Caraniche Annual Report 2015-16



Who we are

A specialist provider of psychological services

24 years of experience in the field

The Victorian state-wide drug and alcohol treatment provider in adult corrections

The Victorian state-wide provider of rehabilitation services to the youth justice sector

More than 20 years' experience providing workplace wellbeing programs Australia-wide, including Employee Assistance Programs and Critical Incident Response

A focus on improving client outcomes across the lifespan

Underpinned by research



Our values

INTEGRITY
EXCELLENCE
INNOVATION
PARTNERSHIP

We are committed to ethical, reliable and transparent service delivery

We strive to provide professional service of the highest quality

We develop creative solutions that facilitate leadership and realise individual and collective potential

We pursue collaborative and supportive partnerships to support client outcomes

2015-16 AT A GLANCE



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Kickstarting
a new life

An innovative behaviour change pilot program



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Responding to ice

in prisons and in the community







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Our organisation

We are committed to ethical, reliable and transparent service delivery.

Who do we work with?



Young people

Caraniche is the state-wide provider of rehabilitation services to the youth justice sector.

In partnership with Youth Support and Advocacy Service (YSAS) and St Vincents Hospital we run the Youth Health and Rehabilitation Service (YHaRS) on behalf of the Department of Health and Human Services (DHHS). YHaRS provides services to around 150 young people aged 10 to 21 years serving community-based orders as well as within the Parkville or Malmsbury youth justice precincts.

The Caraniche YHaRS team provides psychological assessment and treatment and develops and delivers a range of programs and services designed to target the issues and behaviours that bring young people into the criminal justice system.



Offenders

We develop and deliver specialist drug and alcohol treatment and behaviour change programs to offenders.

Over the past two decades our services have been expanded across Victoria's 13 public prisons. We provide a broad range of alcohol and other drug (AOD) counselling and offence-focused treatment programs to male and female offenders both under sentence and on remand.

Our clinical service delivery is evidence based, drawing from the latest psychological literature on working with offenders.
Our well-developed evaluation practices, led by our Research and Professional Practice team, mean that we will keep abreast of changes within the system, patterns of substance use, fluctuating demands, culture and reintegration needs and re-align our programs and solution to meet these changing needs.

In the past five years we have developed and delivered over 30 offender programs.



Communities

Our Community Counselling Service includes AOD treatment services, with clinics in Epping, Abbotsford and Ballarat. Caraniche has been a DHHS accredited AOD treatment agency since 2010.

We have also been providing general counselling services for over 20 years. Our clinicians use CBT, solution focussed therapy, psychoeducation, psychotherapy, narrative therapy and structures skills for change programs.

We work closely with local community organisations such as local government, the AOD sector, community health, GPs, welfare organisations, local police and schools to identify areas of need, design programs around these needs, and deliver services effectively.



Workplaces

Caraniche has over 20 years' experience providing workplace wellbeing programs, including Employee Assistance Programs and Critical Incident Response.

Caraniche is also a leading provider of training to the Victorian health, welfare and local government sectors. We are an internationally accredited provider of Critical Incident Response (CIR) training and have been at the forefront in tailoring CIR programs to our markets.

We deliver a range of training from one-hour presentations, to half-day workshops and seminars, through to nationally accredited certificates designed to create safe, healthy and resilient workplaces.

The Caraniche Training Unit currently delivers several large-scale state-wide training programs on behalf of DHHS.



Government

Caraniche is regularly called upon by both DHHS, Department of Justice and Regulation, Justice Health and Vicroads to design, develop and pilot new programs and initiatives.

We work with local and state governments to develop and deliver specialist treatment and training services, drawing on our expertise in AOD treatment, behaviour change programs, working with forensic clients, working with high-risk clients, and working with highly complex clients.

We also provide Critical Incident Response and Employee Assistance Programs to government at a local and State level.

We work with government to identify emerging trends and needs both in the criminal justice system and the community.

From the Managing Director



The 2015-16 year has been another year of continued growth and expansion for Caraniche. We have expanded our range of services, opened two new offices and our income has grown by 15%. Our staff team has continued to grow and our strategies for engaging and supporting staff have expanded to include a supervision and endorsement program and creating professional career paths to ensure our valuable team can develop longstanding careers at Caraniche with a diversity of opportunities and rewards.

This new look Annual Report showcases some of our key achievements for 2015-16. This year we have focussed on extending our reach to a broader group of clients and developing targeted solutions for challenging community problems such as ice, mental health, violence and bullying.

Extending our reach

Over 23 years of service delivery, Caraniche has a well established reputation for delivering high quality services to complex and challenging clients. From our origins in Melbourne we have extended our services across Victoria and are now looking to

extend our reach interstate. This year we have been exploring a number of partnerships across Victoria and interstate. We have deeply appreciated the warm welcome extended to us and the enthusiasm for our advice on service design projects and expert consultancy. Working with interstate partners has enabled us to look back over our 23 year journey in Victoria with an appreciation for the depth of services we are funded to provide and the role we have been privileged to play supporting offenders with substance use problems. The opportunity to extend our reach and share our expertise has been incredibly fulfilling and we are looking forward to consolidating these relationships over the next 12 months and adapting our service delivery models to meet the needs of other client groups.

Targeted solutions for challenging problems

In the last 12 months one of the most significant challenges faced by the community has been the ongoing increase in ice use. This has been particularly prevalent in two of our key client groups, offenders and young people. In response, our clinicians and researchers developed a number of new treatment programs for ice using clients and ice training programs for the counsellors who work with them.

In our prison programs we are seeing a group of younger ice using offenders who are committing violent offences as a result of their ice use and have never previously offended nor accessed drug and alcohol treatment. These clients suddenly find their life trajectory disrupted through ice use and are usually deeply remorseful about their violent behaviour. They represent a very different type of offender with different treatment needs, making targeted treatment in prison essential. Our goal is to minimise the negative impact of prison by safely returning them to their life path, their families and the community. The results from our ice programs have been outstanding. Participants have reported that these programs have helped them to understand and better manage their ice use and the damage it has created in their lives. Highlighted within this report are stories from clients who have completed our programs.

At the other end of the spectrum, we have also had great success with our High Risk Offender Alcohol and Drugs Service (HiROADS) pilot, which has now become fully funded through

DHHS. HiROADS provides a specialist service working high risk violent and sex offenders who use alcohol and drugs and often have complicating factors such as mental illness, brain injury or intellectual disability. Our HiROADS team has been enhanced by the inclusion of care and recovery services, which focuses on increasing engagement and minimising the barriers to accessing treatment. Actively addressing the reasons why people cannot or do not want to attend treatment and working closely with Community Corrections gives these clients the best chance of managing their behaviour and living safely in the community. The HiROADS team are to be commended for working with the clients most agencies do not want to see and for working tirelessly to maximise the client's chances of success.

