



SUBMISSION TO VICTORIA'S DRAFT 30-YEAR
INFRASTRUCTURE STRATEGY

October 2016



**Jesuit
Social Services**
Building a Just Society

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Introduction

Jesuit Social Services welcomes the opportunity to make a submission to *Victoria's Draft 30-year Infrastructure Strategy*.

As the Infrastructure Victoria Strategy recognises, infrastructure is about facilitating good outcomes for people. Infrastructure is not an end in itself. Rather, it plays a crucial role in fostering safe, strong and healthy communities. Good infrastructure is about providing access to education, quality health care, employment, sustainable housing, and provides communities with opportunities to foster a sense of belonging and social cohesion.

This investment in community is particularly important for the most vulnerable communities in Victoria. In Victoria, a small percentage of postcodes experience complex and entrenched disadvantage, which Jesuit Social Services research has shown to have endured over the past 15 years. Investment in tailored, quality infrastructure in these communities is a first step to addressing disadvantage. Not only will this investment strengthen the capacity of communities to access services, education and employment, but it will also see broader social and community benefits.

Infrastructure is an important cornerstone of communities and investment in quality, sustainable infrastructure can help to address disadvantage in vulnerable communities.

This understanding frames Jesuit Social Services' submission. The positive outcomes for community and the capacity to tackle disadvantage are at the forefront of our recommendations. In particular we address the following needs identified in the Infrastructure Victoria Strategy:

- **Need 3: Respond to increasing pressures on health infrastructure particularly due to ageing.**
- **Need 5. Provide spaces where communities can come together**
- **Need 7: Provide better access to housing for the most vulnerable Victorians**
- **Need 8: Address increasing demand on the justice system**

Jesuit Social Services: Who we are and what we do

Jesuit Social Services works to build a just society by advocating for social change and promoting the health and wellbeing of disadvantaged people, families, and communities.

Jesuit Social Services works where the need is greatest and where it has the capacity, experience and skills to make the most difference. Jesuit Social Services values all persons and seeks to engage with them in a respectful way, that acknowledges their experiences and skills and gives them the opportunity to harness their full potential.

We do this by working directly to address disadvantage and by influencing hearts and minds for social change. We strengthen and build respectful, constructive relationships for:

- **Effective services** – by partnering with people most in need and those who support them to address disadvantage
- **Education** – by providing access to life-long learning and development
- **Capacity building** – by refining and evaluating our practice and sharing and partnering for greater impact
- **Advocacy** – by building awareness of injustice and advocating for social change based on grounded experience and research
- **Leadership development** – by partnering across sectors to build expertise and commitment for justice.

The promotion of **education, lifelong learning and capacity building** is fundamental to all our activity. We believe this is the most effective means of helping people to reach their potential and exercise their full citizenship. This, in turn, strengthens the broader community.

Our service delivery and advocacy focuses on the following key areas:

- **Justice and crime prevention** – people involved with the justice system
- **Mental health and wellbeing** – people with multiple and complex needs and those affected by suicide, trauma and complex bereavement
- **Settlement and community building** – recently arrived immigrants and refugees and disadvantaged communities
- **Education, training and employment** – people with barriers to sustainable employment.

Currently our direct services and volunteer programs are located in Victoria, New South Wales and Northern Territory, and include:

- ***Brosnan Services***: supporting young people and adults in the justice system, and assisting them to make a successful transition from custody back into the community. Within the suite of services are Perry House, Dillon House and Youth Justice Community Support Services.
- ***Jesuit Community College***: increasing opportunities for people constrained by social and economic disadvantage to participate in education, work and community life and reach their full potential.

