

Acknowledgement of Country

CL is a Proud Dharug man a son, Brother and Uncle who grew up in western Sydney. A mad Bronco's fan who loves his footy

The canvas has a black background It is sprayed with blue, grey, dark blue and white. A sea turtle is in the centre of the canvas, with black head and legs. The shell of the turtle will be painted in two sections. The first section is split down the centre and painted light green, brown and white (Cross hatching).

In Aboriginal art, cross-hatching, also known as Rarrk is a distinctive technique characterised by fine, parallel lines that are often used to create abstract patterns and fill figures with a sense of spiritual depth and power.

The outer shell is painted in mahogany brown, green and white cross hatching. The turtle represents a journey traveling from one place to another. Around the sea turtle are baby sea turtles they represent connection and support. The connection between one another on the journey. The baby sea turtles is painted cross hatching alternating colours in reverse. The background is painted with dot works in my signature style and colours



The Moving Forward Project

Enhancing prison to community mental health care for First Nations people

Presented by Dr. Carey Marr & Minh Thu (Thu) Nguyen



Background

- Prison to community transition period is a critical period
 - heightened vulnerabilities experienced by people with mental illness
 - period associated with relapse, reoffending, hospital and emergency department attendance, and suicide (Butler et al., 2019; Thomas et al., 2016; Borschmann et al., 2017)
- 57.4% of First Nations adults found guilty in court in NSW in 2023 reoffended in the following 12 months; comparing to 31.4% of non-First Nations adults who reoffended (BOCSAR 2025)
- Limited research examining the implementation and effectiveness of prison-to-community transition support services
- There is a need to:
 - Design services that tailor to the needs of people transitioning from prison to the community
 - Evaluate the effectiveness of services offered

Community Transitions Team



- Justice Health NSW Service
- Prison in-reach, care navigation and transition support model of care to support the community reintegration of people with serious mental illness exiting custody in NSW
- Multidisciplinary team
- Service aims to develop transition plans, provide linkage with necessary therapeutic supports, and provide follow-up community care to people leaving custody



- Collaboration between University of New South Wales and Justice Health NSW
- Project aimed to develop, implement, and evaluate the effectiveness of an updated service model designed to provide First Nations people in custody with severe mental illness culturally informed and enhanced support to maximize their mental wellbeing and to achieve the best possible post-release outcomes.

Project Governance



- Strategic governance, support, and high-level oversight for the project
- Leadership and decision-making responsibilities for each stage of the research project
- Inform and advise on planning, development, and implementation of the project deliverables
- Promote and advocate for the project to clinical networks and related stakeholders
- Carry out the day-to-day project deliverables to ensure timely progress

Moving Forward Project

Phases of the project
(some phases occurred sequentially,
while others occurred simultaneously)



Yarns with service providers, which helped to inform the development of the updated CTT service model



Research team conducted interviews with First Nations CTT patients (in custody & community) and families/carers of First Nations CTT patients



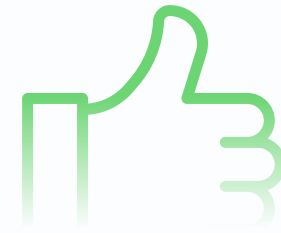
Moving Forward Action Plan was implemented by the project team and the CTT from February 2024



Quantitative analysis of CTT routinely collected data

Stakeholder consultation

Feedback, input & recommendations



Yarns with service providers

We spoke to First Nations and non-First Nations service providers about the CTT & discussed recommendations regarding how to best work alongside First Nations people with severe mental illness who are transitioning from custody back to the community



Yarns with First Nations People in prison

People in prison discussed what they would like to see in a custodial and community program

Developed project name & artwork



Ongoing engagement with the service

Initial workshops were organised to translate recommendations into an action plan

Organised five workshops with the CTT throughout the project life cycle

Moving Forward Action Plan Summary

Workforce

Hire more and retain First Nations staff through flexible recruitment methods
Provide cultural supervision, support and training to all CTT staff