This year has been another successful year at Caraniche. I wish to thank the Caraniche Board for their guidance and support, the Senior Leadership Team for their drive and determination and to all the Caraniche staff whose daily dedication changes people's lives.

Jacinta Pollard Managing Director

Our strategic priorities



Supporting the client's individual journey

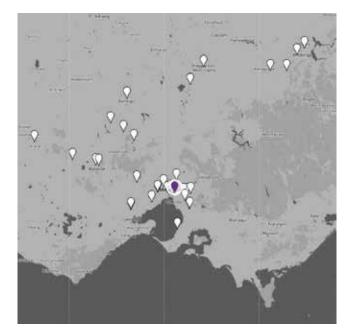


Using data to identify needs and deliver outcomes



Working in collaborative partnerships

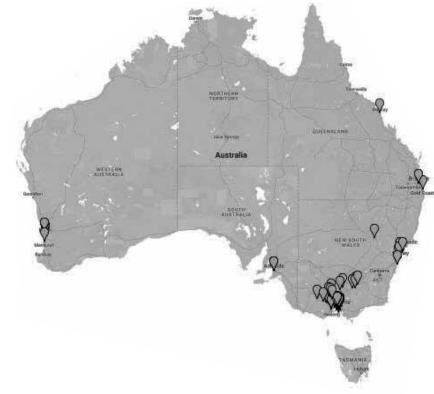
Where we operate



Our Victorian locations include Abbotsford, Epping, Dandenong, Ringwood, Footscray, Box Hill, Glen Waverley and Ballarat.

We operate across thirteen Victorian prison locations, as well as Victoria's two Youth Justice Centres in Parkville and Malmsbury.

Our associates are based both in Victoria as well as Adelaide, Perth, Brisbane, Gold Coast, Central Coast, Dubbo, Sydney, North Sydney, and Wollongong.



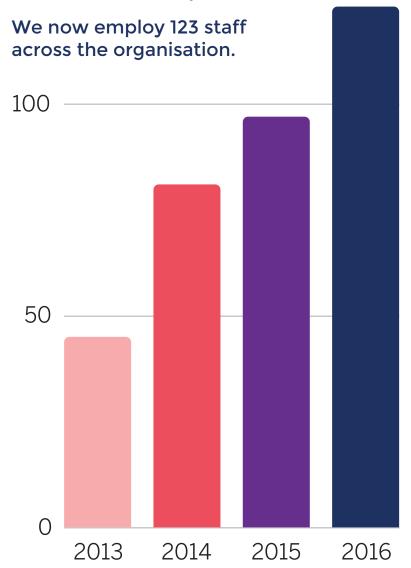
Sustaining our

HIGHLY SKILLED WORKFORCE

Caraniche is one of the largest and most diverse employers of psychologists and clinicians in Victoria.

150

Our team of professionals has grown by almost 30% since last financial year.



While we've welcomed many new faces to our team this year, we're also proud to have maintained retention rates well above industry standard: 21% of our staff have been with the organisation for more than five years.

We employ a diverse range of clinicians including psychologists, social workers and counsellors. Clinicians make up 75% of our workforce. We also employ highly experienced trainers, researchers, and business support professionals.

We are committed to supporting our growing team through professional development, including internal and external training, clinical supervision and our recently-introduced Psychology Endorsement Program.

Flexible working conditions are also fundamental to our workplace culture: 61% of our team are employed part-time, often choosing to pair their work at Caraniche with other roles in academia, private practice, consulting, study or family commitments.

Investing in our team in 2015-16



We invested \$9.2 million in our staff



We provided over 8,000 hours of supervision to our clinical teams



We launched our Psychology Endorsement Program



We provided over 1,700 hours of professional development training, including:

- Wellbeing, Case Notes and Subpoenas
- Suicide Intervention Training
- Advanced Motivational Interviewing
- Family Inclusive Practices
- Recognising and Resolving Traumatic Stress
- Assessing and Treating Complex Trauma
- Forensic AOD Workforce Training
- Traumatic Brain Injury
- Working with Trauma & Trauma Informed
 Practice
- Working with ABI & Behaviours Interventions
- Working with Family Violence

Supporting our team

Launched in January 2016, the Caraniche Psychology Endorsement Program is for staff members seeking professional psychological endorsement - a career goal for many early-career psychologists.

Professional endorsement provides formal recognition of a psychologist's specialised skill set, and is required to become accredited as a Clinical or Forensic Psychologist.

Developed with input from staff and our Clinical Standards & Supervision Committee, the program provides time off and financial reimbursement to support staff in achieving endorsement.

The Program is another way Caraniche can develop and sustain our highly skilled workforce and contribute to the psychology profession, as we grow.



FINANCIAL SUSTAINABILITY

Caraniche continued to grow in 2015-16, ensuring our ongoing financial stability and supporting our ability to invest in research and program development.



Our income grew by 15%



We invested \$9.2 million in our staff, including over 8,000 hours in Clinical Supervision and over 1,700 hours of professional development training. This investment helps us continue to position our organisation as an employer of choice.



We invested over \$150,000 in systems planning and data management to support our program development and delivery.



We invested over \$110,000 in expanding our services in Epping, allowing us to increase client access to our services in Melbourne's northern suburbs

OUR COMMITMENT TO QUALITY

Caraniche has well established Quality Management Processes and has both ISO9001 (2008) and QIP accreditations as well as being a DHHS Registered Child Services Organisation.

Our last ISO 9001 audit completed shortly after year-end (July 2016) found that Caraniche had a sound overarching governance framework, a sound strategic planning process, a commitment to continual improvement and excellence, and a system of rigorous program reviews and reporting.





Income by business area



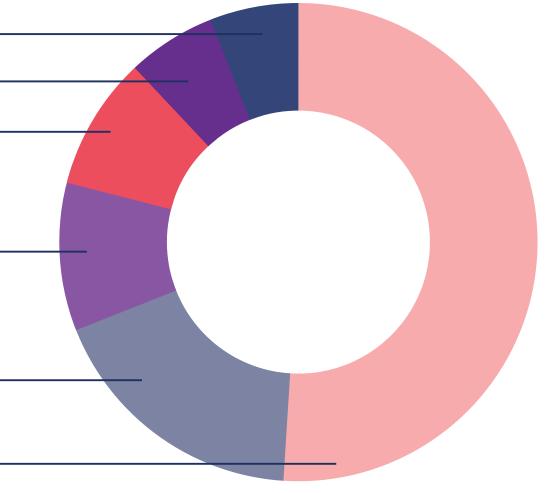
6% - Behaviour Change Programs

9% - Community Counselling Services

10% - Training and Workplace Services

18% - Youth Justice

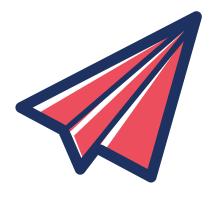
51% - Adult Prison Services



DEVELOPING EARLY-CAREER PSYCHOLOGISTS

The Caraniche Post-Graduate Program is dedicated to the professional learning and development of Masters, Doctoral and 5+1 psychology students seeking a career in forensic, clinical, community or counselling psychology.