- **Community and Settlement Programs:** working with newly arrived migrants across metropolitan Melbourne and in NSW, including the African Australian and Vietnamese communities.
- **Connexions:** delivering intensive support and counselling for young people with co-occurring mental health, substance and alcohol misuse problems.
- **Artful Dodgers Studios:** providing pathways to education, training and employment for young people with multiple and complex needs associated with mental health, substance abuse and homelessness.
- **The Outdoor Experience:** offering an alternative treatment service through a range of outdoor intervention programs for young people aged 15 – 25 years, who have or have had issues with alcohol and/or other drugs.
- **Support After Suicide:** supporting people bereaved by suicide, including children and young people.
- **Western Sydney Program:** through our social enterprise (store and opportunity shop) and other community building we engage young people in a number of capacity building activities, and we provide healthy affordable food, training and employment opportunities to people living in the area of Mount Druitt, Western Sydney.
- **Just Leadership:** Working in partnership with community and corporate enterprises to foster leadership for a just society. This includes the African Australian Inclusion Program, a professional bridging program developed in partnership with the National Australia Bank providing paid work experience and a pathway to ongoing employment.
- **Capacity building** activities in NSW (Just Reinvest project in Bourke) and the Northern Territory with Aboriginal communities to improve their situation and to have more control over their lives.

Research, advocacy and policy are coordinated across all program and major interest areas of Jesuit Social Services. Our advocacy is grounded in the knowledge, expertise and experiences of program staff and participants, as well as academic research and evidence. We seek to influence policies, practices, legislation and budget investment to positively influence participants' lives and improve approaches to address long term social challenges. We do this by working collaboratively with the community sector to build coalitions and alliances around key issues, and building strong relationships with key decision-makers and the community.

Our Learning and Practice Development Unit builds the capacity of our services through staff development, training and evaluation, as well as articulating and disseminating information on best practice approaches to intervening with participants across our programs.

*Jesuit Social Services acknowledges
the traditional custodians of land
and pays respect to their elders past
and present.*

Addressing place-based disadvantage

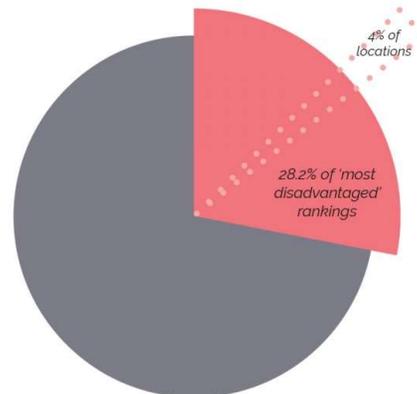
Need 5. Provide spaces where communities can come together

As the draft strategy acknowledges, public spaces and places for a community to come together play an important role in building connectedness in a community, a sense of belonging for its members, civic engagement and community empowerment. While this is necessary in all communities, it is particularly important in communities who face entrenched disadvantage.

In 2015, Jesuit Social Services along with Catholic Social Services Australia released the findings of its fourth *Dropping off the Edge 2015 Report (DOTE)*¹, which found that complex and entrenched disadvantage continues to be experienced by a small but persistent number of locations in each state and territory across Australia, including in Victoria. Just 27 postcodes (4% of total) account for 28.2% of the highest rank positions across 22 indicators of disadvantage (see diagram below).

Of particular concern for Jesuit Social Services is the concentration and web-like structure of disadvantage within a small number of communities across the state. Our research found that those living in the 3 per cent most disadvantaged postcodes in Victoria are:

- twice as likely to have criminal convictions
- 3 times more likely to be experiencing long term unemployment
- 2.6 times more likely to have experienced domestic violence
- 2.4 times more likely to be on disability support.



The persistent nature of locational disadvantage becomes obvious when we compare the findings of our 2015 study with previous studies undertaken in 2007, 2004 and 1999. For example, 25 of the state's 40 most disadvantaged postcodes in DOTE 2015 were also found to be 'most disadvantaged' in the 2007 study² (the other 15 postcodes did not show significant increases or decreases) and the postcodes in the most extreme categories have been quite consistent over the past 15 years (in 1999, 8 of the 12 names in the top two bands were the same for 2015).