Relationships

Engaging in outreach activities, including building meaningful relationships with First Nations organisations
Improving awareness and referral pathway for First Nations CTT participants

Data & Evaluation

Supporting evaluative research, including quantitative analysis of routinely collected CTT data and qualitative work with First Nations people engaged with the CTT to better inform patient experience of the service

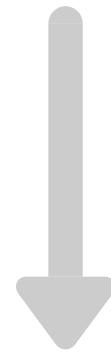
Patient Support

Longer duration of engagement with First Nations people, depending on individual needs. Specifically, allowing for Peer Cultural Support workers to engage with participants for a longer period of up to eight weeks post-release

Action Plan output – example

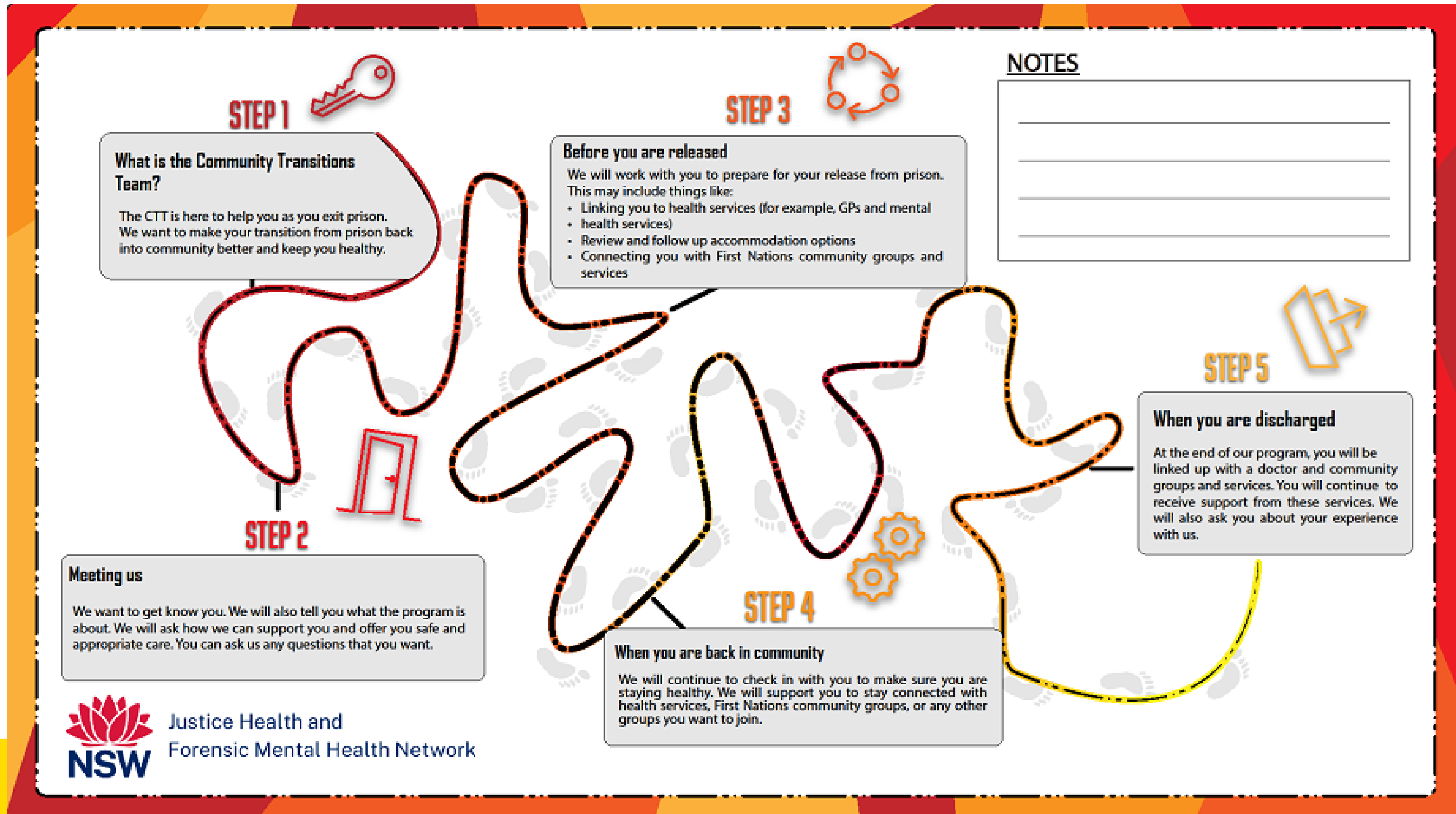
Stakeholder Recommendation:

Improving communication with First Nations people by using visual roadmaps and prompt cards



Priority no.	Action	Timeline	Area of Recommendation	Progression (update as of 29/07/2024)
Medium	Creating and implementing the visual step-by-step road map of a patient's journey in the CTT	February 2024-June 2024	Patient support and assessment	Output completed and ready for implementation/use by the CTT

Action Plan output – example



Moving Forward Project

Phases of the project
(some phases occurred sequentially,
while others occurred simultaneously).

Stakeholder Engagement

Yarns with service providers, which helped to inform the development of the updated CTT service model

Action Plan implementation

Moving Forward Action Plan was implemented by the project team and the CTT from February 2024

Qualitative Interviews

Research team conducted interviews with First Nations CTT participants and their families/carers

Quantitative Analyses

Quantitative analysis of CTT routinely collected data

Qualitative Interviews

Interviews with First Nations CTT participants in custody and community and with family members/carers of First Nations CTT patients

Questions were created in collaboration with the Planning Committee and Aboriginal Cultural Governance Group. Interviews were conducted by Aboriginal members of the research team

Interview questions:

- Participant engagement & experience with CTT in custody and/or community
- Experience of culturally responsive care
- Family and carer experience with the CTT
- Areas for improvements

A total of 55 eligible First Nations participants who came through the service during the study period.

Of these, **12** interviews were conducted, including 4 males and 8 females.



Referrals to community services – successful and requested

Cultural Care – received and requested

Communication with care staff – met and unmet needs

Areas for improvement – overall recommendations for a successful transition

When there was something substantial, we would speak at least like 3 days in a row regarding that substantial change or thing. **(Family/carer)**

The only time that I felt I was getting support was when XXX got in touch with me from the CTT. I felt like I was being heard and actually listened to.
(Participant in community)

So, I had to get a mental health report for the rehab that I want to go into and... she did a lot of work to follow that up and made sure that happened with the psychiatrist. So, I think that was a good one. **(Participant in community)**

She just kept solid and so persistent and committed to finding him a home each time. **(Family/carer)**

Yeah. She's mad.

She's pretty much done it all.

Presence and the effort she put into it.

They've pretty much ticked all the boxes.

Yeah, I feel safe with her.

*I got support in chasing up my Aboriginality. Supports and outreach services that I could gain access to for when I was released. **(Participant in community when asked about in custody experience)***

*No, they haven't [provided cultural care]. Even though I've stepped back on my mother's country - welcome to mother's country - but no they haven't. **(Participant in custody)***

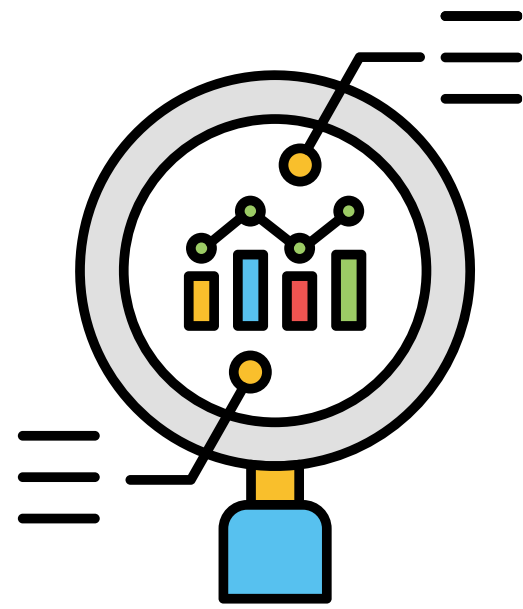
*I think there could have been more done on a spiritual and holistic level to help him. And there still can be. He's not around mob here and it's not his mob so he's kind of on the outskirts of it all. So they find it really hard to be accepted and to stay with their culture and stuff. **(Family/carer)***