The Program is unique in its capacity to offer early-career psychologists challenging and varied clinical work with complex client groups, including placements in adult prisons, youth justice centres, and community drug and alcohol clinics. With less than 5 per cent of psychologists working in the justice system, one of our key goals is to introduce new graduates to the rewards of justice practice.



In 2015-16,
18 students
participated in
the program,
11 of whom went
on to permanent
positions within
the organisation.

Eliza O'Bryan completed the Caraniche Post-Graduate Program in 2015-16. She's now a Psychologist with the Caraniche Community Counselling team.

I was completing my Masters in Clinical Psychology when I applied for my final placement at the Caraniche Post-Graduate Clinic. I had already completed placements at my university's Community Psychology Services, the Department of Education and Early Childhood Development, and a community psychotherapy service at St John of God Hospital in Ballarat.

While completing the Caraniche Post-Graduate Clinic I worked with forensic clients who had been mandated to undertake Alcohol and Other Drug (AOD) counselling. I also worked with the Caraniche Community Counselling team in Epping, where I had the opportunity to complete AOD assessments and work with voluntary AOD clients. While all of my placements have been positive learning experiences, the Caraniche Post-Graduate Clinic provided me with the opportunity to work with a more diverse range of highly complex clients.

One of the best things about the Post-Graduate Program was working alongside a team of students who could relate to my experience as a provisional psychologist. I also felt strongly supported by my supervisor whenever I was presented with challenging situations. And on the rare occasion that my supervisor wasn't in the office, I knew there was a team of experienced clinicians and psychologists who could assist me.

The most challenging aspect of the Program was engaging and building rapport with treatment-resistant clients. Some were quite confrontational and displayed challenging behaviours. Clients often reported that substance use was the only positive thing in their lives. Caraniche provided me with specific training to manage challenging behaviours: I learnt to step back and view these behaviours through a mental health lens.



66 When challenging situations present, I know I have a strong, professional team supporting me."

ELIZA O'BRYAN, 2015-16 POST-GRADUATE PROGRAM

NOW EMPLOYED AS A PSYCHOLOGIST WITH THE EPPING COMMUNITY COUNSELLING TEAM.

I've developed a greater understanding of the complex issues that often underpin drug and alcohol abuse. I've also developed skills in ethically assessing and managing a range of risk issues, such as harm to others and risks to the community, and documenting these.

I am now employed by Caraniche and work on the Epping Community Counselling team. My work involves AOD counselling with both voluntary and forensic clients. I've also started working with the friends and family members of substance users. My role also includes short-term counselling with Employee Assistance Program (EAP) clients.

I enjoy the diverse range of clients I see and I love the team of people I work with. We have fun working together and when challenging situations present, I know I have a strong, professional team supporting me.

Caraniche works with universities across Australia to provide placement opportunities for the next generation of psychologists, including:

























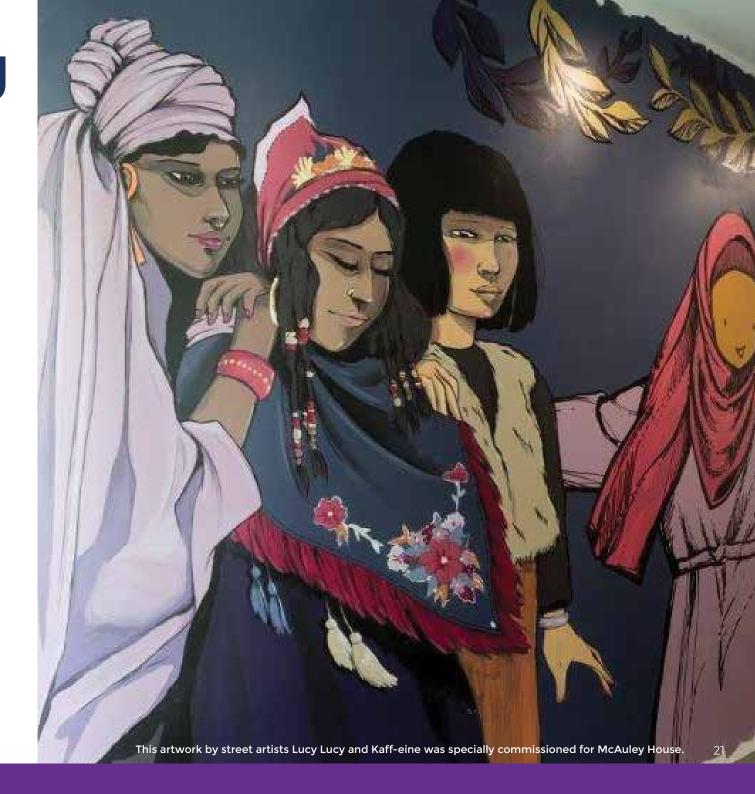
Sharing our Expertise

We believe in being a socially responsible organisation within the community, and sharing our expertise for the benefit of the sectors in which we operate.

Supporting vulnerable women

Our pro-bono work with McAuley House

This year, Caraniche worked with McAuley Community Services for Women to reestablish its Peer Leadership Program, as part of our ongoing pro-bono services. The program recruits and trains peer leaders who have lived or are currently living at McAuley House, to provide care and support to other residents.



The Peer Leadership Program is one way that McAuley House supports women, not only in their initial recovery phase, but towards their long-term goals of maintaining health and wellbeing, social and family connections, and housing. It provides an avenue for improved self-esteem and newfound courage amongst residents.

"Our first peer program, which we developed in collaboration with Caraniche in 2012, was a resounding success," explains Lucy Prentice, Program Manager for the Peer Program at McAuley.

Feedback indicated that the Program empowered peer leaders to foster leadership skills and build their confidence, and many residents described a greater sense of community and engagement within McAuley House as a result of the Program.

Now in its second iteration, McAuley and Caraniche have mapped out a plan to update the Program. Peer leaders will now be reimbursed for the time they volunteer, and there's also a much stronger focus on each peer leader's individual skillset in deciding how they will contribute to the community in their role: whether it be running cooking classes, providing support to new residents, or organising weekend activities.