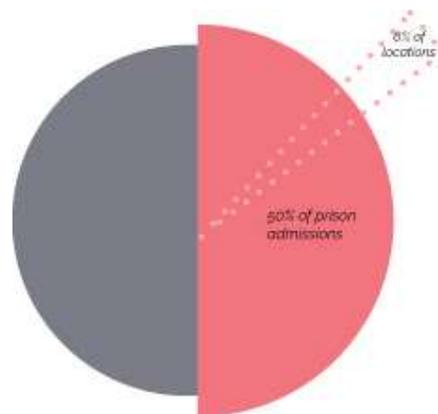
Without a sustained, collaborative, long-term commitment across the government, community and business sectors, there is a significant risk that some of the state's most severely disadvantaged communities will continue to 'drop off the edge'. This is why areas of priority and need for infrastructure must not only consider areas of population growth and pre-existing resources but also the levels of disadvantage in communities. The postcodes identified in the report, particularly those that have been continually identified in the previous reports as having high levels of disadvantage, need significant infrastructure investment to ensure access to stable housing, employment opportunities, education, support services and health services. Without this priority investment, communities that experience entrenched disadvantage will continue to lack adequate resources to successfully tackle the important issues facing their community.

Jesuit Social Services calls on the Victorian Government, in partnership with the community, to act immediately to put in place appropriate structures, plans and resources targeted to our most vulnerable communities to effectively break the web of disadvantage. We need a multi-layered, cooperative and coordinated strategy that is owned and driven by the community. It must involve all layers of government and the business and community sectors, reflecting shared responsibility and joint commitment to resolve this entrenched problem. This strategy must take account of the unique

characteristics and circumstances of local communities and be sustained over the long term. It should be:

- **Targeted** – concentrated to specific areas of the most severe disadvantage.
- **Tailored** – Meet the community’s needs and responding to the unique mix of issues facing the community.
- **Integrated**– Recognising the web of multiple and interconnected causes of disadvantage.
- **Cooperative** – Responses are founded on a strong relationship between government and departmental portfolios, integrated community initiatives and coordination between different levels of government.
- **A long term horizon** – A long-term commitment of 20 years to address complex, entrenched disadvantage.
- **Community owned and driven** – Community leaders drive the agenda, recognizing the strength within communities and work with them to build capacity, generate action, attract external resources and maintain direction and energy.
- **Engaged at the individual, community and national levels** – Recognising the complex interplay of the individual, their family circumstances, their community, and the broader social and economic environment in causing and addressing disadvantage.

Place-based, long-term initiatives must be maximised to reduce crime. *Dropping off the Edge 2015* found that six per cent (42) of postcodes in Victoria accounted for half of all prison admissions. This highlights the often localised nature of crime, as well as the role of disadvantage as an underlying cause of offending.



A community capacity building approach to crime prevention recognises the role that disadvantage in communities plays in the prevalence of crime. This cost-effective measure directs funding to communities with high levels of crime to fund community-led initiatives as a means of preventing crime. Over time, these initiatives lead to savings in justice spending due to a reduction in levels of crime. These community-driven responses target underlying issues that the community has identified as important to them. As an example, the Just Reinvest NSW project in Bourke is already seeing good results. There has been an improvement in school attendance, a sharp drop in domestic violence assaults and it currently has the lowest number of people jailed for driving offences that it has seen in 10 years.³

The Victorian Ombudsman identified the need for more innovative approaches to reduce crime and highlighted the efficacy of a community capacity building approach in Texas which led to a 1,125 drop in prisoner numbers.⁴

By comparison, Victoria’s recidivism rate is at a 10-year high of 44.1 per cent (for 2014-15), up from a low of 34 per cent four years ago⁵. Recidivism represents a significant cost to the Victorian community and presents a significant opportunity for savings. Modelling undertaken by Jesuit Social Services in 2014⁶ shows that a 15 per cent reduction in the rate of male reoffending could save the corrections system between \$15.2 million and \$23.4 million per year over the long term. Achieving

this reduction would also result in significant savings and reduced demand beyond prisons, including for mental health units, hospitals, police and other community support services.

Infrastructure has a critical role to play in supporting communities to address key issues of disadvantage facing their communities. Colocation of government services, such as Centrelink and social housing, alongside community services, welfare services and community legal services is the first step to a community capacity building approach to tackle entrenched disadvantage. Embedding these in education settings, particularly for rural and regional locations, breaks down accessibility barriers for families needing support. Educational settings should not just be places for preschool, primary and secondary schools, but also provide literacy and numeracy training for older siblings and parents who face barriers entering the workforce. Colocation also provides opportunities to more easily create links between services to ensure responses to community needs are collaborative, and there is effective communication between services.

