mixture of individual and group sessions. Several attendees reported high motivation to seek further services similar to Talk4Change. Affected family members and sector stakeholders identified systemic challenges related to attempting to address complex needs through a short intervention. This evaluation identified implications for future interventions, including focus on participant motivation and more detailed data collection procedures.

Core Forensic Model: An innovative structured clinical approach to facilitate a clear and cohesive pathway for consumers and clinicians throughout the recovery journey

<u>Dr Tobias Mackinnon</u>, Maicee Young, Dr Trentham Furness

Forensicare, Fairfield, Victoria, Australia

The Royal Commission into Victoria's Mental Health System was established as the service was failing to support consumers, carers, families, and health workers. The Commission's 2021 report made 74 recommendations, some linked to inpatient forensic mental health service provision. This highlighted the need to clarify the model of care

across forensic mental health services in Victoria to provide optimal care and maintain public safety.

Reviews have highlighted clinical innovation among forensic mental health service models, finding common approaches such as therapeutic security, a focus on rehabilitation, and the use of recovery-oriented approaches. At Forensicare, we conducted a systematic update of those reviews from 2020-2024 and concluded a national or international standard model of care does not exist for FMH services.

Given the Royal Commission recommendations specific to forensic mental health service provision, Forensicare set to implement a new service model, the **Core Forensic Model**, with the objective to create a structured clinical approach designed to facilitate a clear and cohesive pathway for consumers and clinicians throughout the recovery journey, which integrates best practice risk assessment and management, as well as a consumer centric approach. The Model aims to enhance collaboration in multidisciplinary teams and empower consumers to actively participate in their care, leading to a safer and more meaningful life in the community.

This presentation will highlight the Core Forensic Model, processes at Forensicare that supported implementation, and preliminary findings of consumer and staff engagement with the Model.

Development of Safewards Secure for Custodial Mental Health settings

Dr Tess Maguire 1,2,3, Ms Maicee Young 1,2, Professor Brian McKenna 1,4,5

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The introduction of the Safewards model of care and the associated interventions has resulted in the reduction of conflict and containment in mental health units and an addition to the original Safewards model has been developed for secure hospitals in forensic mental health services. Forensic mental health nurses working in bed-based prison mental health units may also benefit from having a model to assist conflict and containment reduction in their unique context. Bed-based services within prisons are staffed 24 hours a day by forensic mental health nurses, and also include a range of other and involves recovery-oriented FMH services providing mental health treatment and care for people who are mentally unwell while in the prison system. This type of model requires partnership between clinical and custodial staff

This presentation will describe the development of a version of Safewards for bed-based prison mental health units. A literature identified relevant features of bed-based units including flashpoints, and staff and consumer modifiers. A summary of the review was presented to participants prior to a Nominal Group Technique (NGT, a structured group consensus method) with staff working in bed-based prison mental health units). The NGT was used to elicit feedback about the proposed model and achieve agreement on

the proposed version. Consensus was reached on all suggested changes/additions to the model. Findings support the an adapted version to assist staff working in this setting. However, modifiers for custodial staff need to be development in collaboration with correctional service staff.

Can Insights from Domestic Violence Homicides Inform Indicators and Risk Factors to Mitigate Future Homicides? A comprehensive exploration of victimology and offender psychology, examining behaviours and vulnerabilities, aims to identify how the domestic violence responding ecosystem can support and contribute to safety and security, while simultaneously ensuring accountability for offenders.

Ms Amy Mouafi

Criminologist with A.M Consultants & Associates, Sydney, NSW, Australia

Despite the substantial investment governments have dedicated to the domestic, family, and sexualised violence sector, rates of abuse and violence persistently rise. Notably, Australia has surpassed the grim milestone of one woman being killed by a current or former abusive partner per week.

The paradoxical relationship between increased investment and the escalation of domestic violence crime and homicides warrants critical examination.

This session will delve into significant domestic violence homicides that have profoundly shaped and informed domestic violence policy, programs, and initiatives since their tragic deaths. By employing open-source materials, the session will illustrate how victimology and offender psychology can be pivotal tools in guiding police investigations and providing comprehensive support to victim/survivors, thereby preventing them from becoming mere statistics in the cycle of violence.

The victimology of the victims' life journey plays a crucial role in understanding their vulnerabilities, previous experiences of abuse, their support network and community, and the patterns of their abusive behaviours.

Offender psychology, on the other hand, reflects the offender's journey and the influences that have shaped their abusive tendencies. It elucidates how they interact with individuals across diverse contexts, such as gender, ethnicity, and education. Does the offender perceive the victim as weak or as a challenge?

Through the application of criminological principles and behavioural insights, the session will provide a structured approach for critical thinking, enabling the support ecosystem to collaborate effectively in piecing together the life cycle of violence before it culminates in a tragic loss.

Evaluating Sexual Homicide Offender Typologies

Mrs Aleshia R Nanev, Dr Rajan Darjee, Dr Margaret Nixon, Dr Michael Davis

Swinburne University of Technology, Melbourne, Victoria, Australia

Sexual homicide is at once a low incident and heterogeneous category of homicide. As a result, much of the empirical research has focused on typologies to help understand this egregious phenomenon. This research validated existing sexual homicide typologies and examined their applicability in a sample of people convicted of sexual homicide in Australia and New Zealand. A total of 297 offender and 400 victim cases were sourced from AustLII and NZLII (1950s-present) that met the FBI criteria for sexual homicide. Cases were systematically coded using ViCLAS variables and additional offender-specific data (Beauregard & Martineau, 2013). The research assessed the validity of four typologies—Organised/Disorganised, Direct/Indirect, Sadistic/Angry/Incidental, and MTC:R3—testing differences across behavioural, psychological, and forensic variables. The study also examined crime scene behaviour themes through multi-dimensional scaling (MDS) to identify patterns in offending behaviour. Findings may contribute to refining classification systems and enhancing forensic applications. Implications and areas for future research are discussed.

The Lived Experiences of Individuals who Engage in Online Child Sexual Exploitation and Abuse

Grace Nock¹, Louise Dixon², Nichola Tyler³,

School of Psychology, Victoria University of Wellington, New Zealand, ²Glasgow Caledonian University, Scotland, ³Centre for Forensic Behavioural Science, Swinburne University of Technology, Australia

Online child sexual exploitation and abuse (OCSEA) is a complex and multifaceted form of offending that continues to increase in prevalence. Our understanding of OCSEA is challenged by evolving technologies, low rates of detection, and limited understanding of the aetiological pathways to engaging in this behaviour. The current study aimed to deepen our understanding of the aetiology of OCSEA through qualitatively exploring the lived experiences of nine men referred to New Zealand community treatment providers for OCSEA behaviours. Through depth individual interviews, analysed using Interpretative Phenomenological Analysis, men's life stories were examined across the lifespan including childhood, pre-offending, offending, and post-offending timeframes. Five superordinate themes were developed from the data. These five themes described the impact of the men's developmental environment on their understanding of healthy relationships; the desire for connection and feelings of not belonging; difficulties in coping with negative emotions; escalation of both legal and illegal sexual behaviours; and factors associated with ceasing offending. The application of findings to the prevention of OCSEA are considered and directions for future research are discussed.

Longitudinal Trajectories of Dual (Online and Contact) Child Sexual Offending

<u>Distinguished Professor James R. P. Ogloff,</u> Dr Renata Slikboer, Dr Marie Henshaw, Professor Denny Meyer and Dr Erika Fortunato

Centre for Forensic Behavioural Science, Swinburne University of Technology, Melbourne, Victoria, Australia

The increasing prevalence of online child sexual exploitation (OCSE) has heightened concerns regarding offenders who engage in both online and contact sexual offending—so-called "dual offenders." This study examined crossover patterns and long-term offending trajectories among 612 men in Victoria, Australia, with charges for both online (child sexual abuse material, grooming, or production) and contact child sexual offences. Linked police, corrections, and mortality data (2004–2019) were analysed using Cox regression and latent class analysis. Results showed crossover from online to contact offending occurred more rapidly than the reverse, with grooming offences presenting the fastest pathway to contact offending. Three primary trajectories emerged: minimal, escalating, and chronic patterns of offending, with incarceration significantly influencing transitions between classes. Findings highlight the heterogeneity of offending pathways and underscore the importance of early intervention, risk assessment, and tailored management strategies for dual offenders. Implications for prevention and criminal justice policy are discussed.

Centering Culture in Sentencing: The Role of Cultural Assessment Tools in Criminal Justice Mitigation

Shawna Paris

NIFSW, Halifax, Nova Scotia, Canada. SPH Integrated Life Solutions, Halifax, Nova Scotia, Canada. Memorial University, St Johns, Newfoundland, Canada. Dalhousie

The use of cultural assessment tools in criminal sentencing in Canada is an emerging area of legal and forensic social work that challenges traditional, one-size-fits-all approaches to justice. This presentation explores how cultural assessments—such as the Impact of Race and Culture Assessments (IRCAs) used in Canadian courts—can provide critical context in understanding an accused person's background, systemic barriers, and experiences of marginalization. By centering culture, identity, and lived experiences, these assessments offer the court a more comprehensive, trauma-informed understanding of the factors that may have contributed to the alleged offense.

Drawing on case examples, legal precedents, and current practices in Canada, this session will examine how cultural assessments have influenced judicial reasoning and outcomes in sentencing. It will highlight the importance of interdisciplinary collaboration between legal professionals and culturally competent forensic assessors, as well as the ethical considerations involved in preparing and using these reports. The presentation will also discuss how cultural assessment tools support calls for systemic reform, especially in

addressing the overrepresentation of Indigenous, Black/African, and racialized individuals in the criminal criminal justice system.

Participants will gain insight into how centering culture can lead to more equitable and responsive sentencing outcomes and will be introduced to frameworks for integrating cultural assessments into their own practice. Ultimately, this session underscores the need to move beyond punitive models and toward justice processes that recognize the profound impact of race, culture, and systemic discrimination in shaping individuals' pathways through the legal system.