"Working with Caraniche over the last four years has been an incredible partnership. They've been very flexible in tailoring the peer program model to meet our needs, and in working with us to focus on each woman's individual strengths," says Lucy.

Caraniche developed and delivered the eight-week training program that participants must undertake to become a Peer Leader. The training aims to upskill peer leaders with conflict resolution training, listening and communication training and other skills that prepare them to be supportive community leaders. Caraniche also provides ongoing supervision to support them in their role as a peer.

"We really value working with a partner like Caraniche because they have a deep understanding of the complex group of people that we work with," says Lucy.

Caraniche also provides individual counselling to residents on an ongoing basis.

"The counselling component that Caraniche offers has also been really beneficial. Having a long-term partner who really understands the dynamics of the house and understands our program has resulted in a lot of women benefitting from these services."

THE PEER LEADERSHIP PROGRAM IS FUNDED BY GANDEL PHILANTHROPY AND STREETSMART, WITH PRO-BONO TRAINING AND SUPERVISION PROVIDED BY CARANICHE.

MCAULEY HOUSE IS A CENTRE OFFERING SUPPORT AND ACCOMMODATION FOR WOMEN WHO ARE HOMELESS DUE TO MENTAL HEALTH OR FAMILY VIOLENCE.

CARANICHE HAS BEEN PROVIDING PRO BONO SERVICES TO MCAULEY SINCE 2012. WE PROVIDE FREE COUNSELLING, COACHING AND PEER MENTOR TRAINING AND SUPPORT.



66 Caraniche
worked with us
to focus on
each woman's
individual
strengths."

LUCY PRENTICE

PROGRAM MANAGER
PEER LEADERSHIP PROGRAM
MCAULEY HOUSE

Thought Leadership

Caraniche shares our expertise with the sector by contributing to public reports, issues papers, and presenting at industry conferences. Our activities in 2015-16 included:

Contribution to the Victorian Alcohol & Drug Association Issues Paper June 2016
Issues paper topic:

Forensic AOD treatment and service delivery: a discussion of issues

Workshop facilitation at the Victorian Alcohol & Drug Association Conference 4 September 2015
Workshop topic:
Working with complex forensic clients.

Masterclass facilitation at **Australian Community Support Organisation Conference**21 - 23 October 2015

Masterclass topic:
Forensic supervision

Presentation at Australian Community
Support Organisation Staff forums
18 and 23 March 2016
Presentation topic:
The Caraniche HiROADS and KickStart programs

& New Zealand Addictions Conference

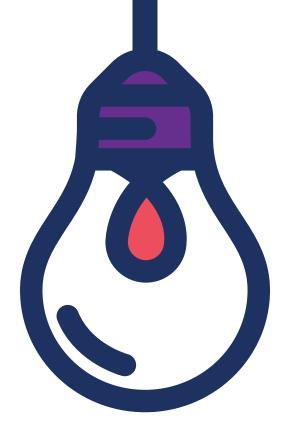
18th - 20th May 2016

Presentation topics:

Continuity of Care: A preliminary review of the effectiveness of assisting offenders transitioning from prison to the community. Presented by Sally Thorpe, Senior Psychologist.

Treating ice addiction in custody: Evaluating a suite of piloted ice-specific prison based group treatment programs for men. Presented by Kerrilee Hollows, Deputy Manager, Research and

Professional Practice



Partnering with our community

Caraniche has strong connections within the Epping and Whittlesea communities and works closely with local community organisations such as police, schools, local government and GPs to deliver education and community information on the harms of alcohol and other drugs, and ice in particular.



66 Caraniche worked closely with Whittlesea Police to help respond to growing community concern about the harms of ice."

"Through the work we do at our Epping Community Counselling Service, we know that problem ice use is a significant concern in this area, with more that 50% of clients reporting ice as their most problematic drug," says Debbie Lindsey, Manager of the Caraniche Community Counselling Services

In 2016, Caraniche worked closely with Whittlesea Police to help respond to growing community concern about the harms of ice, including free community drug education sessions such as the Understanding Ice Drug Education Forum in April 2016.

"We had great pleasure in having Dr Alana Johnston and Gemma Munro of Caraniche work with the Whittlesea Police Service area. Their knowledge and expertise was invaluable," says Whittlesea crime prevention officer Leading Senior Constable (LSC) Sandra O'Connor.

The forum helped to educate the community about what ice is, its effect on the brain and behaviour, and how ice addiction can impact the lives of individuals, families and communities. Caraniche also provided information about treatment options and support services for individuals and families.

"Working with Debbie Lindsey and her team has been a great experience. We hope to continue the partnership and look forward to working together in the future," says LSC O'Connor.

DEBBIE LINDSEY IS A COMMITTEE MEMBER OF THE CITY OF WHITTLESEA COMMUNITY SAFETY AND CRIME PREVENTION COMMITTEE.



Service Innovations

We develop creative solutions that facilitate leadership and realise individual and collective potential.



bullying & harassment

Bullying is a major issue in Australian workplaces. Half of all Australian employees will experience workplace bullying during their careers, and it is estimated to cost the economy over \$6 billion annually.¹

Australian employers are becoming more proactive in addressing behaviours embedded in workplace culture and are increasingly seeking expert support from outside their organisation. In response, Caraniche Workplace Services has introduced a new service targeting bullying, harassment and other inappropriate behaviours in 2015-16.

66 It is crucial that employees are empowered to address workplace bullying."

AMANDA MECHANIC

TRAINING AND WORKPLACE SERVICES MANAGER

"We know that the most effective way to address workplace bullying is to focus on leadership, communication and promoting a positive workplace culture," says Amanda Mechanic, Training and Workplace Services Manager.

Caraniche assists organisations to reduce and prevent workplace bullying, including developing and implementing workplace bullying policies; incorporating bullying into risk management strategies; providing training and support to both employees and managers so that they are supported to address workplace bullying.

"It's critical that employees are empowered to address workplace bullying, and that any issues that do arise are dealt with in a timely manner, through a transparent process."

Caraniche also works with organisations to manage existing workplace bullying, including developing clear procedures and guidelines; and providing independent services such as a confidential bullying hotline, with direct access to professional counselling and support.

The Caraniche training and Workplace Services division continues to grow in 2015-16:



New Bullying and Harassment Services



10,000 phone calls answered



1,418 Employee Assistance
Program counselling sessions



402 Critical Incident responses



1,824 participants in Caraniche training



152 training sessions were delivered

A therapeutic camp for young offenders

Every few months, four or five young men pack their bags and go on a life-changing outdoor adventure camp in the Victorian bush. The camp is part of the Male Adolescent Program for Positive Sexuality (MAPPS), a mandated intensive group treatment program for young people who receive youth justice orders for sexual offending.