Key Learnings

Critical importance and positive impact of CTT First Nations staff

Highlights areas in which the CTT are doing well to support, including communication, service referrals, and accomodation assistance

Identifies further work needed in provision of cultural care, including within custody, referrals to First Nations community organisations, and involvement from participant families/carers



Quantitative Analyses

Examination of routinely collected data within the CTT database

- Description of overall cohort
- Comparison of First Nations and non-First Nations CTT participants
- Examination of outcomes amongst First Nations CTT participants before and after updated model of care

Overall Cohort

N = 427

Includes data from all CTT participants from October 2020 to March 2025, apart from 61 participants who declined consent for their data being used for research purposes

		M	SD
Age	Range = 20 to 73	39.0	9.46
		n	%
Gender	Male	370	86.7
	Female	57	13.3
First Nations	No	300	70.3
	Yes	127	29.7
Primary diagnosis¹	Schizophrenia	326	76.3
	Schizoaffective disorder	62	14.5
	Bipolar disorder	14	3.3
	Other ²	25	5.8
Primary offence	Assault	114	26.7
	Robbery	51	11.9
	Harm or endanger person	42	9.8
	Sexual offence	40	9.4
	Offence against justice procedures and laws	19	4.4
	Theft	15	3.5
	Drug offence	9	2.1
	Other offences ³	16	3.7
	Unknown/missing	121	28.3
Legal status	Remand	124	29.0
	Sentenced	303	71.0

