



Forensicare

Reflections on 20 years of an innovative problem behaviour intervention service

Dr Lauren Ducat and Dr Kiara Bird

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What we'll cover

- **Introducing the Problem Behaviour Program, Forensicare**
- **Consumer snapshot 2015 -2024**
- **Case study**
- **Reflections on what works and what doesn't work**
- **Future directions**

Problem Behaviour Program – PBP, Forensicare

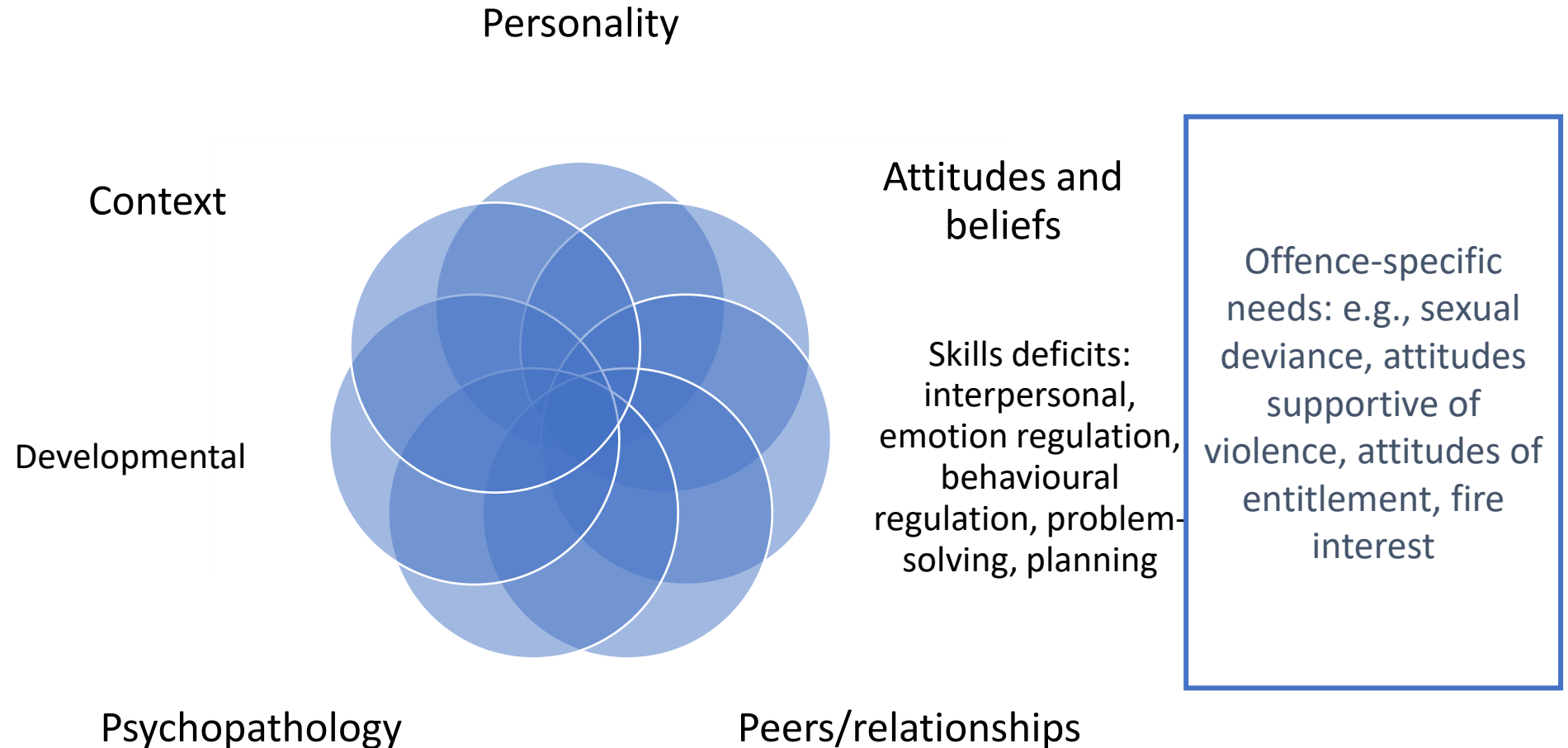
- **Established in 2003- combining clinics focused on those who stalk and those who threatened, in 2004 amalgamated with Psychosexual Treatment Program.**
- **Recognition of common underlying needs of consumers, and;**
- **Gap in the service sector.**