Balancing Protection and Connection: Contact Reluctance in Child Protection Matters

<u>Dr Maddison Riachi</u> ^{1,2,3}, <u>Dr Lisa Forrester</u> ^{3,1}, Dr Abigail Sheed ^{1,2,3}, University Distinguished Professor James R.P. Ogloff AM ^{1,2}

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The best interests of the child is a core principle guiding decision-making within Children's Court proceedings. Central to this is amplifying the child's voice, particularly regarding their expressed wishes about contact with significant individuals such as parents, siblings, and grandparents. Contact reluctance—when a child expresses unwillingness to engage with a parent or person of significance—is a common yet under-researched phenomenon, with clinicians frequently tasked with assessing its presence and meaning. Key areas of inquiry include identifying factors underpinning contact reluctance beyond maltreatment, evaluating whether resumption of contact aligns with the child's best interests, and determining appropriate methods for facilitating contact when recommended. Drawing on clinical case material, this presentation will examine emerging themes in cases where contact reluctance is present and explore their relationship to the available evidence base. It will also outline clinical considerations and recommendations relevant to supporting judicial decision-making in these complex matters. Finally, the presentation will underscore the pressing need for empirical research to inform practitioners working in this area.

Parent-child relationship risk factors for child maltreatment: Confirmation of the evidence-base through a systematic review

<u>Dr. Maddison Riachi</u> ^{1,2,3}, Dr. Michael Trood ^{1,2}, Dr. Nina Papalia ^{1,2}, University Distinguished Professor James R.P Ogloff AM ^{1,2}, Dr. Abigail Sheed ^{1,2,3}

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Assessments of parent-child relationships are central to child maltreatment evaluations, however, there is limited consensus regarding the aspects of the parent-child relationship associated with child maltreatment. While parent-child relationship factors are included in child maltreatment risk assessment tools, these tools vary significantly in the specific aspects they identify, and definitions of key factors remain vague. This lack of consistency and specificity creates potential for bias in evaluations and weakens the defensibility of clinicians' assessments.

This presentation will share findings from a recent systematic review aimed at identifying parent-child relationship factors associated with child maltreatment. A total of 30 studies comparing aspects of the parent-child relationship between maltreating and non-maltreating dyads were obtained via a comprehensive literature search that yielded over 2,600 records. Key parent-child relationship factors, their definitions, and methods of measurement will be discussed. The presentation will also highlight implications for child maltreatment evaluations and research, emphasising the need for greater clarity and standardisation in assessment practices.

Are generations of traditional practices "packed away and left behind" when one migrates or flees from their country of origin seeking safety and security? Through a completed case, harmful traditional practices are discussed drawing from lived experience of Victim survivors and responders, and asking all - is prevention a possibility?

Ms Judy Therese Saba

Currently Independant, Sydney, NSW, Australia

Our Understanding and responses to traditional practices that are harmful begins with and is informed and led by lived experience.

Are years of tradition just "packed away and left behind" when one migrates or flees from their country of origin seeking safety, security? Can years of tradition be changed in a "flight" to a new place? How does a practice, deemed traditional in one place become a crime in another? How does a traditional practice become a harmful traditional practice?

For all responders, including law enforcement, the genuine listening and exploring of motive and motivation expands and redresses how perception, assumptions, bias, lived experience and tradition impacts the responses of community, society and law enforcement to practices that are deemed traditional and harmful. How does the intersection of culture, lived experience, language, practice and tradition influence a continuously emerging need for more victim centred and informed ways of working with communities in responding, investigating and preventing both interpersonal and harmful traditional practices. The Law is the law, that won't change, but how we implement the law, the decisions we make when implementing the law and how we treat the recipients of the law, matters.

Through the exploration of a past and recently completed case involving harmful traditional practice, this session will demonstrate what was learnt, what has changed, and what this means for ongoing victim safety and the prevention of harmful practices in ways that engage all responders, both formal and informal alongside communities at the forefront

The Voice of Early Childhood Educators: Supporting the Social Functioning of Children Exposed to Intimate Partner Violence

<u>Dr Madison Lee Schulz</u>¹, Dr Ali Fogarty^{2,3}, Professor Rebecca Giallo^{2,3}, Miss Francine Dudfield¹, Associate Professor Katie Wood¹

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Purpose: Children exposed to intimate partner violence are at risk of poor social functioning. While educational settings can be an important support for children experiencing adversity such as IPV, there is limited research focused on understanding the experiences of early childhood educators. The aim of this study was to understand early childhood educators' experiences and needs when supporting the social functioning of children who have been exposed to IPV.

Methods: Twelve early childhood educators from the state of Victorian in Australia participated in online semi-structured interviews. Interviews were transcribed and analysed using thematic analysis.

Results: Key themes identified for children's social support needs in early childhood education were children's relational needs, emotional regulation and social support, and providing individualised support and referral pathways. Enablers to educators' supporting the social functioning of children exposed to IPV included educators' understanding and empathy for children's experiences, building relationships and trust with the family, and support services for educators. Barriers to supporting children included systemic challenges, lack of training and consistency between services, family's reluctance to accept support and cultural competency and biases. Finally, the themes identified for educators' needs included organisational support, education and training, and resources and clear processes.

Conclusions: The findings highlighted educators' need for further training and support when working with children exposed to IPV. This is particularly important given that educators are in a key position to identify and respond to the social needs of children exposed to IPV in early childhood education settings.

The Role of Maternal Depressive Symptoms and Maternal Engagement as Mechanisms Between Intimate Partner Violence Exposure During Infancy and Social Functioning in Middle Childhood

<u>Dr Madison Lee Schulz</u>^{1,2}, Associate Professor Katie Wood¹, Dr Ali Fogarty^{2,3}, Professor Stephanie Brown², Dr Deirdre Gartland², Professor Rebecca Giallo^{2,3}

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The mechanisms within the home environment by which early life experiences of intimate partner violence (IPV) might affect social functioning remain unclear. The aim of this study was to investigate the extent to which maternal depressive symptoms and maternal engagement (at four years postpartum) mediated the relationship between children's early life experiences of IPV (first year of life) and social functioning in middle childhood (10 years of age). A second aim was to determine whether child sex moderated these relationships. Drawing data from a community sample of 1507 Australian mothers and their first-born children, we found that IPV occurring in the first 12 months of a child's life was associated with high maternal depressive symptoms at four years postpartum, which in turn were associated with lower child social skills, higher peer problems, peer victimisation and bullying at age 10 years. Higher levels of maternal engagement at four years was associated with higher social skills at age 10 years. The patterns of relationships between IPV, maternal depressive symptoms, maternal engagement, and social functioning were found to be similar for boys and girls. The findings highlight the importance of supporting mothers' mental health and engagement in home learning during early childhood to facilitate children's social development following IPV exposure.

Preliminary Validation of the Italian Version of the Functions of Aggression Questionnaire

Irene Severi, Claudia Mazzeschi, Elisa Delvecchio, Carlo Garofalo

University of Perugia, Perugia, Italy

Recent research on aggression has shifted from structural descriptions to functional approaches, emphasizing underlying goals and motivational processes. In this context, the self-report Functions of Aggression Questionnaire (FAQ; Garofalo & Daffern, 2023) was developed, grounded in the clinician-rated Assessment and Classification of Function and relevant literature. This study presents a preliminary Italian validation of the FAQ. A total of 542 participants from the Italian general population (GP1; aged 18–79, M=33.12, SD=13.92; 67.5% female) and 33 aggression-prone male inmates (AI; aged 25–66, M=40.52, SD=10.20) from the Casa di Reclusione of Spoleto completed the FAQ. Additionally, both GP1 and a second general population group (GP2; N = 221; aged 18–82, M=37.03, SD=15.27; 59.7% females) answered an open-ended FAQ item. GP1 completed the open-ended item after the FAQ self-report, while GP2 completed only the open-ended item, thus avoiding potential bias from the questionnaire items.

Confirmatory Factor Analysis (CFA) on GP1 suggested an 11-factor, 35-item model demonstrating good fit (CFI = .98, TLI = .98, RMSEA = .032, 90% CI [.029, .035]), aligned with the theoretical-functional framework. Construct validity was supported through significant correlations with measures of aggression, emotion regulation, impulsivity, and empathy. Inmates scored significantly higher on the FAQ Observe Suffering subscale compared to a matched GP1 subsample. Open-ended responses of GP1 and GP2 supported the interpretability of most FAQ factors.

Findings support the validity of the Italian FAQ and underscore the utility of functional models in aggression research.

Inter-Departmental Clinical Panels: Enhancing accountability and outcomes for people with complex needs

Ms Renee Sinclair, Ms Jade Preston

Department of Health, Melbourne, VIC, Australia

In 2017, a car was recklessly driven into pedestrians along Bourke Street in the Melbourne central business district, Victoria, Australia. Six people were killed and twenty-seven were seriously injured. In response, the Victorian Government introduced a suite of reforms aimed at mitigating the risk of a similar incident occurring again. Among these was a directive for the Office of the Chief Psychiatrist, Department of Health to convene a multi-disciplinary clinical panel. This panel was tasked with providing expert advice on service responses, systemic issues, and risk management for individuals presenting with co-occurring conditions such as mental illness, disability, and substance dependence and who pose an unacceptable risk to others.

This presentation will explore the development and operation of this panel model, including its role in overseeing individuals subject to supervision orders under the Crimes (Mental Impairment and Unfitness to be Tried) Act 1997. It will detail how the Office of the Chief Psychiatrist convenes both Multi-disciplinary Clinical Panels and the Statewide Complex Needs Advisory Panel. The presentation will examine how strategically identifying panel members who have the expertise and seniority to influence access and improve service provision has been instrumental to the success of the model.

Through case studies, the presentation will demonstrate how this inter-departmental, clinical and executive-level model enhances system-wide accountability and facilitates shared, cross-sectoral solutions. It will reflect on how heightened visibility at senior levels drives rigorous examination of service barriers and supports practical solutions - often within existing frameworks - that lead to improved outcomes.

From Confinement to the Community; Ending a Long-term Seclusion in NSW and Ongoing Challenges

Dr Calum A Smith

WA Health, Fremantle, WA, Australia

This will primarily be a case presentation discussing the strategies used to end the use of seclusion in a patient who had endured a prolonged, 6-year, seclusion. It will give a brief background history, it will outline the challenges that were overcome, and some outcome metrics to show progress on this. It will then discuss this patient's progress longitudinally since the end of the long-term seclusion. Other cases that illustrate similar issues including one that was subject to hearings at the Federal Disability Royal Commission can also be discussed. This can broaden out to reflections on these experiences of the use of restrictive practices.

Enhancing the safety and well-being of women and children affected by domestic violence.