For infrastructure to truly enable communities to address disadvantage in their communities, it also needs to support processes of local decision-making by the community and be flexible to their needs. As identified by VCOSS in a recent paper, a 'collective impact' approach values community knowledge and strives for the community to have genuine ownership over the services, direction and initiatives in their communities.⁷ Engaging the community in the co-design and co-production of infrastructure is one element of this framework. Infrastructure therefore needs to be developed in consultation with the community, particularly regarding community facilities, services, and education to ensure it is meeting the needs of the community.

We recommend developing sustainable infrastructure that meets the needs of individual communities as part of a whole-of-government, long-term strategic approach to entrenched and localised disadvantage.

Preventative approaches in health

Need 3: Respond to increasing pressures on health infrastructure particularly due to ageing.

It is widely recognised that social factors and experiences of disadvantage have a significant impact on the quality of people's health and the severity of health issues they experience. In Australia, disadvantage is profoundly experienced by Aboriginal communities. It is therefore hardly surprising that thirty to fifty per cent of the life expectancy gap between the Aboriginal and non-Aboriginal population in Australia can be explained by differences in the social determinants of health.⁸

Improving people's overall health and reducing unnecessary strain on the tertiary health system must, therefore, involve a whole-of-government strategy to break the cycle of entrenched disadvantage. Approaches to manage increasing pressures on hospitals must include strategies to address a lack of access to education, experiences of social and economic hardship and a lack of access to quality, sustainable housing. Ensuring health care is affordable and accessible is also key part of this strategy.

Community health has a crucial role to play in preventing complex and acute health issues by educating people about health issues, maintaining good health and how to access health services early. Access to community health facilities enable affordable health care that can be tailored to the needs of the community. Community health facilities play a proactive role in educating the community about local health issues and maintaining a healthy lifestyle. For rural and regional communities, community health hubs are significantly more accessible than specialist tertiary services, often located in Melbourne, and therefore have a great capacity to ensure all people have access to good primary healthcare as well as prevent excess strain on the tertiary health system.

Holistic health care is also more effective when service systems are able to work collaboratively. The Infrastructure Victoria strategy recognises the role that technology and co-location can play in improving services for the public. Having different health providers able to communicate securely as well as health services and human services or justice providers will enable an individual to receive more holistic care as well as more accurate diagnoses (as health professionals will be able to have a deeper understanding of the causes of health issues on an individual level). To be most effective, teams of professionals from different areas need to work collaboratively to assist an individual, recognising the often interconnected nature of someone's needs and presenting health concerns.

Mental Health

Almost one in five Australians will experience a mental illness over any 12-month period and suicide in Victoria is on the rise⁹, with the number of suicides increasing by 35 per cent in the last 10 years.¹⁰ For society's most vulnerable, mental illness is often a compounding factor and consequence of experiencing disadvantage.

Mental illness and alcohol and drug problems are often contributing factors to involvement in the criminal justice system. Recent data on prisoner health indicates that between 30 to 50 per cent of prisoners face varying levels of mental health problems (including drug and alcohol abuse).¹¹ Prisoners are two to three times as likely as those in the community to have a mental illness¹² and are ten to 15 times more likely to have a psychotic disorder.¹³ Research by Swinburne University shows that more than 30 per cent of people taken into police custody across the state were receiving psychiatric treatment in the community at the time of arrest.¹⁴

Recognising that disadvantage and social exclusion are drivers of poor mental health, Jesuit Social Services advocates for the proposed actions including in particular:

- increasing the proportion of people with mental illness in stable, affordable and safe housing;
- enhancing support for economic and social participation for people with mental illness;
- reducing recidivism among people with mental illness in contact with the justice system by improving support to them, particularly forensic patients and Aboriginal people; and
- providing coordinated support for people with co-occurring mental health and drug and alcohol problems.

Better access to support and treatment for forensic mental health patients

Despite the alarmingly high incidence of mental illness among people in contact with the justice system, mental health services across the justice system are under-resourced and fragmented. These issues have been identified in several investigations and inquiries over many years¹⁵.