Over two days and two nights, they will go rock climbing, abseiling, hiking and scale a high ropes course. They'll sleep in tents, do their own cooking, and learn to endure the discomfort that comes with camping in the bush.

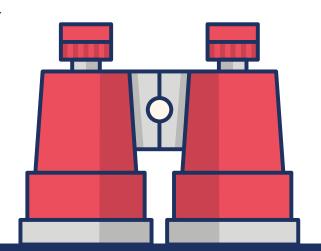
But they'll also be taking part in an intensive therapeutic experience, designed to help them let go of their "old me" behaviour and commit to sustaining a healthier, offence-free life. Supporting them are two Caraniche YHaRS clinicians.

"It's often a very powerful emotional experience for the young men. Being in this intensive setting speeds up the process of reflection and looking inward," says Ben Cowan, a Caraniche YHaRS Social Worker and one of the lead facilitators of the camp.

The young men are vulnerable: they're in an unfamiliar context, and many of their usual defence mechanisms aren't available.

"Back at home, or within a youth justice facility, the boys can engage in behaviours to avoid having to participate or to avoid putting themselves in a vulnerable situation," says Ben.

"It might be smoking, not turning up to sessions, or being distracted by their mobile phone. Out in the bush, those aren't options, and they're suddenly very reliant on the people around them."





BEN COWAN

CARANICHE YHARS SOCIAL WORKER AND ONE OF THE LEAD FACILITATORS OF THE CAMP



66 Successful completion of the camp is about the internal changes that have taken

place."

The boys are encouraged to ask for support, show leadership and empathy, and help each other out - all of which can be incredibly challenging for these young men. Most have never had a chance to test themselves with these kinds of physically and mentally demanding activities. Afterwards, there's a huge boost to their self-esteem and confidence.

"During the hike, we'll stop at a steeper, rocky part of the mountain and blindfold all the guys except one. The one without a blindfold will give the others directions, and they really have to trust one another. We then sit down together as a group and process what their experience was like."

The facilitators draw on therapeutic interventions that have been introduced in the initial 12 weeks of the program, including cognitive behavioural therapy, emotional regulation, mindfulness and psychodrama (acting out hypothetical scenarios). Addressing treatment goals is a major focus of the camp. However, in a wilderness context, unanticipated internal and external issues consistently arise which need to be responded to.



"The whole program is very structured. Through the physical and mental challenges, and drawing on the sense of community that develops within the group over the two days, it's all about reflecting on their life story, how they learnt to get their needs met, what role they played in their family, and what they have to lose should they re-offend."

Successful completion of the camp is about the internal changes that have taken place including the commitments the young men have made for the future.

For example, they may commit to improve the level of healthy social and intimate contact in their life, or challenge attitudes that have either directly or indirectly related to their sexual offending. Other commitments could include improving the relationship with their sibling, helping more around the house, or making appointments and sticking to them.

"Success is a rejuvenated commitment to lead healthier lifestyles while addressing factors associated with offending behaviour. That's ultimately what we're looking for," says Ben.

On the day the young men return from the camp, parents and carers are invited to YHaRS so they can share their sons' achievements and progress.

"The young men still have mud on their faces, they're feeling proud of what they've achieved. They can say "Mum/Dad, I climbed a mountain." For parents, being able to see their son achieve something like this is really powerful."

For the Caraniche YHaRS facilitators, the experience is both demanding and fulfilling. Ben explains that they must be closely attuned to the needs of the young men at any given time, navigating the balance between pushing the young men out of their comfort zone, and providing them with support if they're feeling too vulnerable

"As facilitators, we come back emotionally and physically tired, but rejuvenated at the same time. It pushes us out of our own comfort zones too, but I do find it incredibly rewarding."

Our work with young people in 2015-16: the highlights



The ongoing success of our therapeutic wilderness camp as part of our Male Adolescent Program for Positive Sexuality (MAPPS)



The introduction of a dedicated Remand Support Team at Parkville Youth Justice Centre



The development of a suite of programs specifically designed for remandees



The introduction of a Family Inclusive Practice Philosophy, which recognises the importance of family in the support and rehabilitation of young people involved in the Youth Justice System

Kickstarting a new life

KickStart was developed by Caraniche to address the need for specialist, group treatment for the increasing numbers of community-based offenders in Victoria who have complex drug and alcohol issues. Early results indicate the unique program fosters meaningful behavioural change in a client group that is particularly hard to reach.

Recent sentencing reforms in Victoria, in combination with changes in drug use patterns have resulted in significant growth in the number of moderate to high risk community-based offenders who have complex drug and alcohol issues. These individuals require specialist and relatively intensive treatment interventions that address the underlying causes of their offending and contribute to the effective management of potential risks to the community.

In response to this need, and at the request of the Department of Health and Human Services (DHHS) and the Department of Justice and Regulation (DJR), Caraniche developed KickStart: a specialised therapeutic group program that targets substance-related criminogenic needs of moderate to high risk male offenders.

KickStart was piloted for a period of nine months (October 2015 to June 2016), and was rolled out over 14 x 3-hour group sessions, totalling 42 hours of treatment. The program was developed and delivered by a team of specialist forensic psychologists at Caraniche, led by Behaviour Change Programs Manager, Skye Mackay.



KickStart Participant profile



All participants on the pilot were male, aged 18 or above, and sentenced to a Community Corrections Order

- 75% completion rate for the final three pilots
- 63% overall completion rate (26 completed out of 41 commencing)
- 34% identified ice as their preferred drug



67% identified ice as the drug that causes the most problems relating to offending

"By intervening in offenders' thinking patterns, belief systems, and behaviours, KickStart aims to reduce offenders' substance use, improve their lifestyle choices, and reduce criminogenic risks," explains Skye.

Underlying the KickStart program is a set of theoretical explanations that describe substance use and behaviour change from a biopsychosocial perspective including; social learning, self-determination, biological and offender-specific theories.

"KickStart recognises that in order for participants to transition toward recovery and reduce criminal activity, certain experiential and behavioural processes must occur during the course of treatment," says Skye.

"Most importantly, the KickStart program was developed in such a way that it directly targets negative individual perceptions about the self and the surrounding world."



Program outcomes

Program Outcomes: The early findings of the KickStart program indicate that it is well designed to achieve behavioural change in community-based offenders with substance related offending.



Urine test breaches and corrections order breaches occurred less frequently throughout the pilots for participants who completed the program, indicating increased compliance and reduced drug use whilst participating in KickStart.



Order breaches reduced from 26% to 8%.