Professor Susanne J M Strand^{1,2}, Lecturer Martina Vikander¹

¹Örebro University, Örebro, Sweden. ²Swinburne University of Technology, Melbourne, Victoria, Australia

The prevention of domestic violence, as defined by the Istanbul Convention (2011), involves any form of physical, sexual, psychological, or economic harm or suffering inflicted by a current or former partner. This issue presents a significant challenge to society. Domestic violence places a heavy burden on both victims and the community, and efforts to reduce violence have proven largely ineffective. Consequently, both the prevalence of domestic violence and the rates of repeat offenses remain high, while the quality of life for victims continues to be low.

RiskSam was developed to enhance the risk management process. This structured risk management model aims to improve agency collaboration by connecting risk assessments with recommended management strategies.

This presentation will explore how RiskSam effectively addresses the risks of domestic violence against mothers and children, emphasizing the importance of considering factors related to the children involved. In Sweden, witnessing domestic violence was criminalized in June 2021. This law allows police to interview children without requiring parental consent if a perpetrator is suspected of exposing them to violence.

We analyzed forensic interviews to identify risk factors and protective factors in children's testimonies. The findings indicated that law enforcement could gather valuable information to help both police and child welfare services assess risks for mothers and children. While most factors related to the risks faced by both, some critical information requires direct conversations with the child. Thus, the study highlights the need to

consider the perspectives of both mothers and children to prevent future violence effectively.

Examining Aggression Prevention Interventions in Acute Mental Health Inpatient Units

Gracie Tan-Singh^{1,2}, Professor Michael Daffern¹, Dr. Tessa Maguire¹

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Aggression and violence are persistent and critical challenges in acute mental health inpatient units, where both patients and staff are at significant risk of harm. This study investigates the effectiveness of two aggression prevention interventions, namely the De-escalation, Intervention, Early Response Team (DIVERT) and the Dynamic Appraisal of Situational Aggression combined with the Aggression Prevention Protocol (DASA+APP), in reducing incidents of aggression and the use of restrictive interventions in acute mental health units in a public hospital in Melbourne, Australia, Utilizing a mixed-methods approach, the research integrates quantitative data on aggression and restrictive practice rates with qualitative feedback from staff to provide a comprehensive evaluation of intervention impact. Preliminary findings suggest that these interventions can lead to a reduction in aggressive incidents and restrictive practices, while also improving perceptions of safety and the therapeutic climate for both staff and patients. The initial findings also highlighted barriers and challenges to its implementation, including inadequate resourcing and training, limited organizational support. Importantly, the research highlights the need for aggression prevention strategies that address not only individual risk factors, but also broader staff, interactional, and environmental contributors. By advancing evidence-based approaches that integrate risk assessment with proactive prevention and early intervention, this study addresses critical gaps in aggression prevention for justice-involved individuals with mental illness and aims to inform best practice and policy for safer, more effective management of aggression in mental health settings.

Transforming the Lives of Incarcerated Mothers: Exploring the Safety, Stability, Wellbeing and Desistance Goals of Women in an Individually-Tailored Support Program

<u>Dr Carleen Thompson</u>, Dr Corrie Williams, Dr Diksha Sapkota, Prof Tara McGee, Prof Janet Ransley, Prof Susan Dennison

Griffith University, QLD, Australia

Incarcerated mothers and their children have complex, multifactorial needs. To support stability, wellbeing, and sustained change, incarcerated mothers and their children require proportionate continuity of care that aligns with their changing needs and goals.

The Transform Lives Program (TLP) is an innovative model that provides continuous, proportionate, individually tailored support for incarcerated mothers and their children to break cycles of disadvantage and offending, and empower them to lead fulfilling lives. Currently being trialed in Queensland, Australia, this transformative model commences up to 6 months prior to mothers' release and continues for up to three years post-release. During this time, women and their children are supported by a 'program coach' who provides therapeutic support and empowers women to navigate service systems to address their needs, achieve their goals, and promote desistance. In this presentation, we (i) describe the women and children in the TLP trial, including demographics, family composition, prior criminal justice system involvement, and criminogenic needs, and (ii) explore the goals set by mothers in the program. In doing so, we highlight the prominent positioning of participant voices in service delivery and support, as well as the interdependence of mothers' goals and their children's wellbeing. Further, we examine how program goals change during the first 18 months of program involvement. Finally, we discuss how women's prior experiences and program goals align with, differ to, and advance, key desistance frameworks. Broader implications for integrated, targeted service delivery for incarcerated populations are identified.

Everyday Respect: Reducing professional stigma in forensic mental health

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In forensic mental health (FMH) services, supporting desistance (framed as 'secure' or 'offence-focused' recovery) is a core aim of clinical practice with people who have offended with a mental illness.

Stigma and discrimination towards people with mental illness remains prevalent and is compounded for people in the FMH system, who often experience multiple additional stigmatised identities arising from criminal justice involvement, substance use, and pre-existing disadvantage. Stigma is a barrier to quality health care and considered by many people with mental health conditions as more harmful than the condition itself. Moreover, as stigma can lead to social isolation, deprivation of social capital, and the disruption of identity reformation, it is a significant barrier to desistance.

Therefore, reducing stigma should be a key concern for FMH organisations, particularly professional stigma among their own workforce, which consumers report to be more damaging than public stigma. Professional stigma may be subtle, under reported and less responsive to anti-stigma strategies. It is also not mitigated and may be exacerbated by the type of contact that health professionals have with consumers. Indeed, staff may internalise stigma associated with the 'dirty work' of FMH, so conceptualised due to the risk of violence, stigmatisation of the consumer group, and hidden nature of services, and develop strong occupational and workgroup cultures that can become a barrier to practice change.

This paper outlines our study, "Everyday Respect", which aims to understand and reduce

professional stigma within a FMH service using principles of procedural justice in everyday practice.

Research Praxis that Supports Desistance from Crime? An Exploration of the Transformative Power of Participatory Research with Young People who Experience Dual Intervention

Ms Jordan White¹, Ms Helen Eason², Dr Phillipa Evans¹, Professor Ilan Katz¹

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Participatory research provides a transformative opportunity for both the participant and researcher. This presentation will answer the question: can our research practices in mandated settings support desistance from crime? The first author's PhD research explores young people's experiences of dual intervention by statutory Out-of-Home care (OOHC) and youth justice (YJ) systems. A participatory research design was implemented across three youth justice centres in NSW, Australia. With the aim of highlighting power with those who experience the research problem, the author, young people and an Aboriginal Community Controlled Organisation partnered to create and co-construct research materials and data that explored how young people understand and make meaning of their experiences of dual intervention by statutory OOHC and YJ systems. The role of theory in our research practice will be considered and methods that elevated participatory praxis in this research are presented. Young people's feedback and reflections on the research process and participatory activities provide valuable insights into the viability of participatory research processes within mandated settings. The practical implications, including investing time and ensuring an ethics based on relational trust and rapport, are considered necessary first steps in providing spaces where power shifts occur and young people experience interactions that have the potential to shift their identities towards highlighting their inherent resilience and strengths, thereby supporting the process of desistance from crime.

Young People's Meaning Making of Pathways between Care and Custody: 'We all see the same things, some are just lucky enough to stay with family'

Ms Jordan White¹, Ms Helen Eason², Dr Phillipa Evans¹, Professor Ilan Katz¹

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To our knowledge, there is no research within Australia and very few international studies that qualitatively explore young people's experiences or meaning making of their trajectories throughout statutory Out-of-home Care (OOHC) and Youth Justice (YJ). In this Australian first research, a participatory praxis informed partnership with young people across three YJ sites in NSW, Australia to answer the research question: how do young people who experience dual intervention make meaning of life within multiple statutory

systems? The research also considers how dual intervened young people account for their offending trajectories and how these young people experience connection. Three overarching themes were constructed: Helpless to History: 'I'm going back in the system, I'm not free'; 'Sharing is Caring: 'I wish I got the help, instead I'm stuck in here'; and 'Breaking the Cycle: 'We all see the same things, some are just lucky enough to stay with family'. Key insights and findings from the overarching- and sub-themes will be discussed and a conceptual model presented, further informing our understanding of crime and criminal behaviour of dual intervened young people. Australian and international literature focuses on identifying risk factors associated with this offending trajectory and exploring professional stakeholders' views of these pathways. Given the complex and open nature of the social, political, and legislative systems that impact young people's pathways between OOHC and YJ, it is impossible to have a nuanced and clear understanding of this complex problem without incorporating the voices and understanding of those young people who traverse these pathways.

A meta-analysis comparing risk scores and recidivism prediction across ethnicity subgroups within female samples

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The criminal justice system uses risk assessment tools to predict recidivism and set intervention targets. Although these instruments are generally valid for predicting recidivism, there are concerns whether prediction performance is equal across demographic groups, particularly when applied to females from diverse racial backgrounds. This systematic review critically evaluates the predictive performance, including discrimination and calibration, of commonly used criminal justice risk assessment tools across female populations of different ethnicities. The review followed PRISMA guidelines, A comprehensive search of English-language peer-reviewed literature, dissertations and grey literature was conducted across multiple databases. Studies were included in this review if they provided any effect sizes describing the performance of risk assessment instruments and reported outcomes disaggregated by ethnic group within a female sample. Data extraction included tool characteristics (e.g., recidivism, assessment administration etc.), sample characteristics (e.g., demographics, settings, base rate etc.), performance metrics (e.g., AUCs, means, sensitivity, specificities etc.), and study quality, assessed using the PROBAST framework. Inclusion criteria identified 29 studies. Analyses examine variability in tool performance across racial groups. If reported in enough studies, calibration analyses will examine if there is overprediction of recidivism rates among some groups (e.g., non-Caucasian women). The review highlights significant gaps in the validation of risk assessment tools for female subpopulations with diverse racial backgrounds. Methodological limitations and small subgroup sample sizes were common. The findings underscore the need for subgroupspecific validation efforts. Policymakers and practitioners should be cautious in applying

existing tools to underrepresented groups without appropriate empirical support.