Overall Cohort

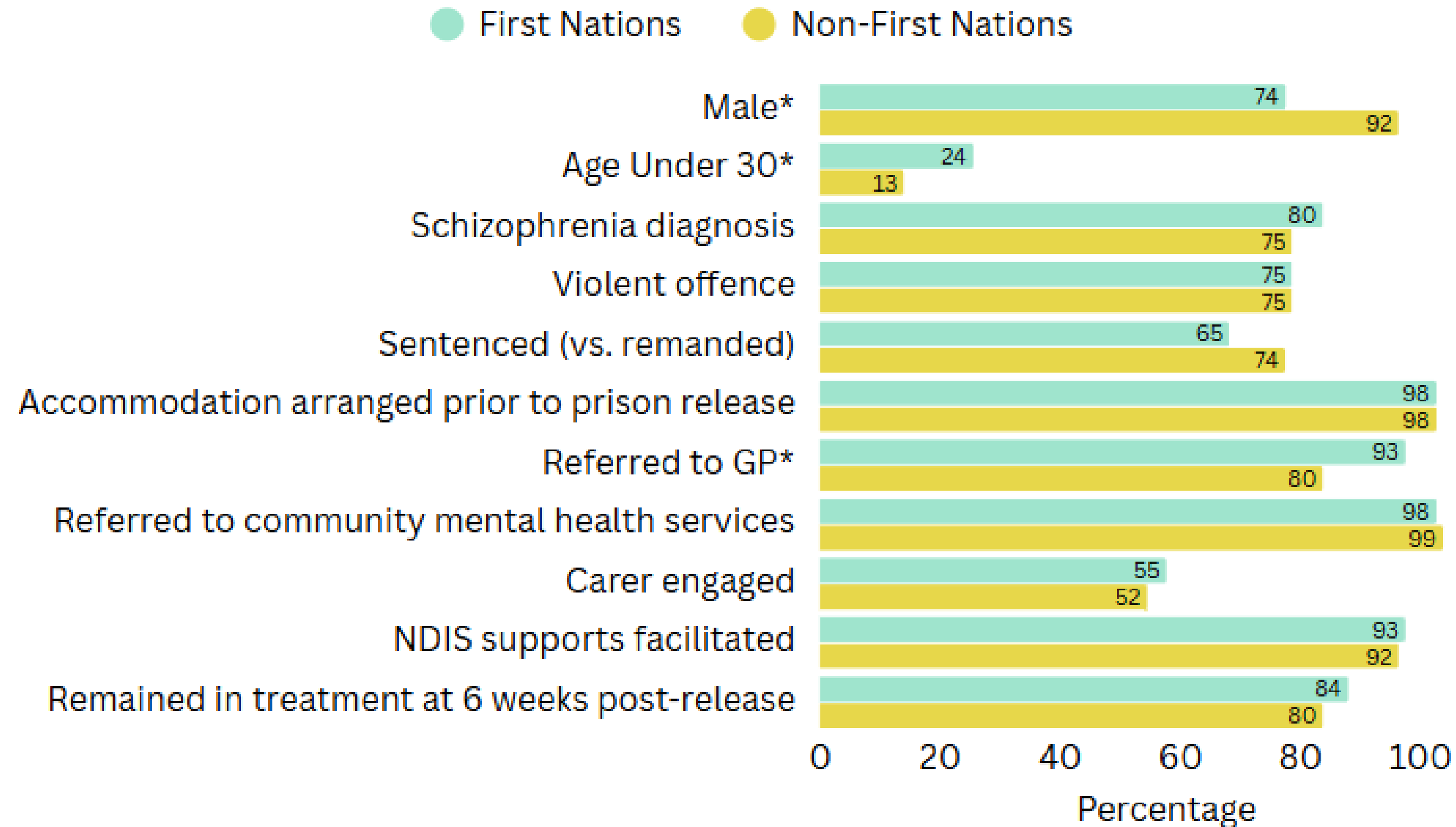
N = 427

- 92% of participants had a community mental health referral facilitated by the CTT clinicians
- 80% were referred to a GP
- 75% were still engaged with community treatment at six weeks post release from prison

- 80% of participants had accommodation arranged prior to release from prison
- NDIS supports were facilitated for 85% of the cohort
- The CTT clinicians engaged with family and carers for 47% of the cohort