Participants reported marked improvements in areas of life such as physical health, psychological health, social relationships and environment from the beginning of the program to completion. In addition, participants showed improved emotional regulation, reduced criminal thinking, and an increase in motivation levels as the program progressed, assessed using a range of validated psychological measures.

Particpant Feedback

"I have calmed down and taken time to stop, relax and rethink before acting."

"[I've seen] a change in my emotions. I can really take time to actually see what I'm really feeling. Usually I wouldn't care."

"I am more confident in myself knowing that I don't need drugs to live a happy life."

BEST PRACTICE IN

REHABILITATING HIGH RISK OFFENDERS

Now in its second year, the High Risk Offender Alcohol and Drug Service (HiROADS) has become widely recognised throughout Victoria as a best practice model for engaging community-based high risk forensic clients in treatment.

A high risk offender in the community needs specialised, intensive, and evidence-based treatment to effectively reduce their risk of recidivism and relapse into substance use. However, access to this type of treatment is severely limited: most services are not equipped to deal with the complexity and risk level of these clients.

"Our clients include offenders with serious violent or sex offences, those with significant criminal histories and non-compliance with community based orders," says Sally Thorpe, Senior Psychologist and Operational Manager of HiROADS.

"While these are some of the most difficult clients to engage, it's critical that they have access to treatment - both for their own rehabilitation, but also to reduce harm to the community. HiROADS provides a consistent, stable and well bounded service when client's behaviour escalates and other services withdraw their support."

Service expansion

Since starting as a pilot in January 2015 with funding from the Department of Health and Human Services (DHHS), HiROADS has now secured ongoing funding. Services have also expanded to Ballarat and Corella Place, in addition to the original locations of Abbotsford and Epping, and the highly skilled team of clinicians delivering the service has increased from three to nine staff members.

"The expansion of our services means that we can provide treatment to more high risk offenders across Victoria. It also recognises our unique capacity to work with complex forensic clients, our ability to manage current and potential risks, and the critical demand for this type of service in Victoria," explains Sally.

Care and Recovery integral to client engagement

Due to the complex and intensive support needs of HiROADS clients, Care and Recovery Coordination (CRC) was introduced in March 2016 as a supplement to counselling and as a way to support clients with their treatment and long term goals. It's had an immediate impact: since the introduction of Care and Recovery, clients have been engaged in treatment for an average of 8.5 sessions, compared to an average of 5.2 sessions before CRC was introduced.

"This part of the service addresses needs that are beyond the scope of our immediate referral but extremely important in terms of reducing relapse and recidivism, for example homelessness, mental health, and unemployment," says Sally. Clients often engage for longer, agreeing to extend their treatment beyond the mandated 15 sessions.

"Given the complex and high risk nature of this population, it's really important that these clients can access medium to long term treatment (i.e., more than a standard brief intervention). They are unlikely to achieve any significant gains in short term therapy. For many of our clients, it takes quite a few sessions to engage meaningfully and begin to make therapeutic gains. This is often due to entrenched beliefs about authority and distrust of the forensic system. These barriers must be overcome through the development of a strong therapeutic alliance before work on treatment goals can begin. Many of our clients don't have prosocial supports in their life, so sometimes we're the only constant, consistent support in their lives."

HIROADS IS DELIVERED BY CARANICHE IN PARTNERSHIP WITH THE VICTORIAN DEPARTMENT OF HEALTH AND HUMAN SERVICES.

Q&A

WITH HIROADS CARE AND RECOVERY CO-ORDINATOR, HAYLEY MITCHELL

The addition of Care and Recovery Co-ordinator, Hayley Mitchell, to Caraniche's HiROADS team in March 2016 resulted in increased engagement. Care and Recovery Co-ordination is now an integral part of the program.

What is Care and Recovery Co-ordination (CRC)?

CRC is a proactive, client focused service that assists with a client's engagement with treatment. It can include collaboration with Community Corrections Services to help prepare a client before they commence treatment with our service. It might also involve engagement with clients after their first appointment to address any barriers that may stop them from continuing to attend treatment services, such as homelessness or difficulties accessing transport. As Care and Recovery Coordinator, I also provide practical support to link clients with external services during the time they're engaged in counselling with HiROADS.

What do you find the most challenging about the role?

A large portion of HiROADS clients are those who are often perceived as hard to engage due to extensive histories of substance abuse, involvement in the criminal justice system, or persistent mental health concerns. Despite these presenting concerns being contributors to the client's need for assistance, they often experience ongoing systemic disadvantage. It's particularly difficult working with clients who are highly motivated for change yet are frequently turned down from services or cannot find services that meet their needs. For example, a client who is experiencing drug induced psychosis is highly motivated and in need of access to a rehabilitation program, is continually rejected from much needed services due to his offending history and unstable mental health. These limitations are also felt by HiROADS clients who are listed on the sex offender registry and are limited in the services that they can access despite apparent need.

What do you find rewarding about your role?

The clients that the HiROADS team work with often face many forms of stigma and disadvantage in the community, which can in turn limit their opportunities, confidence and ability to access support. The most rewarding aspect of the CRC role is to provide an experience that is different to these common experiences. I aim to work collaboratively with the client towards goals that they have identified as important and that they are personally invested in. CRC may not necessarily provide a solution or fix the problem, but it aims to provide linkages, knowledge and support that empowers our clients to make positive changes in their lives.



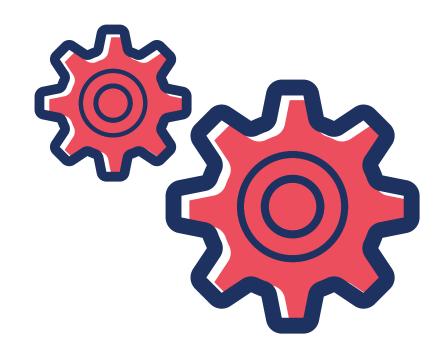
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SALLY THORPE

SENIOR PSYCHOLOGIST AND OPERATIONAL MANAGER, HIROADS.

WORKING WITH PEOPLE IN VICTORIA'S PRISONS

As the state-wide provider of AOD treatment in Victoria's public prison system, Caraniche provided education, harm reduction and criminogenic programs to over 7,500 offenders in 2015-16, accounting for more than 32,500 hours of treatment including assessment, psychoeducational and harm reduction programs, offence-specific group interventions, and individual counselling.



OUR IMPACT



For all Health and Criminogenic programs delivered to male prisoners, there were statistically significant improvements in mental health, trauma symptoms and emotion regulation.



Criminal thinking (a measure of the thinking styles that support and maintain a criminal lifestyle) was significantly reduced in participants across all male criminogenic programs (40-hrs and above).



