

Mental Health Inquiry Productivity Commission
GPO Box 1428,
Canberra City ACT 2601

Just Reinvest NSW Submission, April 2019:
The Social and Economic Benefits of Improving Mental Health
Productivity Commission Issues Paper

Introduction

We thank the Productivity Commission for the opportunity to contribute to this important inquiry. Just Reinvest NSW is a coalition of over 25 organisations and individuals that have come together to address the significant over-representation of Aboriginal people in custody through a Justice Reinvestment framework. Just Reinvest NSW is auspiced by the Aboriginal Legal Service (NSW/ACT) and our priority is working alongside Aboriginal communities, supporting their empowerment and self-determination. You can find more information about Just Reinvest NSW and our work here <http://www.justreinvest.org.au>

Just Reinvest NSW's key message to the government and the community are solutions to the over-incarceration of Aboriginal people - smarter approaches that reduce crime and create safer, stronger communities and resilient and empowered individuals.

In 2013, Just Reinvest NSW began a partnership with the Aboriginal community in Bourke to implement the first major justice reinvestment initiative in Australia, Maranguka Justice Reinvestment. You can find more information about the Maranguka Justice Reinvestment initiative here <http://www.justreinvest.org.au/justice-reinvestment-in-bourke/>. We are currently exploring justice reinvestment approaches with new communities in NSW, including Moree in remote NSW, Armidale in regional NSW and Mt Druitt in Sydney.

A justice reinvestment approach is underpinned by local, place-based and data-driven solutions led by community that deliver better social and economic outcomes for those communities. It is focused on identifying and supporting people before or as serious psycho-social issues and criminal justice interactions arise, and diverting people away from the criminal justice system. Evidence shows that engagement with the criminal justice system can entrench disadvantage and further traumatises people who may already be burdened with mental health issues and trauma.

Our view and experience through our work with communities, is that there are a variety of social and economic costs associated with mental health issues that can be mitigated by a different approach for Aboriginal and Torres Strait Islander people in NSW. We advocate for a holistic approach to mental health, involving the whole community. We hear from Aboriginal communities across NSW, and in particular in our focused work in Bourke, Moree, Armidale and Mt Druitt, that mental health is a major concern across the whole community, and especially for young people and men.

Our submission to the Issues Paper is based on our experience in this community-led work, and we invite the Inquiry to consider the issues of mental health in Aboriginal communities in light of this experience, and of community expertise. Given the impact of unaddressed mental health issues on interactions in the criminal justice system, and the well-known pipeline from juvenile justice to adult incarceration, we also focus some of our submission on the well-being of young Aboriginal people.

Background on Justice Reinvestment and Maranguka in Bourke, NSW

Justice reinvestment involves the redirection of resources away from prisons to addressing the root causes of offending in communities. Solutions need to be community-led, place-based, data-driven and focused on early intervention. Crucially, justice reinvestment represents a shift away from top down approaches in favour of integrated and holistic local solutions with a view to preventing contact with the criminal justice system.¹

Justice reinvestment is:

Community-led: Self-determination and the application of Aboriginal and Torres Strait Islander culture, authority and knowledge are critical for success in strategies aimed at reducing Indigenous imprisonment. Through community-led justice reinvestment initiatives, communities drive local responses to crime and build pathways away from the criminal justice system for children and young people. Resources are shifted from prisons and corrections into strategies determined by Aboriginal and Torres Strait Islander governance. The communities we are working with have all specifically named mental health, disempowerment and deep historical trauma as drivers of crime.

Place-based: We know that a disproportionately high number of people going to prison come from, and return to, a small number of geographic areas. A place-based approach allows for the particular circumstances in communities that drive offending to be addressed. Service providers work in new, collaborative ways to meet goals identified by communities and to co-design localised solutions to identified local drivers of contact with the criminal justice system. This means in each community, solutions and strategies will be tailored to that community and not an off-the-shelf program or service.

The communities we work with have all noted the lack of appropriate and culturally competent services in their communities to support people through mental health issues and trauma. For example, through our work alongside the Aboriginal Legal Service NSWACT we know that even if a mental health issue is identified, there may be no local services, resources or referral pathways to effectively divert that person away from the criminal justice system through the application of the *Mental Health (Forensic Provisions) Act 1990* (NSW). Justice reinvestment looks at local issues, and devises solutions to redress “post code justice” and regional disparity.