Purpose

- Prevention of serious harm by individuals who engage in problem behaviours
- Improve community safety and improve consumers lives
- Reduce negative outcomes for consumers and the community
- Provide multi-disciplinary expert consultancy, assessment and intervention
- Inter-agency collaboration and capacity building
- Contribution to research

The Problem Behaviour Model

Warren, Mackenzie, Mullen, & Ogloff (2005); McEwan, Mackenzie & McCarthy (2014)



What are problem behaviours?

- **Acts that intentionally or recklessly cause harm**
- **All such behaviours, not only those that are prosecuted**
- **Focus on behaviours where specialist intervention might assist to understand behaviour and reduce impact and risk**

Warren et al., 2005; McEwan et al., 2014

Problem Behaviour Program - PBP

- **Problem behaviours include:**
 - Adult sexual assault and rape
 - Child sexual assault
 - Other problematic sexual behaviour related to offending (e.g., exhibitionism)
 - Collection and possession of child exploitation material
 - Serious physical violence incl. threats to kill or harm others
 - Fire-setting
 - Stalking
 - Querulous (vexatious) complainants
 - Anything that causes concern!

PBP consumer snapshot 2015- 2024

N=2603



2365 (91%) male



**Age years Mean (SD), Range
43 (10.2); 19 - 92**



230 (9%) female

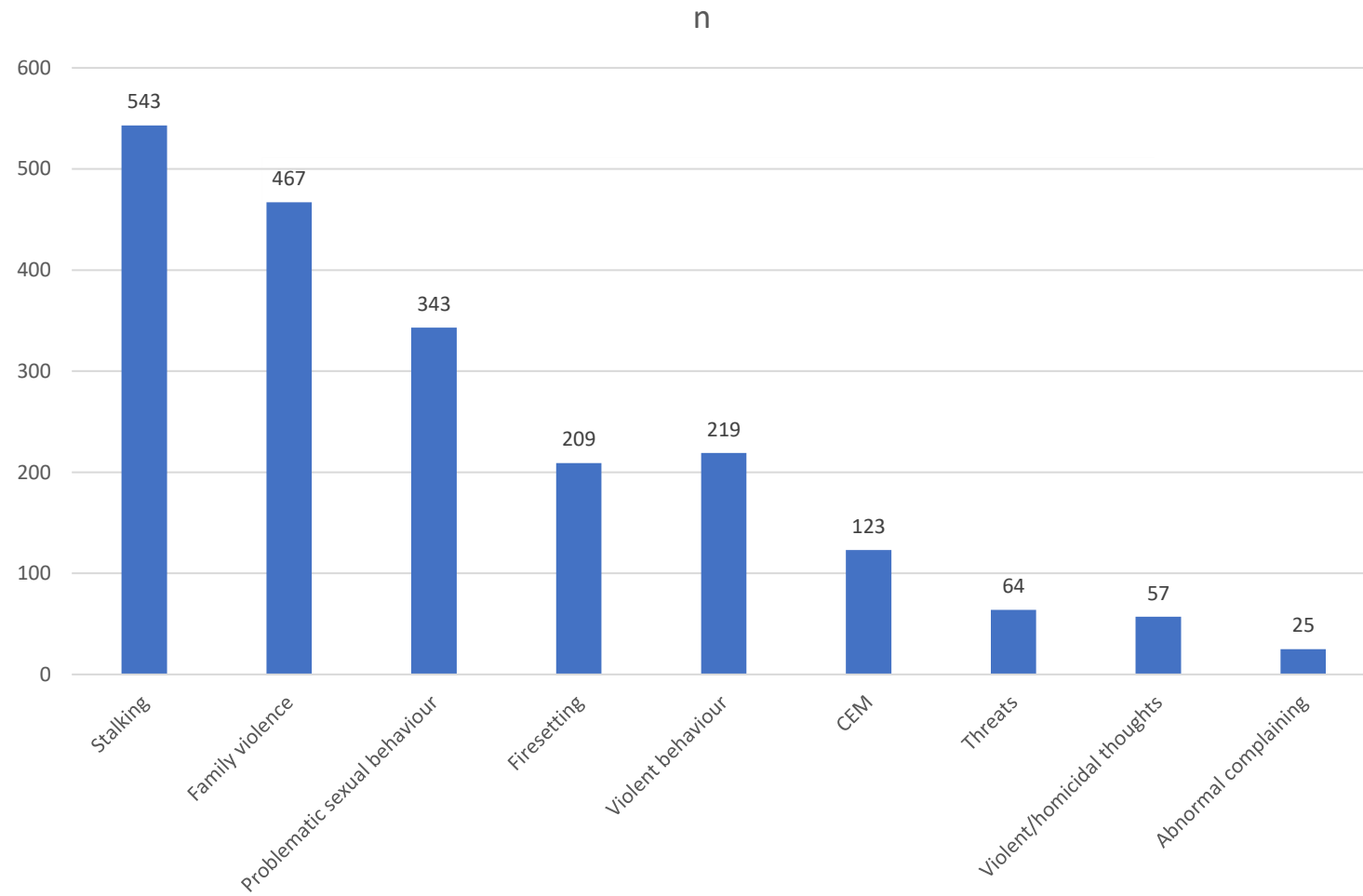


8 (<1%) other

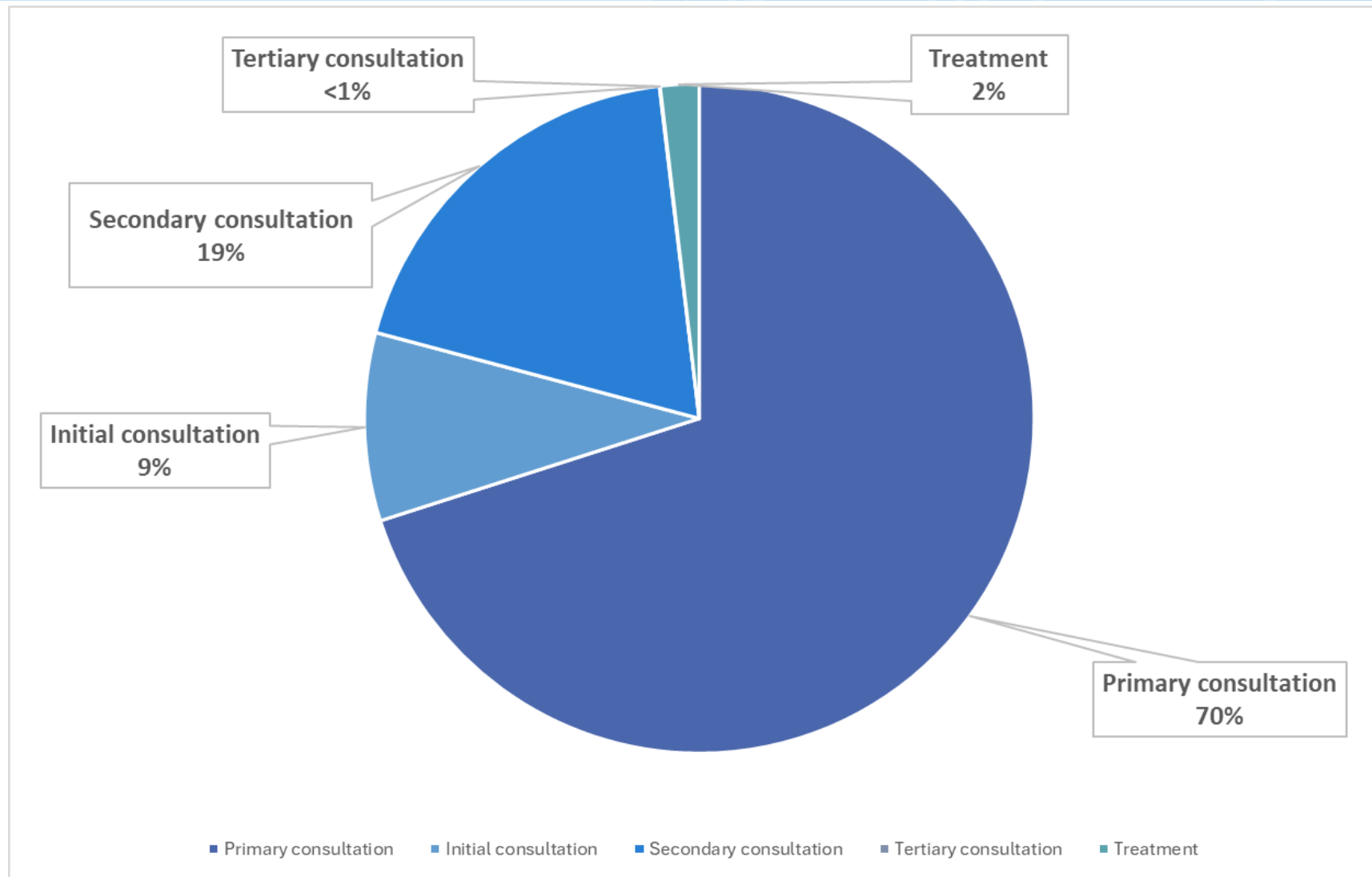
Referral sources

Referral source	<i>n</i> (%)
AMHW - outpatient	135 (5)
AMHW - inpatient	231 (9)
Client/Self	83 (3)
Community Corrections Services	1584 (61)
Community Health Services	39 (2)
DHHS Child Protection Services	85 (3)
DHHS Family violence	21 (<1)
FCS	45 (<1)
General Practitioner	32 (1)
¹ Other	348 (16)

Referral PB



Outcome of initial referral





Case Study - James ...

What has worked?

- **Strong linkage with CFBS**
- **Evaluation showed positive outcomes and led to growth**
- **Specialist service requires specialist staff with expertise in PBs (across all levels of service i.e., intake to primary consultation)**
- **Community of practice - high degree of specialism, transmission of knowledge**
- **Flexible service delivery and ability to work with consumers on a risk and needs-led basis rather than a prescribed number of sessions and a specific modality**
- **Multi-agency work and shared risk management**

What have been the challenges?

Systemic

- Contractual changes
- Funding changes
- Legislation
- Information sharing
- Translating recommendations into practice

Organisational

- Provision of service
- Maintaining staff expertise
- Assessing program efficacy

What do our consumers say?

“Everything that was talked about with me was very helpful and was incredibly informative in things I needed to change and ways to go about situations in a positive manner. Felt very comfortable opening up about previous situations and trauma’s I’d had. I felt respected and understood without any judgment or finger pointing. The sessions have helped me become a better version of myself and someone I can be proud of being, while also helping me be a better role model for family and friends...”

Consumer

"We don't always know how to help ourselves, and there are parts we don't want to see. There isn't a reason to do it alone."

Consumer

Future directions

- **Strengthening early intervention**
- **Building partnerships with community agencies**
- **Increasing opportunities for tertiary and education services**
- **More responsive and accessible service for consumers and agencies in rural and remote areas**
- **Reducing barriers for multi-agency work i.e., information-sharing protocols**
- **Defining our role in the family violence sector**
- **Program evaluation: interventions**

Questions

Lauren.ducat@forensicare.vic.gov.au

Kiara.bird@forensicare.vic.gov.au