Female participants in 24-hour programs showed reduced symptoms of depression, anxiety and stress, reduced trauma symptomology, and improved emotional regulation. The longer criminogenic programs for women did not have sufficient numbers to analyse statistically, but the mean changes indicate substantial improvements across mental health, trauma emotion regulation and criminal thinking in these participants.



Feedback from offenders who participated in Caraniche programs revealed high levels of satisfaction with our programs, reporting that they were well delivered, appropriate and responsive to their needs, and effective in helping them achieve change.



98% of respondents indicated that they would recommend the program to others.



Treatment effects were found to be larger for the 40-44 hour programs compared to the 24hour programs, highlighting the greater benefit of longer treatment periods.



Respondents also indicated that as a result of their participation in the programs they had made progress toward achieving their goals, and that their motivation and confidence to remain drug-free had increased.

SARAH'S STORY

"I grew up in a family of six kids in regional Victoria – I was the second youngest. My sister had Down syndrome, and my parents did the best they could. We went to Church every Sunday.

When I was 18, my boyfriend had a speed habit. I was with him for 6 years, and when we broke up I had a habit too. Since then, I've struggled with drugs for 30 years. I've been in and out of prison five times. I've run a video shop, I've cared for my dying mum while my three kids lived with me. I was so busy – I never had time to come down. I would go for days without sleeping.

The drug and alcohol counselling I'm doing in prison is changing everything around. I'm understanding myself more. I'm learning to deal with stuff I couldn't deal with before, like the guilt and the consequences. I've done every drug and alcohol program on offer, and I'm now a peer worker.

My Caraniche counsellor has been amazing. Every session just blows me away. I feel I owe her a lot, because she's helped me see things more clearly. I'm excited about the future. I'm excited about leading a normal life. I'd like to work or volunteer and reconnect with my family and my daughter."

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PROGRAM DELIVERY IN NUMBERS

- 837 offenders completed psycho-educational programs (6 to 12 hours in duration).
- **559** offenders completed health programs (24 hours)
- **321** offenders completed semi-intensive criminogenic programs (40-44 hours)
- **32** offenders completed intensive criminogenic programs (130 hours +)
- 14,735 offenders completed harm reduction and orientation programs
- **955** offenders completed exit preparation programs
- 7,672 hours of individual counselling were conducted
- 67 peer educators were trained to provide support and education to their fellow prisoners.

DATA-DRIVEN PROGRAM DEVELOPMENT:

ICE PROGRAMS IN PRISONS

Our clinical and research teams continually collect and monitor client data through our services. Analysis of longitudinal data collected through our prison-based drug and alcohol services demonstrated a sharp increase in ice as the primary drug of use for both male and female prisoners over the last 5 years.

In response to the dramatic increase in problematic ice use among offending populations in Victoria, Caraniche has designed and piloted a new series of ice-specific programs under contract from Justice Health.

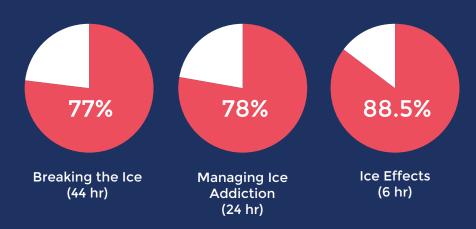
The new programs include a 6-hour psycho-educational program (Ice Effects), a 24-hour health stream program (Managing Ice Addiction), and a 44-hour criminogenic stream program (Breaking the Ice). Current literature and experienced forensic drug and alcohol clinicians were consulted in the development of these programs, and piloting was conducted at a number of Victorian prisons (Barwon, Hopkins, Loddon, Langi Kal Kal, and Marngoneet) between January and December 2015.

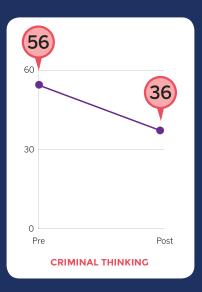
The pilot programs were launched by the Minister for Corrections, Hon Wade Noonan on 24 August 2015. Following the pilot phase, all programs have been formally incorporated into the prison treatment model. In total, these programs were delivered to over 230 prisoners in the 2015/16 financial year.

Psychometric testing data collected before and after treatment shows that these programs have resulted in positive outcomes for participants across a range of measures.

PROGRAM OUTCOMES

High completion rates





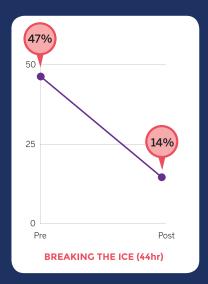
Reduction in criminal thinking

• Criminal thinking is a measure of the thinking styles that support and maintain a criminal lifestyle. There was a significant decrease in Criminal Thinking for Breaking the Ice (44 hr) participants. Current criminal thinking reduced from a severity rating of 55.5 to 36.4.

Reduced intention to use drugs

• The number of participants intending to use drugs after completing the program reduced significantly for both the 24 hr and 44 hr programs.





Improvements in emotion regulation

 Improvements in emotional regulation were observed in participants of both the 24 hr and 44 hr programs, including significant improvements for participants in the Breaking the Ice (44 hr) program for measures of impulsivity and awareness of emotional regulation strategies.

ICE PROGRAMS IN PRISONS PARTICIPANT FEEDBACK

"Completing the program puts drug use into perspective and forces you to face things you didn't want to face when you're in the community."

"It taught me a lot about drug use: what triggers it, thoughts and behaviours towards drug use, setting goals and how to achieve them."

"(The program)
helped me
understand more
about my triggers
and I know I'm not
the only one in this
situation."

"(Completing the program) makes me more confident about getting out."

"The information provided about changes to the neurotransmitters in the brain was helpful and fascinating."

JOHN'S STORY

"I started using drugs when I was 12 or 13. I had a heroin addiction by the age of 13. I hated school. The only days I turned up to school were the sports days. I played rugby, basketball, AFL, and athletics.

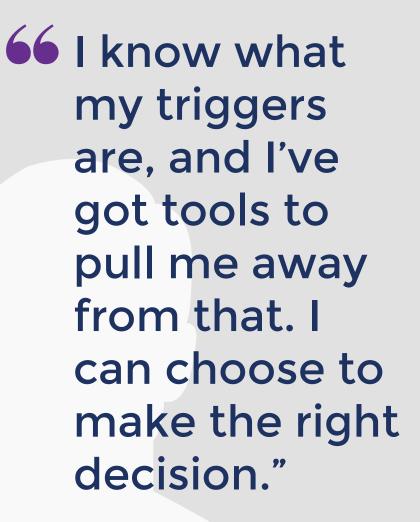
I started running away when I was 10. I was put in foster care, but I kept escaping. Mum and Dad were both into alcohol. Most of the good traits in me come from my grandparents. If I'd been with them from an early age, maybe things would have turned out differently.