Predictive Discrimination and Calibration for a Dynamic Risk Tool Across Gender and Ethnicity Subgroups Within the Female Subsample in Aotearoa New Zealand

Mr Will Liheng Xu^{1,2}, Dr. Caleb D Lloyd¹, Dr. Benjamin Spivak¹, Dr. Ariel Stone¹

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There are well known differences in crime, violence, and recidivism rates when comparing female and male populations. This has led some to suspect there are distinct pathways and risk factors for females while others argue that the association between core risk factors and re-offending are the same across gender with the exception of higher prevalence of risk factors and re-offending among males. Yet, it is difficult to study these positions effectively because risk assessment for females largely relies on risk tools developed for males. Further research is needed to examine in greater detail how current risk assessment tools perform when used with female populations. In this study, we assessed the psychometric properties of Dynamic Risk Assessment for Offender Reentry (DRAOR) scores across female (n = 264) and male (n = 3425) samples in Aotearoa New Zealand. Analyses of routine administrative data involved examining subsample base rates, predictive discrimination by gender group, and calibration across gender groups. Exploratory analyses examined the extent to which these differences interacted with ethnicity by comparing results across females with different ethnicities (n = 128 NZM ori, n = 90 NZ European, n = 19 Asian / Southeast Asian, and n = 12 Pacific Islander). Results are discussed in terms of the theoretical and practical implications for corrections management.

ROUNDTABLES

Nurturing connections between educators and psychologists: Strategies to facilitate alignment of service delivery within secure youth justice.

Dr Stavroola Anderson

Australasian Corrections Education Association, Sydney, NSW, Australia

For young people involved with the justice system, education and psychology both offer services supportive of a pathway to desistence. However, in most secure youth justice settings in Australia, education and psychology provision are the primary responsibility of separate government departments. The differing core aims, frameworks, systems and protocols of these agencies can contribute to barriers in the delivery of unified and meaningful services for young people. In contrast, promoting greater interconnectivity between education and psychology has the potential to benefit young people during their time in secure youth justice and beyond. In this round-table, Stavroola will lead participants in a guided discussion of the challenges to and opportunities for coordination of education and psychology service provision within secure youth justice. The goal of the session is to bring diverse perspectives and innovative thinking to consideration of strategies which maximise opportunities for inter-agency collaboration and facilitate young-person-centred planning and processes.

Bridging the Divide: An exploration of the transitions between custodial settings and community based options for people deemed unfit to plead or mentally impaired.

<u>Ms Jacqui Brown</u>, Ms Michelle James, Ms Victoria Athanasiadis, Mr Garth Boyd, Ms Karen Rodriguez, Ms Sarah Fritsche, Ms Irene Economou

Complex Psychology, Melbourne, Vic, Australia

People under the *Crimes (Mental Impairment and Unfitness to be Tried)* Act, who are transitioning from a custodial setting, often rely on non-forensic initiatives for support, such as the National Disability Insurance Scheme (NDIS) and mainstream services. Challenges are frequently faced in navigating differing service frameworks (including funding), expectations of responsibility, and ways of working across forensic and non-forensic services for this group, sometimes resulting in non-cohesive plans for transitions between custodial and community-based environments.

In this round table, we will discuss the challenges when working across sectors, highlight case studies and facilitate discussion around effective ways to address transition planning for this complex group in ways that meet the requirements of the forensic, NDIS and broader mainstream sectors. The case studies provided will highlight the challenges

faced, as well as some 'wins' and success stories (both from a client and service system collaboration perspective).

This round table is aimed at bringing together people working within forensic mental health, forensic disability and broader community-based services to discuss ways to work collaboratively. The goal of the discussion is to highlight how effective transition planning, and a collaborative approach, results in a more comprehensive cross sectoral and holistic response. This improves the lives of people who have been considered mentally impaired or unfit to be tried, which ultimately addresses key criminogenic factors and reduces the likelihood of re-offending.

A live applied diversity of thought roundtable exploring the conscious and unconscious bias' that impact decision making by formal and informal responders to Domestic, Family and Sexualised Violence. Police exist within an ecosystem of responder, yet their impact on response, intervention, and prevention is still perceived as most significant.

MS Judy T SABA1, Ms Amy MOUAFI2

¹Cross-Cultural Psychologist, Sydney, NSW, Australia. ²Criminologist with A.M Consultant & Associates, Sydney, NSW, Australia

As many states, territories and countries are moving to embed conceive control legislations, the question remains, are we centring the safety and security of victim/survivors?

It has never more important to understand the complexities of domestic, family and sexualised violence, its dynamics, tactics and impacts. Yet, domestic violence continues to increase and continues to undermine, safety and security of all. As the rates of violence increase, the impact on whole communities increases and services and systems like law enforcement still invests numerous resources with extraordinarily little change to the violence trajectory. What are we not listening to, hearing, or noticing, and from whom?

The Roundtable in live format, aims to bring together conference participants as responders in the ecosystem, to consider a complex domestic violence case. As the live scenario evolves, participants will be given further facts as well as well as discussing their insights, assumptions and solution pathways for supporting victim survivors. Whose experiences are we focussed on;

the responders?

the perpetrator?

system and services?

or the victim survivor?

As we work through the case, conscious, subconscious, and unconscious assumptions,

biases and myths begin to reveal themselves. The Roundtable will trigger self-reflection, challenge positions and perceptions and confront assumptions around the primary aggressor, gender, vulnerability and how we understand victimology and offender psychology.

The roundtable is underpinned by applied practice in law enforcement, evidenced by reference to completed cases where the diversity of thought roundtables resulted in key victim survivors, community, police and service provision insights and learnings.

SYMPOSIA

Gender and Crime: Female Sex Offending, Pink-Collar Criminals, and Avoiding Gender Bias

Convenor: Prof Susan Hatters Friedman

Case Western Reserve University, Cleveland, USA

Avoiding Gender Bias

Dr. Andrew Howie

University of Auckland, Auckland, New Zealand

Gender bias in forensic assessments can significantly impact forensic opinions and subsequent legal outcomes and treatment of individuals in the criminal justice system. Female defendants are generally regarded as less dangerous and more deserving of mental health treatment than their male counterparts. As a result, females disproportionately receive more lenient sentences. The question of whether such gender disparities are based on studied differences between genders and thereby warranted is unclear. Dr. Howie will identify the areas of potential gender bias in the forensic assessments, including the evaluations of individuals who commit filicide, sexual offenses, and intimate partner violence. The role of gender bias is specific defenses, including the insanity defenses, emotional duress, and battered woman syndrome, will be reviewed.

Female Sex Offending

Dr. Renee Sorrentino

Harvard Medical Center, Boston, MA, USA

Females are rarely viewed as perpetrators of sexual violence. Societal misperceptions, stereotypes, and gender biases include longstanding beliefs that females are either incapable of committing sexual offenses or unlikely to cause harm by doing so. Females who commit sexual offenses often remain undetected as a result of societal misperceptions. This is especially concerning as females often have the most unrestricted, unquestioned access to children. The underrecognition of females who engage in sexual offending has resulted in limited research. As a result, little is known about the motivations, psychiatric comorbidity, treatment needs, and risk of recidivism in this population. To date, there are no empirically derived tools to address recidivism in females who commit sexual offenses, unlike their male counterparts. Dr. Sorrentino will review what is known in this area of research, as well as the limitations and the challenges that result when providing evidence-based assessments.

Pink-Collar Crime: Gender, Embezzlement, and Narcissism

Prof Susan Hatters Friedman

Case Western Reserve University, Cleveland, USA

Pink-collar crime, according to criminology literature, is not defined by the gender of the perpetrator, but rather by the type of offending. Pink-collar crime is commonly embezzlement by an employee such as a bookkeeper, or from a local community agency or community group. (This is in distinction to larger white-collar criminal frauds, which may also be perpetrated by any gender.) Pink-collar crimes do however tend to be perpetrated by women. It is only in the past few decades that women are finding themselves in workplace positions of power—and opportunity. These pink-collar crimes are often perpetrated by a trusted long-term member of staff or group's treasurer. And they tend to be perpetrated for long periods of time. Perpetrators were often part of the metaphorical family, shattering victim's trust when their crimes are discovered. While white-collar crimes may lead victims to experience mental health symptoms, pink-collar crimes may lead to more problems among victims, because there is not only loss of money, but loss of trust. White-collar crimes can turn to red-collar crimes, and violence may be a possibility in pink-collar cases too. Pink-collar offenders—embezzlers—when caught often rely on self-serving explanations with gendered narratives, narcissistic statements, and externalized blame for their offending—offending that may have scarred a community. Various case examples will be used from media, and anonymized cases from the author's experience.

Can risk assessment ever be fair? It depends on what you mean by fairness

Convenor: Dr Benjamin Spivak

Centre for Forensic Behavioural Science, Swinburne University of Technology, Melbourne, VIC, Australia

This symposium brings together three presentations that interrogate the meaning, measurement and implementation of fairness in forensic risk assessment. The Symposium will open with an introduction to the concept of fairness and distinguish between competing and conflicting definitions of the term, as well as implications for the field of risk assessment. The second presentation will introduce empirical findings from a recent study examining the extent to which the performance of a family violence risk assessment used by police differs across different demographic groups, illustrating how overall validity can mask demographic disparities. The final presentation will cover a recent study examining whether disparities in prediction between Australian Aboriginal and non-Aboriginal prisoners can be reduced through statistical adjustments to a popular risk assessment – the Level of Service – Risk Need and Responsivity (LS-RNR).

Fairness in risk assessment: An overview of key concepts and debates

Dr Benjamin Spivak

Centre for Forensic Behavioural Science, Swinburne University of Technology, Melbourne, VIC, Australia

Risk assessment is a cornerstone of practice in forensic psychology. Recently, concerns have been raised about the extent to which risk assessments are biased or unfair, specifically on the basis of race and other characteristics. While initial studies on this topic appeared to provide some evidence of racial bias, subsequent research has painted a more complicated picture. This has led scholars to re-think the concept of fairness and in what way it can and should apply to risk assessment. This talk will provide an overview of the current state of play with respect to risk assessment and fairness. Along the way, we will discuss differing and conflicting views on what constitutes fairness, the extent to which risk assessment does or does not contribute to unfair outcomes in the criminal justice system and the potential for risk assessment to address and reduce unfairness in the criminal justice process.

Fairness in IPFV Risk Assessment: The Good, the Bad, the Feasible?