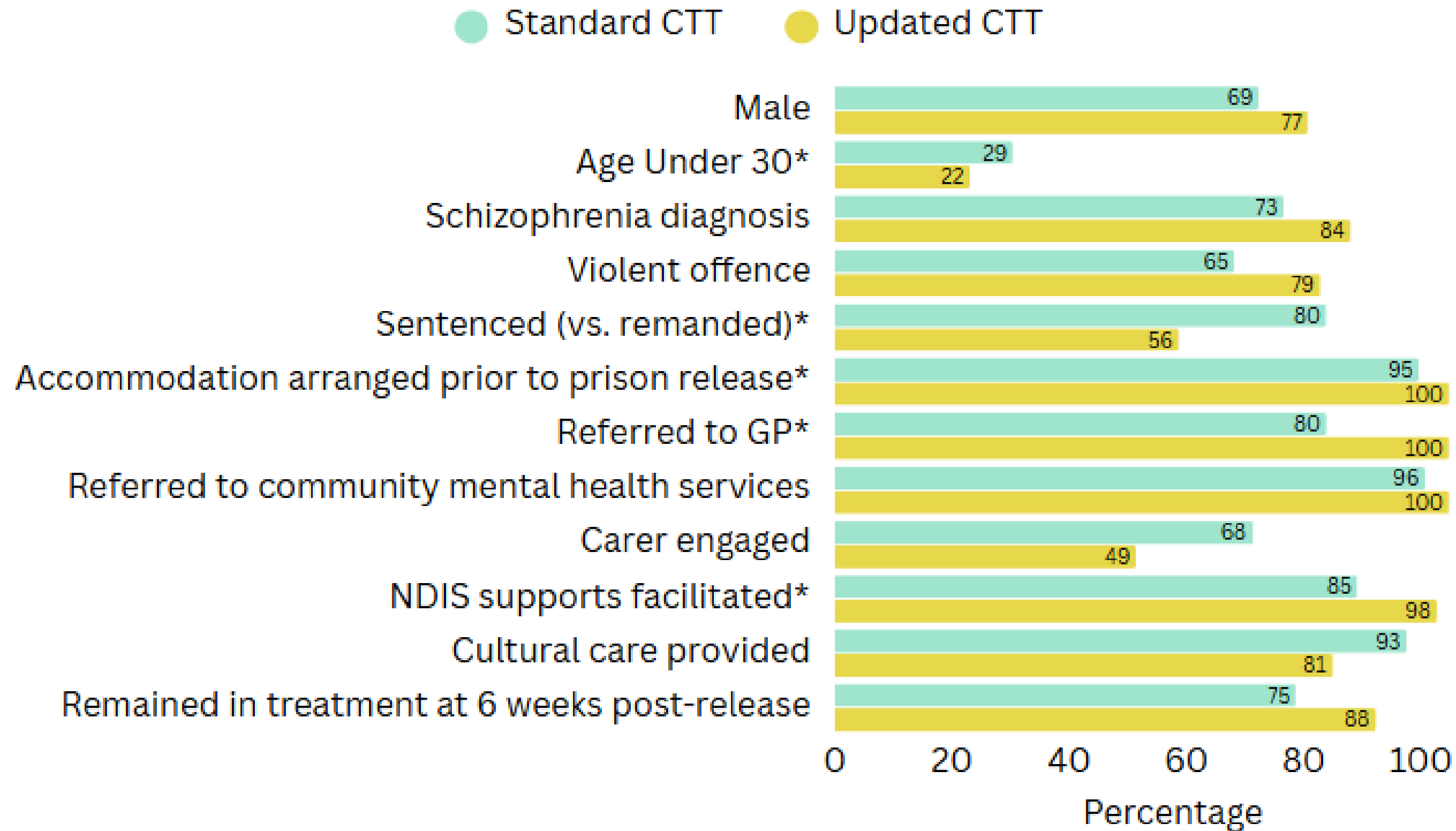
- Significant improvement in clinical outcome measures
 - Reductions in clinical and situational risk
 - Increase in met needs
 - Increases in protective factors
 - Reduction in psychiatric scores