As identified by the Victorian Auditor-General in the 2014 report *Mental Health Strategies for the Justice System*, the number of male prisoners with a risk rating that indicates they have a stable psychiatric condition requiring assessment or continuing treatment rose sharply from an annual average of 1,372 in 2009–10 to 2,104 in 2013–14, an increase of 53 per cent¹⁶. This compares with an increase in the annual average male prisoner population of approximately 29 per cent over the same period. The report also notes that the number of male prisoners per mental health bed rose from 85 in 2009-10 to 110 in 2013-14.¹⁷

These figures show an increasing proportion of the growing prisoner population requires ongoing psychiatric treatment and, should their condition deteriorate, may also require inpatient care in prison, or at Thomas Embling Hospital. However, forensic mental health services currently provided by Thomas Embling Hospital are also under strain; this facility only has 116 beds and there is a waiting list of up to a year for patients with significant mental health problems.

Despite these demand pressures, there is no current plan that integrates a mental health response across police cells, prisons, mental health facilities and services for people with offending backgrounds in the community. This situation has implications for community safety with time in prison (and limited access to treatment) increasing the chances of further offending.

We recommend ongoing investment in the mental health service system by:

- **Strengthening mental health services in the community**
- **Integrating mental health, housing, and employment services to provide holistic support**
- **Providing coordinated support for people with co-occurring mental health and drug and alcohol problems**
- **Increasing the provision of mental health services in custody**
- **Strengthening transition planning and ensuring intensive support for people exiting custody with mental illness so that they are linked in with community mental health services**

Access to stable housing for people with complex needs

Need 7: Provide better access to housing for the most vulnerable Victorians

The availability of safe, secure and stable housing is a major issue for many in our community, but particularly for people with mental illness, addictions and other complex needs. We know that 30 per cent of people exiting prison do so into homelessness¹⁸, while a University of NSW study on multiple and complex needs found those with complex needs experience greater homelessness and housing disadvantage.¹⁹ We know from our work with young people in the justice system that a small number of young people remain incarcerated because of the lack of access to a home.

Homelessness services provide varying levels of housing advice, accommodation and support. While these services provide critical interventions for people experiencing a temporary housing crisis or less complex underlying issues, they also must operate in an environment where resources are limited and there are significant barriers to building a highly skilled workforce. These pressures mean that they often struggle to support the small but significant number of people in the community with a combination of complex needs and challenging behaviours that put them at heightened risk of prolonged homelessness, social exclusion and of contact with the justice system. Specific vulnerable cohorts include women and families fleeing domestic violence, young people (including those leaving out-of-home care or the justice system), and people leaving prison.

A barrier for people finding stable housing can be entry into the private rental market. Particularly for **women and families fleeing domestic violence**, or people leaving prison, the lack of rental history and financial barriers can prevent access to the housing market.

Financial barriers can often prevent young people accessing both the private market and social housing. Very few social housing providers accommodate young people because their financial modelling does not cater for people on low incomes. Lacking independent living skills can also be a barrier to maintaining stable accommodation. Many **young people leaving care, or young people leaving the justice system**, have not yet developed the independent living skills necessary for stable accommodation. For this cohort, transitional, supported housing, with after-hours workers, is central to a pathway to stable, independent living. Without intensive support to access and sustain appropriate forms of housing, many of these people will continue to experience homelessness, and will have contact with other acute services in the community.

Prisoners can also face significant barriers maintaining their housing in the community while they are in prison. Common risks to prisoners' housing include falling behind in rent, being absent from an Office of Housing property for longer than the permitted six month 'temporary absence', alleged abandonment of the property or an 'alleged illegal use' of the property.²⁰ An extension of the housing assistance program could have the capacity to meet some of the financial barriers facing vulnerable people.