Ms Houda Boucetta, Dr Benjamin Spivak, Professor Troy McEwan

Centre for Forensic Behavioural Science, Swinburne University of Technology, Melbourne, VIC, Australia

Structured actuarial risk assessments now guide many policing and service responses to intimate partner and family violence (IPFV). However, concerns have arisen regarding whether these instruments serve all communities fairly. This presentation charts demographic fairness patterns in police IPFV risk assessment, using the Victoria Police Screening Assessment for Family Violence Risk (VP-SAFvR) to illustrate how seemingly acceptable aggregate performance can mask disparate outcomes between groups. Taking a multi-group perspective, we track discrimination, calibration, and error profiles across multiple demographic groups, highlighting the tension that arises when attempting to ensure equitable treatment across diverse and vulnerable communities. We outline the analytic framework, summarise emerging fairness patterns, and discuss the some of the potential ethical and operational implications for agencies relying on structured actuarial risk assessments to inform frontline decisions. By grounding the broader fairness conversation in concrete VP-SAFvR findings, this paper advances current debates on how policing can implement structured risk assessments without amplifying existing inequalities.

LS-RNR Disparities in Australian Aboriginal Offenders: Statistical and Ethical Considerations

Dr Benjamin Spivak

Centre for Forensic Behavioural Science, Swinburne University of Technology, Melbourne, VIC, Australia

In Australia and internationally, concerns have been raised about the applicability of risk assessment instruments for First Nations populations. Yet, very little work has examined this issue empirically in the Australian context. This presentation reports on a study that examined disparities between Australian Aboriginal and non-Aboriginal 'violent offenders' using the popular LS-RNR risk assessment instrument. The evidence from this study suggests that disparities are present, but can be reduced to some extent using statistical adjustments to the LS-RNR score. However, the use of these statistical adjustments raises its own ethical issues which will be discussed.

Evaluating police responses to stalking

Convenor: Dr Nicola Tyler

Centre for Forensic Behavioural Science, Swinburne University of Technology, Melbourne, VIC, Australia

About 1 in 6 people will experience stalking in their adult life. The challenges of an effective police response to stalking have long been recognised, yet knowledge of how to improve this has lagged. In Victoria, Australia, potential inadequacies in police responses to stalking were brought into focus following the 2020 murder of Celeste Manno. In response, the Stalking Response Model was piloted. Drawing on current international 'best practice', the Stalking Response Pilot comprised training for police in participating Police Service Areas (PSAs), implementation of a brief screening tool to help with prioritisation of risk management for stalking cases, and availability of expert advice on stalking. This symposium describes the findings from a mixed-methods evaluation of the Victoria Police Stalking Response Model, including analysis of administrative data, interviews with victims of stalking, and an international review on police responses to stalking.

The Victoria Police Stalking Response Model Pilot: Experiences of victims.

Dr Margaret Nixon, Ms Catie Bridgeman, Dr Nichola Tyler

Centre for Forensic Behavioural Science, Swinburne University of Technology, Melbourne, VIC, Australia

Stalking is by nature a victim defined behaviour. Effective police responses therefore depend on the impact they have on victims and their sense of safety. This qualitative study explores the experiences of 15 individuals who were victims of stalking, with a

particular focus on their interactions with police. Through interviews, participants shared how police responses were perceived to influence their ability to cope with being stalked. From initial contact to court, participants reported feeling dismissed, receiving inadequate information, and encountering responses shaped by gender and other identity-related biases. The study highlights the critical role police play not only in the victims' sense of safety and justice, but also in shaping victims' recovery trajectories. It underscores the need for consistent, trauma-informed, and equitable policing practices, and for better communication and support systems. These findings have implications for police training and policy, particularly in improving responses to stalking and ensuring victims feel heard, validated, and informed.

Police responses to stalking: An interjurisdictional review

Professor Troy McEwan, Ms Catie Bridgeman, Dr Nichola Tyler

Centre for Forensic Behavioural Science, Swinburne University of Technology, Melbourne, VIC, Australia

This presentation will describe the results of an international inter-jurisdictional review of police responses to stalking and use this to contextualise the challenges facing Victoria Police. Surveys and interviews were used to collect data from 20 police organisations across 9 jurisdictions in the United Kingdom, Europe, North America and the Asia-Pacific. Questions covered how police structured their responses to stalking in each jurisdiction, as well as barriers and facilitators to effectively identifying and responding to stalking. Three different levels of police responses to stalking were identified: *multi-agency specialist stalking responses*, some specialised stalking response, and no specific stalking response. Participating police agencies reported very similar challenges in responding to stalking, despite operating in very different jurisdictions. These challenges include a lack of awareness of the severity and impacts of stalking within police and the wider criminal justice system, a failure to recognise stalking, and as a result, a failure to implement policies and systems that would facilitate a more effective response to protect victims and prevent stalking. The presentation will end by describing the Victoria Police Stalking Response Model and how it attempted to address these issues.

Impacts of the Victoria Police Stalking Response Model

<u>Dr Ben Spivak</u>, Dr Nichola Tyler, Ms Katie Richardson, Professor Troy McEwan

Centre for Forensic Behavioural Science, Swinburne University of Technology, Melbourne, VIC, Australia

A key outcome for the Victoria Police Stalking Response Model pilot was whether the implementation had an impact on police detection and response to stalking. Analyses were undertaken to examine whether (1) police were able to accurately identify stalking

cases following training, during the pilot period; and (2) whether the pilot had an impact on the use of stalking charges. To assess whether police could accurately identify stalking cases at time of initial report, a sample of 180 potential stalking cases involving either PSIO/FVIO breaches or harassment charges was provided from each of the pilot areas pre-and post-pilot. An expert rater reviewed available police information to assess (a) whether stalking was present and, (b) whether responding members identified stalking. Changes in the proportion of cases identified were compared pre/post training during the pilot period. Finally, to examine whether the pilot caused police to use stalking and stalking-related charges more, a difference-in-difference design was used to compare the pilot police divisions with other divisions where the Response Model was not implemented

PRESENTERS

Mr Nathan Akoka

Nathan Akoka is a provisional psychologist, studying a Doctor of Psychology (Clinical and Forensic Psychology) at Swinburne University. Nathan has worked across the private and public Alcohol and Other Drugs (AOD) sector as an AOD Clinician providing individual counselling, group work and assessments to forensic and voluntary clients. Nathan currently works as a Youth AOD Practitioner at YSAS, Research Assistant at Orygen Youth Health, and Associate Teaching Fellow at Deakin University.

Ms Victoria V Athanasiadis

Victoria is a Senior Occupational Therapist registered with the Australian Health Practitioner Regulation Agency (AHPRA). Victoria studied a Bachelor of Health Science and Master of Occupational Therapy through Latrobe University. She has gained experience working across inpatient and outpatient public health services, and within private practice clinical settings. Victoria has experience working with youth and adult clients with multiple and complex needs, including physical, neurological, neurodevelopment and severe psychosocial disability in the forensic system. She has a strong interest in identifying cognitive, sensory and emotional needs to minimise risk and challenging behaviours, and improve quality of life.

Dr Stavroola Anderson

Stavroola Anderson (BA, DipED, BPsycSci, PhD, MProfPsyc) is the current Vice-President of the Australasian Corrections Education Association (ACEA). She has been involved in education, research and psychology service provision for young people engaged with the justice system for 20 years. Stavroola has a proven record in developing and implementing innovative programs, particularly relating to youth engagement, oral language and literacy progression, and the development of skills in emotional, behavioural and social understanding and management. Stavroola is passionate about improving access to and relevance of individualised and group-based intervention programs for young people with complex life experiences and support needs.

Associate Professor Ashley Batastini

Ashley Batastini is an Associate Professor in the Centre for Forensic Behavioural Science at Swinburne University of Technology. She earned her Ph.D. in Counseling Psychology at Texas Tech University in the United States in 2015. Her work focuses on developing novel intervention strategies for higher-risk populations, improving access to appropriate interventions at various stages of criminal legal involvement, and addressing systemic factors within the carecal setting that can diminish the efficacy of interventions. Her

research often considers ways to integrate technology into forensic and correctional mental health services. Beyond her research interests, Assoc. Prof. Batastini has clinical expertise in conducting forensic mental health evaluations.

Ms Catie Bridgeman

Catie Bridgeman is a doctoral candidate and provisional psychologist with research interests in complex behaviours, including stalking and family violence. Her thesis focuses on the management of stalking risk, examining current risk management practices, factors associated with repeated stalking, and victim perspectives on police responses and available supports in Victoria, Australia. Through this research, Catie aims to contribute to evidence-based practices that improve risk assessment, enhance management strategies, and strengthen support systems for individuals affected by stalking. Catie's doctoral work is supervised by Prof. Troy McEwan and Dr Margaret Nixon.

Ms Houda Boucetta

Houda is a fourth-year Doctor of Psychology (Clinical and Forensic Psychology) candidate at Swinburne University of Technology. Her doctoral thesis interrogates algorithmic fairness in intimate partner and family violence risk-assessment tools, with a focus on exploring ways in which fairness across multiple demographic groups can be approached algorithmically.

Ms Jacqui Brown

Jacqui is a clinical psychologist, who has worked across drug harm reduction programs, public mental health, forensic services, international development in Cambodia and she has extensive experience in program management, particularly for services involved in the Multiple and Complex Needs Initiative (MACNI). Jacqui's areas of interest include risk assessment and the provision of expert witness testimony for people with cognitive disability involved in the court system, complex behaviour support intervention and capacity building for care teams to work together more effectively. She regularly provides training to improve the coordination capacity of teams within the complex needs sector.

Professor Nicola Carr (Keynote)

Nicola Carr is Professor and Chair of Social Work and Social Policy in Trinity College Dublin. She has previously worked in Queen's University Belfast and the University of Nottingham, where she has taught on social work and criminology programmes. Nicola is professionally qualified as a probation officer and has previously worked both with adults and young people in the criminal justice system. She researches different aspects of the criminal justice system, including people's experiences of contact with the system. This has included studies of young people's interactions with police and LGBT people's experiences of imprisonment. She is also interested in practice and decision-making in

the criminal justice system and has carried out a range of research in this area. She is currently undertaking research on the probation service in England and Wales. This has involved the production of a podcast series with the Prison Radio Association exploring the purposes and future of probation. Nicola is also currently leading a five-nation comparative study exploring practices and experiences of community supervision. Nicola has written widely on different aspects of crime and justice. She has recently published a book on *Time and Punishment* (with Gwen Robinson), which explores how time is an integral aspect of punishment, and a book on *Youth Justice* (with Roger Smith), which looks at youth justice in the global context. Nicola has acted as a Scientific Advisor to the Council of Europe and is a Board member of the Confederation of European Probation. She has served as editor of the *Probation Journal* and is an editorial board member of the *British Journal of Criminology, Youth Justice* and the *Irish Probation Journal*.