I first started doing programs and counselling through Caraniche in 2006 at Barwon Prison. At first I started doing group to get out of work in the kitchen, but then it was because I was learning about myself.

I've done the 44-hour program, and the Sustaining Change program. Geez, I've clocked up a lot of hours of programs. It's a challenge, because I don't like to talk. I've been a loner most of my life, I hold a lot back.

I've kept the workbooks book from the programs I've done. I like to look back and compare to see what's changed. In Sustaining Change, I learnt that I have a bad case of self-sabotage. I've learnt that if you don't put in, you won't know yourself.

I'm a different person now. I'm an in-house secretary and a peer educator. I know what my triggers are, and I've got tools to pull me away from that. I can choose to make the right decision."



RESPONDING TO CHANGE IN THE PRISON SYSTEM

Caraniche takes a proactive approach to continuous service improvement. Our Research and Professional Practice team, led by Professor Stuart Ross, actively monitors data from a range of sources to identify trends and pre-empt service needs.

This year, we developed three new criminogenic drug and alcohol programs to meet the changing needs of Victoria's prison population. They were designed in collaboration with our senior forensic clinicians and in consultation with Justice Health.

Koori AOD Pilot: 44 hour

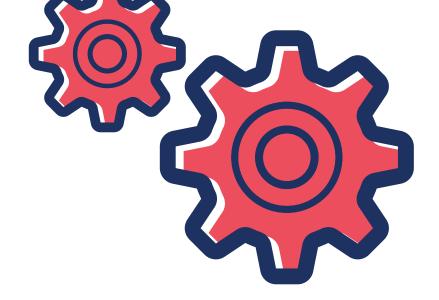
A 44-Hour Koori-specific evidence-based treatment program that targets the criminogenic needs of Indigenous male offenders who have a history of substance use. This program was developed to address the lack of culturally appropriate criminogenic AOD programs available to Indigenous offenders within the Victorian prison system. The Koori Program is grounded in a set of cultural principles, which were informed by national guidelines including the National Strategic Framework for Aboriginal and Torres Strait Islander People's Mental Health and Social and emotional Wellbeing (2004-2009).

The Koori Program is being piloted at Loddon Prison Precinct between October and December 2016.

Sustaining Change Pilot: 44 hour

A 40-hour AOD criminogenic change maintenance program, commissioned by Justice Health in July 2015. The program was developed in response to the anticipated impact of parole reforms made in 2014 and 2015, which resulted in an increase in the proportion of parole orders that were denied, and an increase in the amount of time eligible prisoners are incarcerated before parole is granted. In addition, the period of custody served by offenders who are re-incarcerated due to parole breach has also increased. Best practice in prison-based AOD treatment includes follow-up care for program participants, in recognition that treatment gains can be difficult to maintain, particularly in a prison setting. Until the introduction of Sustaining Change, no AOD maintenance programs were available to Victorian prisoners.

Sustaining Change is designed to address the treatment needs of this cohort, with an explicit focus on maintaining treatment gains and addressing treatment gaps prior to release. The program provides an opportunity for prisoners to revisit skills developed in previous treatment and further develop skills where required, while working to increase motivation and build overall resilience.



The program is being piloted at Middleton Correctional Centre, between April 2015 and December 2016.

The 80-hour Intensive Pilot: 80 hour

Recent reforms initiated by the Victorian Parole Board have resulted in an increase in sentence length as well as a reduction in the number of prisoners able to access parole. As a result, the number of serious and violent offenders who will ultimately be released without parole supervision is increasing. Therefore, it is important to provide intensive and comprehensive treatment programs to these offenders while they are still in prison to minimise the likelihood of relapse and recidivism upon their release.

Despite this need, the opportunity for male prisoners to access intensive treatment programs that addresses both substance use and other criminogenic risk factors is currently limited in Victoria. The majority of male prisoners are only able to access 44-hour treatment options, unless they are located at Station Peak at Marngoneet Correctional Centre, where the higher intensity 130-hour Criminogenic Program is offered.

To address this gap in services, and at the request of the Department of Justice and Regulation (DJR), Caraniche has developed an intensive therapeutic group program – the 80-hour Intensive Program – with the aim of providing longer-term treatment and support for serious or violent offenders who fall within this medium-to-high criminogenic risk group.

The Program provides the opportunity for offenders to access intensive treatment while they are still in prison. This helps to minimise the likelihood of relapse and recidivism upon their release. It has been designed to equip participants with the knowledge and skills to break the cycle of addiction and crime, by creating a safe space and sense of belonging within the group. It also utilises cognitive-behavioural approaches to develop skills to reduce criminal thinking and substance abuse, increase emotional well-being, and improve communication and problem-solving.

The 80-hour Intensive Program is being be piloted at Hopkins Correctional Facility in the second half of 2016.

AMY'S STORY

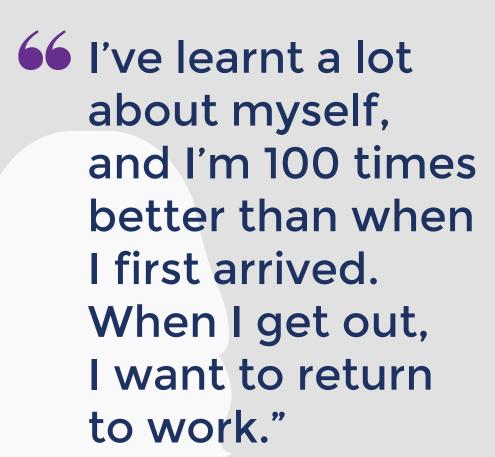
"I grew up in the suburbs of Melbourne. I have three siblings, an older brother, and a younger brother and sister. Growing up, I loved snowboarding. After finishing high-school, I went to uni, got engaged and fell pregnant with my son – he's now 21. Later I went back and finished my studies.

I went to prison for a car accident. Two people died, but there was no drugs or alcohol involved - that wasn't until after. I was on bail for a number of years before being sentenced, and during that time I developed Post-Traumatic Stress Disorder. I didn't cope very well, and I was using drugs to help deal with it all.

When I first went to prison, my mental health really suffered. Then I started counselling with Caraniche and everything started to improve. At first, I only did individual counselling – it took my counsellor a lot of convincing to get me to do a group program. But now I've realised the value of the group setting. It's changed my view so much that I'll do group therapy when I get out.

I can't thank Caraniche enough for the help they've given me. They are very good at what they do. I've learnt a lot about myself, and I'm 100 times better than when I first arrived.

I'm now completing post-grad study through distance education. When I get out, I want to return to work."





TO EACH AND EVERY ONE OF OUR CLIENTS AND PARTNERS



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