Investment is needed in housing and support packages that aim to stabilise housing and build social inclusion. Our research and experience have shown that secure and stable accommodation, coupled with assistance to sustain housing and build capabilities, can enable people with complex needs to maintain their housing and more productively participate in the community.²¹

Jesuit Social Services' Next Steps (Dillon House) and Perry House models are two such examples of supported living arrangements. Perry House is a living skills residential program for young people with intellectual disabilities who are involved with the criminal or youth justice systems. Perry House workers facilitate the development of independent living skills from a strength based practice

approach which promotes resilience and a 'can do' approach to life. Each resident is supported to develop a 12 month program plan which aims to optimise their capacity to live independently in the community. Activities may include reconnection to family, engagement in employment, training or education, financial management, good communication and use of technologies.

To meet the varying needs of society's most vulnerable people, a diversity of housing options is critical. Options include transitional, supported living arrangements such as residential programs, lead tenant housing, step down models, and approaches that support individuals' entry into the private housing market through housing first models and head-leasing.¹ It is also important to consider housing options through a gendered lens to ensure women have access to safe, secure, long-term housing.

It is also critical that affordable housing is a good quality, whereby dwellings – both private and social – adhere to minimum standards of quality. Housing structures must be strong, solid and sustainable, and made to last in the long term. This requires investing in aspects such as good insulation and building energy efficient houses. While more costly upfront, these buildings are cost-effective in the long-term, reducing costs for tenants as well as the environment. It is equally important that houses – private and social – are based on universal design principles to enable greater access to housing for those with a disability or the elderly. As stated above, as well as providing a range of housing options and quality stock, wrap around support is also critical in enabling people with complex needs to maintain stable housing.

Without access to transitional, stable, quality, supported housing arrangements, Victoria's most vulnerable people will continue to be at risk of long-term homelessness and will face an ever greater challenge of overcoming any other issues they are facing.

We recommend investment in a diversity of housing and support options for people with multiple and complex needs including:

- **supported housing models, such as Next Steps and Perry House, for vulnerable women who require supported living arrangements**
- **expanding supported housing options for people with limited independent living skills, particularly young people leaving care or the justice system**
- **people exiting prison by identifying and funding options to address post-release housing support**

¹ **Lead tenant** is an out-of-home care placement option providing medium-term accommodation and support to young people aged 16-18 years, who have been placed away from the care of their families by Child Protection (Source: DHHS, Victorian Government). **Head-leasing** occurs when a social housing provider leases a property from a landlord in the private rental market and then subleases it to a person requiring housing assistance. Based on the understanding that housing is a right, the **Housing First model** secures housing as a first step to addressing social issues. It is similar to a head-leasing arrangement, however the individual has no requirement to engage in support services and the housing is permanent.

CASE STUDY: DILLON HOUSE

When Alex* first engaged with Jesuit Social Services' Next Steps program after exiting the youth detention system, his case workers recall a young man who struggled with confidence and self-motivation.

The transformation he has undergone since showcases four key elements of the Next Steps program – case management, family therapy, residential component and outreach.

Next Steps, funded by the Victorian Government as part of its Homelessness Innovation Action Projects, works to prevent homelessness for vulnerable young people aged 16-24 involved with the criminal justice system. It does this by delivering intensive case management support and providing supported accommodation through Dillon House, a three-bedroom property in inner-city Melbourne.

When Alex first came to Dillon House he was struggling with grief and mental health problems linked with his offending.

Moving into Dillon House provided him with safe and secure housing that wasn't available otherwise.

"His prospects in terms of housing and finding a home were limited," says Roger Pugh, Senior Project Officer at Jesuit Social Services.

"He enjoyed the fact that he felt he had independence but that there were also people around to help keep him safe," says Roger.

"He knew it was a safe place – a refuge – here and it was the first time he had a constant in his life."

Living at Dillon House, Alex was able to develop his independent living skills such as cooking and cleaning. He was also linked in with activities including a local gym and study opportunities.

At the same time, by addressing the root causes of his behaviour Alex was reducing the likelihood of re-offending and working towards becoming a productive member of society.

Alex lived at Dillon House for 18 months until exiting in January 2016.

"Eighteen months is a long time to work intensively with someone but it demonstrated that Alex could build trust in us," says Roger.

Alex now lives in a sharehouse with friends, where he uses the independent living skills he had developed during the program. Next Steps has also provided him with material aid and financial assistance, and he continues to meet with case workers in community settings regularly.