Comparison between First Nations and non-First Nations CTT participants



N = 427, * Represents statistical significance at the <.05 level

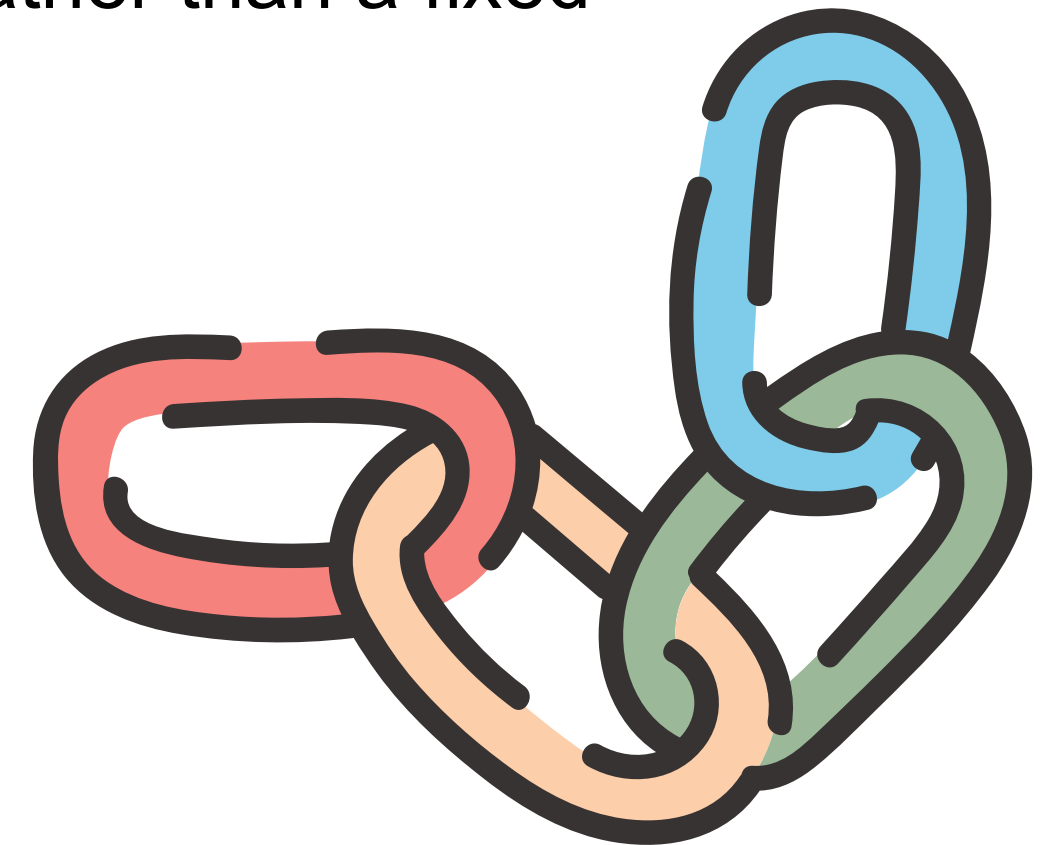
Comparison of First Nations CTT participants before & after the updated model of care



N = 127, * Represents statistical significance at the <.05 level

Future steps

- Data linkage of CTT database to statewide health and justice databases to better examine outcomes over a longer timeframe
- Continued implementation of items in the action plan - ongoing rather than a fixed process
- Improved data management and quality processes





Acknowledgements

- Medical Research Future Funds (MRFF)
- Justice Health & Forensic Mental Health Network – Community Transitions Team staff & participants
- Moving Forward Project Team – CIA Prof. Kimberlie Dean, Ms Fiona White, Ms Soumya Somarajan, Ms Makayla Reynolds, Ms Jasmine Williams, Mr Lochlan Peters
- Moving Forward Aboriginal Cultural Governance Group (chaired by Dr Elizabeth McEntyre) & Planning Committee
- CTT participants who completed qualitative interviews with us
- Stakeholders who participated in our consultation activities, particularly the IMHIP team – Queensland

Contact us:

For more information about the Moving Forward project, please feel free to contact us :

Dr Carey Marr (carey.marr@unsw.edu.au)

Minh Thu Nguyen (minh_thu.nguyen@unsw.edu.au)

References

Borschmann, R., Young, J. T., Moran, P., Spittal, M. J., Heffernan, E., Mok, K., & Kinner, S. A. (2017). Ambulance attendances resulting from self-harm after release from prison: a prospective data linkage study. *Social psychiatry and psychiatric epidemiology*, 52(10), 1295-1305.

Butler, A., Love, A. D., Young, J. T., & Kinner, S. A. (2019). Frequent Attendance to the Emergency Department after Release from Prison: a Prospective Data Linkage Study. *The journal of behavioral health services & research*, 1-16.

Bureau of Crime Statistics and Research. (2025, August 6). Reoffending. NSW Government. <https://bocsar.nsw.gov.au/topic-areas/re-offending.html>

Thomas, E.G., Spittal, M. J., Heffernan, E. B., Taxman, F. S., Alati, R., & Kinner, S. A. (2016). Trajectories of psychological distress after prison release: implications for mental health service need in ex-prisoners. *Psychological Medicine*, 46(3), 611.