

## **RANZCP NSW Branch 2011**

NSW Government Sentencing Council Attorney General & Justice

RANZCP NSW Branch/NSW Faculty of Forensic Psychiatry Submission: Violent Offenders

# working with the community

# RANZCP NSW Branch, and NSW Branch Faculty of Forensic Psychiatry Submission – Violent Offenders

### Violent offenders

### 1. Characteristics of offender

The Corrective Services audit identified fourteen offenders who met the criteria. Thus there are a small number of prisoners identified as serious violent offenders. We noted that the audit found no common thread when identifying characteristics of serious violent offenders. Classification on the basis of type of offence, or diagnosis in the case of persons with psychiatric disorders would not assist in management or determining risk assessment. Psychiatrists interviewed expressed some concern that attempts to identify a particular cohort of serious violent offenders might lead to the phenomenon of "creep", with a small group being increased in numbers as the net is cast wider to include others who appear to meet the identified criteria.

Psychiatrists recognise the origins and expression of violence as complex and multi-factorial. It is unlikely that a distinct cohort of violent offenders could be identified. Many of the offences will have occurred in unique circumstances and many of the offenders have highly unusual personality characteristics and atypical features. We believe it is important that a psychiatrist should assess each person who has committed a serious violent offence separately at the time of sentencing, taking a thorough history to understand the circumstances leading to the offence, details of background and personality factors. It is also important to determine prior to sentencing, whether the person suffers from a mental illness, developmental disability or particular medical conditions and his/her needs during the period of incarceration in order to develop a plan of management.

### 2. Preventative detention

We note that the concept of sentencing legislation allows for a preventative element, in order to deal with offenders who present a danger to the community. We agree with Professor Williams that few would dispute the proposition that the community should be able to protect itself from those people who are suffering from an extreme personality disorder and pose a serious threat to community safety, including by depriving them of their liberty.

However, we disagree with the notion that "preventative detention is morally indistinguishable from the civil commitment of people with a mental illness or the quarantine of individuals suspected of carrying certain life-threatening diseases". Persons committed because of mental illness are in a situation where they are receiving treatment for the illness in the hope of restoring them to health. Similarly, persons in quarantine are in an environment where they are assessed to determine whether they are carrying the disease and if so, to receive appropriate treatment.

We believe that effective rehabilitation assists in managing risk of future offending. The goal of effective rehabilitation should be considered one of the tools used to assist in community protection. Rehabilitation involves a thorough assessment, taking into account the person's needs, in particular to manage any underlying mental disorders such as schizophrenia, brain damage, dementia or personality disorder and provide treatment. Assessment should include a careful history with corroborative information regarding the person's past history and circumstances leading to and surrounding the

# RANZCP NSW Branch, and NSW Branch Faculty of Forensic Psychiatry Submission – Violent Offenders

offences. Any patterns of behaviour should be identified. Goals should be determined and discussed as the plan of management is drawn up.

It was the opinion of the psychiatrists interviewed that the assessment should be conducted prior to or around the time of sentencing, to allow for appropriate treatment and management during the term of imprisonment.

### 3. Risk assessment

We note that our ability to offer a prognosis with respect to risk assessment is limited. Many of the risk assessment scales depend, at least to a large extent on past history and thus would not alter in a custodial setting.

### 4. Therapeutic programs

We consider that there is a need for more research before undertaking new programs, and for further research to evaluate the usefulness of existing programs with follow-up studies.

### 5. Need for research

We believe that it is important to conduct proper scientifically based research in the areas of risk assessment, usefulness of present programs and effectiveness of various forms of intervention to limit recidivism of serious violent offenders and to protect the community.

NSW Branch, Faculty of Forensic Psychiatry

30 June 2011