Whereas Alex was once too anxious to hand his resume in at a café, he is now actively handing out his resume at local businesses seeking casual employment.

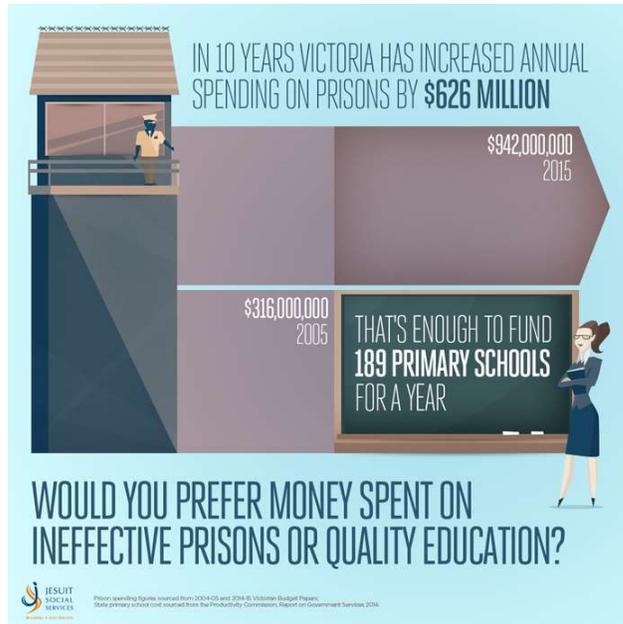
"Next Steps allowed Alex to grow his identity and develop from a boy into a young man."

**not his real name*

Prevent crime to reduce the strain on the justice system

Need 8: Address increasing demand on the justice system

We welcome the Victorian Government's emphasis on the importance of prevention and rehabilitation as a means to reducing the pressure on the justice system. Building more prisons is not the answer to reducing crime. Effective approaches that focus on prevention and early intervention,



addressing entrenched disadvantage, place-based initiatives, expanding diversion and restorative justice will help to create safer communities and address the underlying drivers of crime and incarceration.

A significant proportion of crime is committed by people who have already offended. In 2014-2015, 69 per cent of alleged offender incidents were committed by people who had committed more than one incident in the same period.²² Approximately half of all Victorian prisoners have been previously imprisoned and the recidivism rate had risen to 44.1 per cent by the end of 2014-2015.²³ Given the prevalence of repeat

offenders, efforts to prevent crime must target the rehabilitation and reintegration of people already in the justice system.

In order to strengthen the rehabilitation of people who come into contact with the justice system, a whole-of-system approach is needed. As identified by the *Draft Strategy*, the justice system is highly interdependent, requiring the whole system to respond to crime effectively to prevent its reoccurrence. This means that crime prevention strategies need to be integrated across the justice system continuum, so that there are multiple opportunities to keep people of the justice system.

Strengthening diversionary and restorative justice practices and more deeply embedding them into the justice system is an effective way to minimise contact with the justice system and therefore prevent an individual from cycling in and out the justice system. There are several opportunities for diversion, from the police contact stage, to pre-court, pre-plea and pre-sentence. Justice infrastructure, including police stations and courts, need to provide spaces for diversionary practices to occur as necessary. In police stations, for example, this could mean a dedicated

Youth Justice Statistics

Youth detention

Over half of young people who had been in youth detention went on to re-offend (AIHW 2015)

Supervised community-based order

Almost half (44%) of 10 – 16 year olds who had been on a supervised community-based order went on to re-offend within 12 months (AIHW 2015)

Youth Justice Group Conferencing

Over 80% of participants had not reoffended after two years. (KPMG 2010)