Dr Andrew Carroll (Keynote)

Andrew Carroll is an Adjunct Associate Professor at the Centre for Forensic Behavioural Science. He has worked as a Consultant Forensic Psychiatrist in both treatment and assessment roles in Victoria since the late 1990s.

He studied as an undergraduate at the University of Cambridge, obtaining First Class Honours in Medical Sciences before reading Psychology to Masters level. He then trained in clinical medicine at the University of Oxford. After training in psychiatry in North Yorkshire, he completed a Research Fellowship at the University of Edinburgh. He then moved to Melbourne and worked at the Victorian Institute of Forensic Mental Health (Forensicare) for some 25 years, undertaking a variety of roles in its hospital, community and prison services.

He is an experienced expert witness in both criminal and civil matters. He has particular interest in how the effects of mental disorders, and their possible causal relationships to offending behaviour, are considered by the criminal courts at sentencing. He was an expert witness in the landmark case of *Brown*, that radically changed how personality disorders are taken into account at sentencing in Victoria following an Appeal court ruling (*Brown v The Queen [2020] VSCA 212*).

He has co-authored a number of papers and book chapters on the role of mental health expert evidence in the criminal courts.

Dr Carroll also has a role at the Victorian Department of Health as a Deputy Chief Psychiatrist (Forensic Mental Health). In addition, he is Co-Director of Our Curious Minds, a training and consultancy company working in the mental health, psychosocial and legal sectors.

Ms Caitlin L Cohen

Ms. Caitlin Cohen is a Doctor of Psychology (Forensic) candidate at Swinburne University of Technology's Centre for Forensic Behavioural Science. Her doctoral research examines the performance of structured risk assessment tools in cases of child maltreatment.

Through a combination of quantitative and qualitative methods, her work explores the performance of these tools, alongside clinician and judicial perspectives on their application and utility. Ms. Cohen has experience across clinical and forensic settings and recently completed a placement at the Alfred Youth Forensic Specialist Service. Her interests include child maltreatment, health psychology, and systems-informed approaches to understanding and responding to risk.

Mr Brendon S Crompton

With 30 years experience in youth development, I have worked in high school education, youth and community policing and youth justice services including managing part of a youth prison before moving into the NGO sector to provide community-based youth justice programs to intervene in and prevent further offending by young people. I am now the CEO of a national youth development organisation in New Zealand that works in partnership with multiple government agencies.

Dr. Keith Cruise

Keith Cruise is Professor of Psychology at Fordham University. Dr. Cruise is also the Co-Director of the Center for Trauma Recovery and Juvenile Justice (CTRJJ), a training and technical assistance center focused on enhancing a framework of trauma-informed care for youth and families experiencing justice system involvement. As the Director of Behavioral Health Screening Services at the National Youth Screening and Assessment Partners, Dr. Cruise provides consultation, technical assistance, and training to local and state juvenile justice systems on behavioral health screening, evidence-based use of risk/needs assessments, trauma treatment implementation, and collaborative, system-level coordination to enhance trauma informed care.

Professor Michael Daffern

Michael Daffern is Professor of Clinical Forensic Psychology and Director of the Centre for Forensic Behavioural Science, Swinburne University of Technology. He is also a Consultant Principal Psychologist with the Victorian Institute of Forensic Mental Health (Forensicare). He began his career as a psychologist in the New South Wales Department of Corrective Services in 1992 and he has worked in general and forensic mental health services since this time. He divides his time between research, teaching, clinical practice and juggling administrative and management duties. His research interests focus on the assessment and treatment of people who have offended.

Professor Susan Dennison

Susan Dennison is a Professor in the Griffith Criminology Institute, Griffith University. She is Director of the Transforming Corrections to Transform Lives Centre, leading a transformative system of practice to better support mothers who experience incarceration,

and their children, break down intergenerational cycles of disadvantage and incarceration, and generate new knowledge for evidence-based programs. Her research has focused on understanding how childhood adversity, particularly maltreatment and parental incarceration, affects young people's outcomes. She emphasises translating research to policy and practice.

Ms Julia Douglas

Julia is a social worker with over 25 years' experience working in direct service delivery, management, practice development and policy in both government and community sector organisations. She is an advocate for evidence-informed approaches to policy, practice and service development, and committed to improving outcomes for people with complex needs. Julia is currently a Clinical Social Work Educator at Forensicare, the statewide forensic mental health service for Victoria, Australia.

Dr Lisa Forrester

Dr. Lisa Forrester is a Senior Clinical and Forensic Psychologist with over 20 years' experience in assessment and treatment across forensic and clinical settings for youth and adults. Her roles have included positions at Forensicare, the Royal Children's Hospital, and public mental health services, spanning inpatient, community, and correctional contexts. She holds a Doctor of Psychology (Clinical) from La Trobe University and is a board-approved supervisor with clinical and forensic endorsement. Dr. Forrester has served as Clinic Director at the Children's Court Clinic since 2021, following her role as Senior Clinical and Forensic Psychologist.

Carlo Garofalo (Keynote)

Carlo Garofalo is a Senior Assistant Professor at the University of Perugia (Italy), Department of Philosophy, Social Sciences and Education. Before joining the University of Perugia in 2022, he graduated from Sapienza University of Rome in 2016, and worked as an Assistant and Associate Professor at Tilburg University (Netherlands) from 2015 to 2017.

His main research interests lie at the intersection of personality pathology (mainly, psychopathy), emotion regulation, and aggression, and he has published extensively on these and related topics. In 2022, he co-edited (with Jelle Sijtsema) the book Clinical Forensic Psychology: Introductory Perspectives on Offending for Palgrave MacMillan.

He serves as an Associate Editor for the International Journal of Offender Therapy and Comparative Criminology, the Journal of Criminal Justice, the International Journal of Forensic Mental Health, and Frontiers in Psychiatry – section Forensic Psychiatry, as well as a Consulting Editor for Journal of Personality Assessment and Psychological Assessment. Further, he is on the Editorial Board of the Journal of Criminal Psychology, Advances.in/Psychology, Trauma, Violence, & Abuse, Journal of Forensic Psychology:

Research and Practice, and Portuguese Journal of Behavioral and Social Research.

He is a Full Member and member of the Scientific Committee of the Italian Society for Forensic Psychotherapy and Rehabilitation, as well as a Full Member of the Italian Association of Psychology, the Society for the Scientific Study of Psychopathy, and the European Society for the Study of Personality Disorders. Within the latter, he is founding member and co-chair (with Steven Gillespie) of the Section for the Study of Aggression and Antisociality.

Associate Professor Rachael Fullam

Associate Professor Fullam B.Sc.(Hons) (Psyc), PhD, provides project oversight and management across all contracted consultation, evaluation and research projects at the Centre for Forensic Behavioural Science. She has expertise in qualitative and quantitative evaluation of interventions and services across health and correctional settings and holds specialist knowledge in forensic behavioural science. She regularly designs and manages evaluations of new services, interventions and training programs.

Ms April Goldring

April is a proud Wiradjuri woman currently pursuing a Doctor of Psychology (Clinical and Forensic Psychology) at Swinburne University of Technology. Her academic research focuses on the intersectionality and complexities of justice system involvement and the Social and Emotional Wellbeing of Indigenous Peoples. April holds various roles where she applies her expertise to support Indigenous and LGBTQIA+ communities. April teaches culturally sensitive practices, facilitates reflective practice groups, leads mentorship initiatives, and contributes to the development of frameworks that ensure cultural and psychological safety. Through this work, April aims to advance culturally competent psychological practices within the psychology field.

Dr Jessica J Griffith

Dr Jessica Griffith is an endorsed Clinical and Forensic Psychologist with a Doctorate in both disciplines. She has extensive experience across forensic, disability, mental health, and youth services in roles spanning clinical practice, risk assessment, research, and training. Jessica's work focuses on reducing restrictive practices, supporting neurodivergent clients, and improving service responses for justice-involved individuals with complex needs. She has led clinical trials on aggression risk assessment instruments and is the developer of the PRISM model—an integrative framework for person-centred formulation. Jessica is a board-approved supervisor in private practice and co-founder of the Australasian Association of Forensic Disability.

Prof Susan Hatters Friedman

Susan Hatters Friedman, MD, MSt, DFAPA is a forensic and reproductive psychiatrist. She currently serves as the inaugural Phillip Resnick Chair of Forensic Psychiatry at Case Western Reserve University, where she is also a professor of psychiatry, reproductive biology, paediatrics, and law. Susan is Past President of the American Academy of Psychiatry and the Law (AAPL). She is also honorary faculty at the University of Auckland. She previously worked at the UoA, Mason Clinic, and the Auckland Women's Correctional Facility. Her clinical work and research has focussed on the intersection between maternal mental health and forensic psychiatry.

Dr. Andrew Howie

Dr. Andrew Howie is a consultant psychiatrist working in Auckland, New Zealand, in the public sector system and in private practice. He is an Honorary Senior Lecturer in the Department of Psychological Medicine at the University of Auckland. He is a former clinical director of the far west mental health and Addiction Services in New South Wales, Australia, clinical director of Whitiki Maurea Maori mental health and addiction services in Waitemata in Auckland. He is currently the New Zealand representative on the RANZCP Section of Philosophy and Humanities.

Dr Donna-Maree Louise Humphery

Donna-Maree has a PhD in Social Work which was awarded by the University of East Anglia. Her thesis examines contemporary youth offending practice with female offenders in care. Her research interests focus on vulnerabilities and construction of crime; intersectionality and criminalisation; trauma and trauma informed responses to offenders; the intersection of care experience, gender and criminal justice; experiences of transitions within criminal justice systems. Donna-Maree is also a qualified and registered Social Worker. Donna-Maree is employed as a Lecturer in Social Work at the University of Salford. She is currently the programme leader of the Social Work Masters programme.