Youth Diversion Pilot Program

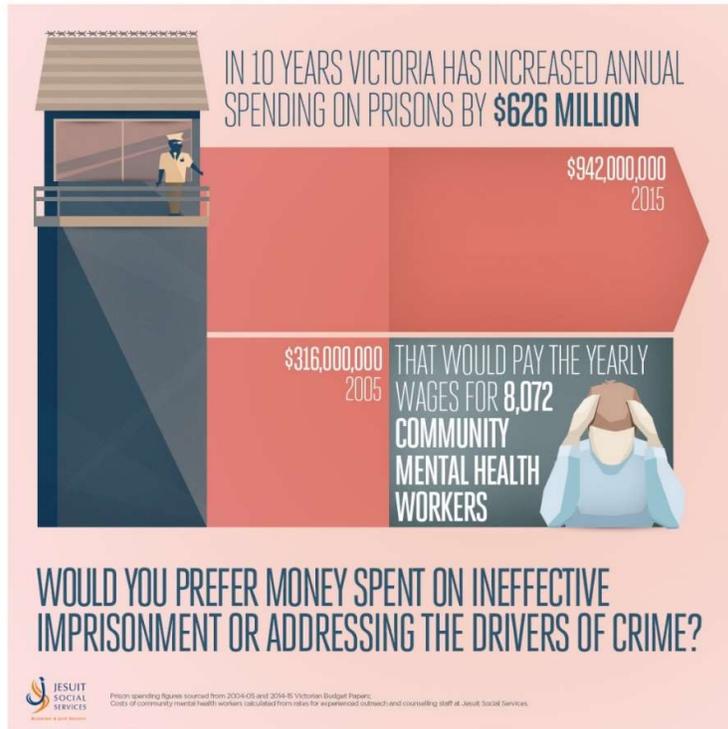
Over 90% of participants successfully completed their diversion and had their charges dismissed.

space for young people to meet with their Independent Person in a non-confronting environment to discuss the incident and the police process, and ultimately assist the young person in managing the situation. In courts, this means a dedicated area for diversion assessment and development of diversion plans to occur. Modelling undertaken for Jesuit Social Services in 2014²⁴ shows that a 15 per cent reduction in the rate of male reoffending could save the corrections system between \$15.2 million and \$23.4 million per year over the long term. Achieving this reduction would also result in significant savings beyond prisons, including for mental health units, hospitals, police and other community support services.

Better integration between the justice, health and human service systems will also help to ensure that the needs of people coming into contact with the justice are being met. The collaboration of these services means the people can receive a more holistic response, with the systems better understanding the unique mix of disadvantage facing each person. In particular, the justice system and housing support services need to work more effectively together to reduce the 31 per cent of people exiting prison into homelessness.²⁵ This means that data upgrades should also

support better data sharing between sectors and agencies as well as underpin robust evaluation of programs to accurately assess their holistic impact on an individual. An integrated response is necessary, particularly when working with people who are cycling in and out of the justice system, however integration must extend beyond infrastructure and ICT to enhanced community-based support.

Investing in prisoner rehabilitation and reintegration is also a key part in reducing crime in the community. Ninety-nine per cent of prisoners return to the community and, therefore, the more successfully that they can be reintegrated into society, with their underlying drivers of crime being addressed, the safer Victoria will be for all people. Jesuit Social Services supports the recommendations made by the Victorian Ombudsman in the 2015 report on this issue. In particular, Jesuit Social Services is concerned by the current limited resources dedicated to transition centres for male and female prisoners, which have been shown to be effective. For example, male prisoners who access the Judy Lazarus Transition Centre have a significantly lower recidivism rate (10.4 per cent) compared with the overall prison population (44.1 per cent).²⁶ This model provides a staged release which has been shown to help people develop the skills and confidence to live in the community. Currently this service is only available to male prisoners and only holds a limited 25 beds for the 700 people who exit prison each year.²⁷



The women's imprisonment rate has climbed over the past decade, up 40 per cent between 2005 and 2015.²⁸ The Victorian Ombudsman has recommended that the Department of Justice and Regulation investigate options to ensure the specific needs of women prisoners are recognised. There is currently no comparable service to the Judy Lazarus Centre available to women.

We recommend investment in crime prevention through:

- **strengthening diversionary and restorative justice practices and more deeply embedding them into the justice system**
- **better integration between the justice, health and human service systems**
- **more intensive transition support services for highly vulnerable people leaving prison by expanding the Judy Lazarus Transition Centre to enable a greater proportion of the prisoner population to access intensive transitional support, including an equivalent transitional support facility for women.**

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