Professor Julia Joane

Of Oceania descent (Polynesia), Julia is a pracademic in clinical psychology and Pacific worldviews. She teaches in a doctoral clinical psychology programme, supervises and conducts research primarily in the Care and Justice sectors. Her clinical practice involves working mainly with Indigenous and Pacific children, youth and families in Care and in Justice. She is a member on various advisory and governance groups in New Zealand including the New Zealand Parole Board. Julia presents on a model co-designed and developed with the community to increase and enhance positive outcomes for one of our most underserved youth communities.

Dr Laura A Jakul

Dr. Jakul is a registered clinical and forensic psychologist. She completed her clinical residency at the Yale University School of Medicine and her Ph.D. at the University of Manitoba. Dr. Jakul's forensic experience includes evaluations for fitness to stand trial, substance abuse assessment and treatment, violence risk assessment, treatment for high-risk offenders, and assessment and treatment for developmentally delayed offenders. She currently provides a range of psychological assessment and treatment services for individuals with sexual and aggressive behaviour problems and other major mental health issues in a collaborative community based psychological practice in Winnipeg, Manitoba.

Miss Jessica N Kent

Jess is a PhD candidate at The Cairnmillar Institute in Melbourne, and a clinical psychologist with Forensicare. Jess' research interest is in the relationship between youth residential care and offending behaviour. In her clinical role, Jess works in regional prisons in Victoria with individuals presenting with significant mental health concerns.

Professor Nathan J. Kolla

Dr. Nathan Kolla is a forensic psychiatrist and recently joined Swinburne University of Technology as Professor of Forensic Psychiatry. His research aims to elucidate the neurobiological correlates of violence, anger, and aggression in forensic psychiatric populations using multimodal neuroimaging techniques and genetic analyses.

Dr Mayio Konidaris

Mayio has had over 30 years experiences as a social worker, predominantly in the mental health field. She is currently based at Victoria University as a Senior Lecturer in Social Work. She completed her PhD at Monash University where she explored the impact of cultural humility in social work education and mental health service provision. Mayio's research interests have drawn inspiration from both her extensive clinical mental health practice and her second-generation migrant background. As part of family therapy research Mayio also previously explored experiences of second-generation migrant adults living with mental illness, which she incorporates into her training.

Mr Nishant Krishnan

Mr Krishnan is a doctoral candidate affiliated with the Centre for Forensic Behavioural Science. His research interests lie in forensic mental health assessment, with a particular focus on evaluations of fitness to stand trial, criminal responsibility, and the detection of malingering. His current doctoral research is centred on identifying empirically supported malingering screening measures appropriate for application within the Australian forensic context.

Professor Marichelle Leclair

As a professor at the Université du Québec en Outaouais and researcher at the Institut national de psychiatrie légale Philippe-Pinel (FRQ-Santé, Chercheuse-boursière J1), I specialize in developing strategies to enhance mental health services for people involved with the justice system to promote recovery and desistance. I hold a Ph.D. in Psychology (UMontréal, CIHR Vanier) and a Master's in Epidemiology (McGillU, FRQ-Société Culture), with postdoctoral work at UEdinburgh (FRQ-Santé).

Dr Caleb Lloyd

Dr. Caleb Lloyd (B.A Honours, MA, PhD), is an Associate Professor with the Centre for Forensic Behavioural Science at Swinburne University of Technology. He has published a variety of peer-reviewed academic articles on numerous criminal justice topics, with most focusing on how individuals engage in processes of behaviour change to desist from crime. Research topics span the entire pathway in and out of corrections, from citizen contact with police officers to sentencing decisions in courts, rehabilitation experiences in prison, reintegration into community corrections, and trajectories toward desistance from crime.

Dr Tobias Mackinnon

Dr Tobias Mackinnon is a consultant forensic psychiatrist and Executive Director, Clinical Services at Forensicare. Prior to joining Forensicare, Toby spent the past ten years in Sydney where he was the Co-Director Forensic Mental Health with Justice Health and Forensic Mental Health Network, NSW. He has extensive experience in forensic mental health in the UK and NSW, having completed his medical training in Australia and his specialist training in the UK, where he obtained a Master of Sciences in forensic mental health research.

Dr Tess Maguire

Tess Maguire is a Senior Lecturer in Forensic Mental Health Nursing with a joint appointment with the Centre for Forensic Behavioural Science and Forensicare. Her research focuses on forensic mental health nursing practice, including risk assessment and nursing interventions to reduce aggression. She was the recipient of the International Association of Forensic Mental Health Services, Christopher Webster Early Career Award in 2020, the eDASA + APP received a National Award from the Australian Council on Healthcare Standard for clinical excellence and patient safety. She also received the Chris Abderhalden Award for Young Researchers in the Field of Aggression in Healthcare.

Professor Troy McEwan

Professor Troy McEwan's research interests focus on improving understanding,

assessment, and treatment of problem behaviour, with a particular interest in stalking, intimate partner and family violence, and deliberate firesetting. She has expertise in the development and evaluation of risk assessment instruments for these and other behaviours such as violence and sexual offending. Troy is a clinical and forensic psychologist who has worked in both inpatient and community forensic mental health settings since 2008. Troy also provides regular education and training to practitioners in the fields of mental health, criminal justice, and social services around Australia and internationally.

Professor Susan McVie OBE FRSE FAcSS (Keynote)

Susan is Chair of Quantitative Criminology at the School of Law, University of Edinburgh. She is Co-Director of the Edinburgh Study of Youth Transitions and Crime; Director of the Policing the Pandemic in Scotland project; Co-Director of the Scottish Centre for Administrative Data Research; a member of the Scottish Government's Board of Official Statistics; and an associate member of the Scottish Centre for Crime and Justice Research and the Scottish Institute for Policing Research.

Susan has worked in academia for around 30 years and her areas of research include: crime and justice inequalities; changing patterns of victimisation and offending; criminal careers over the life course; transitions from juvenile to adult justice systems; violence and homicide; youth gangs and knife crime; violence and vulnerability; youth offending and ACES; police use of stop and search; non-compliance with the Coronavirus Regulations; policing mental health crises; public health policing; and online drug markets. Prior to joining the academy, she was a government researcher and focused on multiple areas of policy, including policing, courts and prisons. She has acted as an advisor to governments in Scotland, the UK and a range of international countries on policy issues relating to crime, justice and policing.

Along with her colleague and co-author, Professor Lesley McAra, Susan received the Howard League for Penal Reform Research Medal in 2013; the University of Edinburgh's Chancellor's Award for Impact from HRH Princess Anne in 2016; and the ESRC's Award for Outstanding Public Policy Impact in 2019. She won the 2021 European Society for Prevention Research President's Award for a co-authored paper in the British Journal of Criminology. She was elected a Fellow of the Royal Society of Edinburgh in 2014 and Fellow of the Academy of Social Sciences in 2020. She received an OBE for services to social science in the Queen's New Year's Honours List in 2016.

Ms Amy Mouafi

Amy is an experienced senior leader with 25 years of expertise in management, leadership, and driving strategic initiatives for government agencies, law enforcement, and not-for-profits. She excels in designing frameworks for large-scale community programs that drive sustainable change and meet organisational objectives. Specialising

in evidence-based approaches, Amy has led initiatives in areas such as crime reduction, socio-economic growth, and emergency management. As a strategic advisor and consultant, she shares her insights to help organisations develop purpose driven solutions to mitigate violent crimes while supporting emerging and established leaders enhance their skills in managing diverse environments and overcoming challenges.

Dr Margaret Nixon

Dr Nixon is a Senior Lecturer in forensic behavioural science at the Centre for Forensic Behavioural Science, and is the Convenor of the professional graduate programs in Forensic Behavioural Science and Forensic Psychiatric Practice. She completed her PhD at Monash University, and has worked across many large research projects in both health and forensic research areas. She has particular expertise in the management of sensitive information, data linkage methodologies, qualitative research and service evaluations. Her research interests include forensic disability, complex behaviour, interventions in secure settings and the intersection between offending and victimisation.

Mrs Aleshia R Nanev

Aleshia Nanev is a doctoral candidate and provisional psychologist with research interests in forensic psychology, particularly in the areas of sexual violence, offender heterogeneity, and sexual homicide. Her research focuses on the typologies used to understand individuals who perpetrate sexual homicide offences. Through her thesis, Aleshia aims to evaluate the reliability and validity of commonly used sexual homicide typologies within a sample of offenders from Australia and New Zealand. By doing so, she intends to contribute to the evidence base and the accurate and reliable concepsualisation of sexual homicide and the people who commit such crimes.

Distinuished Professor James R. P. Ogloff AM

Distinguished Professor James R. P. Ogloff AM is Executive Dean of the School of Health Sciences at Swinburne University of Technology and University Distinguished Professor of Forensic Behavioural Science. A clinical and forensic psychologist and lawyer, he has worked in psychology, law, and justice systems for over 40 years. He was the foundation Director of the Centre for Forensic Behavioural Science and serves as Strategic Advisor to Forensicare. Internationally recognised for his expertise in forensic behavioural science and psychology and the assessment and treatment of offenders. He is currently leading an ARC Linkage Grant investigating online child exploitation offending, with Victoria Police, Corrections Victoria, Monash University and the Australia Institute of Criminology. He has published widely, has supervised more than 80 doctoral students, and his contributions have been recognised with numerous awards, including appointment as a Member of the Order of Australia for services to forensic psychology, education, and law.

Shawna Paris

Shawna Paris, O.N.S., KC, MSW, RSW-CS, PhD (student), is a dual-licensed lawyer and clinical/forensic social worker with over 30 years of experience advancing justice, equity, and mental health in Canada. She is a national leader in forensic social work, trauma-informed practice, and culturally responsive assessments, including as an assessor of Impact of Race and Culture Assessments (IRCAs). Shawna specializes in trauma, racialized stress, and systemic advocacy. A sought-after educator, speaker, and consultant, she is also pursuing PhD research focused on forensic social work education on race, culture, and legal-social work intersections in Canadian justice and education systems.

Dr Maddison Riachi

Dr. Maddison Riachi is a Postdoctoral Research Fellow and a Clinical and Forensic Psychologist, specialising in the assessment and treatment of children, adolescents, and families within clinical and forensic settings. Dr. Riachi is affiliated with Swinburne University of Technology's Centre for Forensic Behavioural Science, and facilitates research projects associated with the Victorian Children's Court Clinic (CCC). Her research interests encompass youth problem behaviours, family violence, and child maltreatment. Dr. Riachi also holds a senior clinical role with the CCC, conducting forensic family evaluations and clinical/forensic assessments for young people in contact with the criminal justice system.

Professor Barry Rosenfeld (Keynote)

Barry Rosenfeld is a Professor of Psychology and Adjunct Professor of Law at Fordham University, where he co-directs the concentration in Forensic Psychology. He is a Past President of the American Psychology Law Society and the International Association of Forensic Mental Health Services. He is also a member of the editorial board of several prominent journals and routinely provides workshops on violence risk assessment, malingering and cross-cultural issues in forensic assessment.

Dr. Rosenfeld has published more than 200 peer reviewed journal articles and book chapters addressing a wide range of topics in psychology and law, including violence risk assessment, malingering, and cross-cultural issues in forensic assessment. He is board certified in forensic psychology and conducts evaluations in both civil and criminal forensic settings, including violence risk assessment, civil commitment of sex offenders, competency to stand trial, and personal injury/emotional damages. Dr. Rosenfeld has also been involved in the evaluation of individuals detained in the infamous Abu Ghraib prison and the Guantanamo Bay military prison, consulted to the U.N. War Tribunal regarding the prosecution of Serbian individuals accused of war crimes, and has evaluated Punjabi litigants involved in a class action lawsuit against the government of India and Sudanese refugees living in the U.S. suing for damages suffered during the second Sudanese

civil war. He currently consults to multiple television networks on issues related to risk assessment for reality television show participants.

Ms Judy Therese Saba

Judy Saba CF, FRSA an accredited trainer, cross-cultural psychologist, public speaker with extensive experience in psychology, critical problem analysis and applied diversity training in contexts including Policing, Health, Education, Refugee Torture Trauma, Interpreting. Judy pioneered a brand of applied diversity training tailored to and drawn from the realities of policing in a diverse environment, and applied in the US, Middle East and UK through her Churchill Fellowship. Judy has worked with numerous investigations involving cultural, linguistic or religious diversity factors. Her development and application of "Diversity of Thought Roundtables", contributed to successes in case investigations and in centering victim experience.

Dr Madison Lee Schulz

Maddy is a Psychologist and early career researcher who completed her Doctor of Philosophy (Clinical Psychology) degree at Swinburne University of Technology. She has worked as researcher and psychologist across a range of settings and is currently working in a specialised youth personality disorder service. Her PhD focused on social outcomes of children who have been exposed to intimate partner violence during early childhood, and potential protective factors which may mitigate the risk of poor social functioning. She hopes this will inform how services and families can support children exposed to IPV, to prevent negative developmental trajectories.

Irene Severi

Irene Severi is a Ph.D. student in Human Sciences at the University of Perugia (Italy), Department of Philosophy, Social and Human Sciences, and Education. Her research primarily focuses on the study of aggression and its psychological correlates (e.g., personality, attachment patterns, emotion regulation, childhood trauma) from a psychodynamic perspective. Currently, she is conducting research at the Casa di Reclusione of Spoleto (Italy), where she investigates the functions and dynamics of aggression in a population of adult male inmates.

Ms Renee Sinclair

Renee Sinclair is the Program Manager, Complex Needs at the Office of the Chief Psychiatrist, Department of Health, Victoria. With over 15 years of experience in mental health, disability, forensic services, and systems reform, Renee has led high-impact, Cabinet-directed initiatives focused on improving outcomes for Victoria's most

complex and high-risk individuals. She brings extensive expertise in interdepartmental coordination, collaboration, service design and program management. Her work is grounded in evidence-based practice and driven by a deep commitment to addressing systemic barriers to care. She holds qualifications in psychology, improvement science and project management.

Dr Calum A Smith

Dr Calum Smith is a consultant forensic psychiatrist. From April 2018 until November 2021, he worked as a consultant forensic psychiatrist with Justice Health in NSW. There he was the clinical lead of a project to end the long-term seclusion for a patient who had been in seclusion for six years. He continues to write court reports to NSW and other jurisdictions. Since moving to Western Australia he was worked in a variety of role. His interests include risks assessment, reduction of reduction of restrictive practices, and systems approaches.

Dr Renee Sorrentino

Dr. Sorrentino is the medical director at the Institute for Sexual Wellness and an assistant professor of psychiatry at Massachusetts General Hospital and Harvard Medical School. Dr. Sorrentino's practice is devoted to the treatment and evaluation of paraphilias and individuals who commit sexual offenses, as well as the hormonal treatment of paraphilias. She is a Board member in the local chapter of the Association for the Treatment of Sexual Abusers (ATSA). She is the American Academy of Psychiatry and the Law vice president, recipient of the Red AAPL award, editorial board member, and frequent presenter at the AAPL.

Dr Benjamin Spivak

Dr Benjamin Spivak holds a Bachelor of Arts (Honours) and a Ph.D. from Monash University. He is the leader of the culture, psychology and law research stream and co-leader of the psychology and legal processes research stream. Benjamin conducts research on a wide range of topics including jury and judicial decision-making, violence risk assessment, cross-cultural disparities in crime and health outcomes, psychometrics and research methodology. Dr Spivak's work focuses on applying novel methodology to evaluate and improve criminal justice policy. He has conducted research collaborations at all stages of the criminal justice system including corrections, courts and police.

Professor Susanne J M Strand

Susanne Strand is a professor of Criminology at Örebro University in Sweden, where she serves as the dean of the Faculty of Humanities and Social Sciences. She is also the research leader for the Centre of Violence Studies (CVS) and holds an adjunct position

at the Centre for Forensic Behavioural Science at Swinburne University of Technology in Melbourne, Australia. Currently, she is investigating risk management strategies for intimate partner violence, stalking, and honor-based violence and oppression. The longitudinal research program, RiskSam (2019-2025), is being conducted in collaboration with the police and social services.

Gracie Tan-Singh

Gracie Tan-Singh is a PhD candidate at Swinburne University's Centre for Forensic Behavioural Science, researching structured risk assessment and early intervention to reduce aggression and restrictive practices in acute mental health settings. Currently based in Melbourne, Australia, Gracie brings a unique practitioner-researcher perspective to her academic work, with over two decades of diverse experience in clinical and strategic policy roles, across forensic mental health, general mental health, and justice sectors in Singapore and Australia. Gracie's work bridges research and practice, focusing on evidence-based interventions to improve outcomes for justice-involved individuals and support safer, recovery-oriented mental health services.

Dr Carleen Thompson

Carleen Thompson is a Senior Lecturer in the School of Criminology and Criminal Justice, Griffith University, Co-Lead of the Queensland Cross-sector Research Collaboration (QCRC), and Project Investigator on the Transforming Corrections to Transform Lives (TCTL) project. Carleen's research aims to improve understanding of the causes and progression of offending to drive evidence-based intervention planning that reduces re-offending. She is currently working as a project investigator with the Transforming Corrections to Transform Lives Centre to create a transformative system of practice that aims to better support incarcerated mothers and their children to break cycles of disadvantage and offending.

Dr Shelley Turner

Dr Shelley Turner is Executive Director, Hospital Operations at Forensicare (Victorian Institute for Forensic Mental Health) and holds honorary academic appointments at Monash University and the Centre for Forensic Behavioural Science at Swinburne University. She has extensive clinical leadership, management, teaching and research experience, with expertise in youth justice, adult corrections, problem-solving courts, and statutory social work. Shelley has a particular interest in lived experience and models for ethical and effective forensic practice.

Dr Nicola Tyler

Dr Nichola Tyler (BSc [Hons], MSc, PhD) is a Senior Lecturer in Forensic Psychology at the Centre for Forensic Behavioural Science, Swinburne University of Technology.

Nichola's research focuses on improving understanding, assessment, and prevention of problem behaviours, with a particular interest in advancing clinical practice for working with adults and young people who engage in deliberate firesetting and arson. Nichola has also conducted research on the prevention of sexual violence and justice professionals' wellbeing, with the aim of improving the supports available for those working in the criminal justice and forensic mental health systems.

Lecturer Martina Vikander

Martina Vikander is a lecturer and researcher in Social Work at Örebro University in Sweden. Her research focuses on men's violence against women and children in various contexts. In June 2025, she defended her thesis on children's vulnerability and resistance in the context of domestic violence and post-separation violence. Currently, her research examines risk management in cases of intimate partner violence (RiskSam, 2019–2025), and child welfare investigations involving children and youth who are subjected to commercial sexual exploitation (SUKSE, 2025–2028).

Ms Jordan White

Jordan is a PhD Candidate at the University of New South Wales, exploring 'A Critical Systems Perspective of Young People's Meaning Making of Pathways between Care and Custody! Jordan's interests are at the intersection of complex systems, particularly the Criminal Justice System, and Welfare systems, including Child Protection and Outof-Home Care. Jordan's career has developed within the relevant statutory systems she has an interest in with front line experience across Child Protection and Out-of-Home Care, and with Youth Justice clients. Jordan also has experience working within Ministerial offices across relevant portfolios, including Child Protection & Permanency and Youth Justice.

Mr Will Liheng Xu

Will Liheng Xu (he/him) is a PhD candidate in Psychology at Swinburne University of Technology and a Lecturer in Psychology at Federation University Australia. His research focuses on the predictive performance and fairness of risk assessment tools used in criminal justice settings, with particular interest in gender and racial disparities. He is currently involved in empirical projects examining the calibration and validity of these tools across diverse subgroups, including Indigenous and female populations.

About the Centre for Forensic Behavioural Science

The Centre for Forensic Behavioural Science provides academic and clinical excellence in forensic mental health research and practice. We bring together academics, clinicians, researchers and students from a variety of disciplines, including psychology, psychiatry, nursing, social work, law, occupational therapy and epidemiology.

Our research, consulting services and professional development and training programs have strengthened the field of forensic behavioural science in Australia and overseas.

Our mission is to create new knowledge through rigorous, clinically informed and serviceoriented research that improves our understanding of people who are at risk of offending, people who are already justice involved, and people who are the victims of crime, as well as the systems responsible for their care and management.

We harness additional expertise through our affiliations and collaborations. In particular, we have a strong partnership with the Victorian Institute of Forensic Mental Health (Forensicare), serving as Forensicare's research and training arm.

We also have a long record of collaborating with other general and forensic mental health and correctional services, as well as international experts.

To learn more about the centre, visit www.swinburne.edu.au/cfbs

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To learn more about the Centre for Forensic Behavioural Science go to www.swinburne.edu.au/cfbs