Data-driven: Data-driven and evidence-based decision making is central to a justice reinvestment approach. At the community level, data is essential at every stage: to establish a baseline, set targets and goals, monitor the effectiveness of strategies and incorporate evidence-based improvements, and to calculate the savings realised for reinvestment back into the community. Justice reinvestment also relies on data analysis at the state level to make evidence-based decisions on policy options for criminal justice system reforms. The communities we work with have all struggled with the paucity of bureaucratic data that reflects their lived reality and mental health issues. They also reflect that even where the data does point to clear issues, the government responses are either poor, culturally incompetent, limited or non-existent.

Economically sustainable: Justice reinvestment approaches can save money (see more on this below). With long-term investment in sustainable solutions, justice reinvestment can improve the lives of children and young people, create safer communities, and stop young people coming into contact with the criminal justice system. This - along with sensible policy and legislative measures – can create a downward pressure on the prison population which means funds can be redirected away from the criminal justice system into local, practical and place-based initiatives, including mental health diversions that attend to the underlying issues that drive

¹ David Brown, Chris Cunneen, Melanie Schwartz, Julie Stubbs and Courtney Young, *Justice Reinvestment: Winding Back Imprisonment* (Basingstoke, Hampshire : Palgrave Macmillan, 2016) 119.

interactions. A number of community members and practitioners in the legal sector we work with express frustration at the system's failure to look to the financial and social costs that would be saved by investing in community led initiatives to address mental health and trauma as a preventative measure.

Maranguka Justice Reinvestment, crime reduction and economic impact

In 2013, Maranguka partnered with Just Reinvest NSW to develop a justice reinvestment 'proof of concept' in Bourke. Maranguka Justice Reinvestment adopts a collective impact framework that changes the way services are provided to the community. Maranguka is directed and guided by the Bourke Tribal Council which advocates on behalf of the Bourke Aboriginal community.

Maranguka has undertaken activities designed to create change within the community and the justice system. Those activities have included: Aboriginal leaders inspiring a grassroots movement for change amongst local community members, facilitating collaboration and alignment across the service system, delivering new community based programs and service hubs, and partnering with justice agencies such as the police, to evolve their procedures, behaviour and operations towards a proactive and reinvestment model of justice.

In 2018, KPMG undertook an impact analysis of the work of the Maranguka Justice Reinvestment initiative² through an analysis of changes between 2015 and 2017. The Report found that changes in Bourke following the adoption of a justice reinvestment approach resulted in a gross economic impact of \$3.1 million in 2017. Of this amount of savings, approximately two-thirds relate to the justice system and one third is broader economic impact to the region. KPMG further estimated that if just half of the results achieved in 2017 were sustained, Bourke could deliver an additional economic impact of \$7 million over the next five years.

The Maranguka initiative has adopted a "life course approach" within their justice reinvestment model, a lens through which the community and coalition partners identify how different factors influence and impact on an individual's experience at different stages over a lifetime. Data is collected and analysed under the model, and guides priorities and local decision-making on how to support children, youth, adults and families to build strength and independence, and to reduce contact with the criminal justice system. Implementation of the Bourke community's strategy for change '*Growing Our Kids Up – Safe, Smart, Strong*' commenced in 2015. Mental health issues are recognised in Bourke's life-course approach.

The KPMG Report highlights improvements in three key areas in 2017:

- Family strength: a 23% reduction in police recorded incidence of domestic violence and comparable drops in rates of reoffending
- Youth development: a 31% increase in year 12 student retention rates and a 38% reduction in charges across the top five juvenile offence categories
- Adult empowerment: a 14% reduction in bail breaches and 42% reduction in days spent in custody.

Data sourced from the Bureau of Crime Statistics and Research also indicated significant crime reductions across many areas. This included, between 2015 and 2017:

- 18% reduction in the number of major offences reported

² See the KPMG Impact Analysis Report at <http://www.justreinvest.org.au/landmark-report-demonstrates-economic-impact-of-3-1-million-in-2017-and-estimates-additional-impact-of-7-million-over-five-years-through-justice-reinvestment-in-bourke/>

- 34% reduction in the number of non-domestic violence related assaults reported
- 39% reduction in the number of domestic violence related assaults reported
- 39% reduction in the number of people proceeded against for drug offences.
- 35% reduction in the number of people proceeded against for driving offences.

Re-offending also decreased, with the following changes observed between 2014 and 2016:

- 8% reduction in the overall rate of re-offending with a new offence within 12 months of release
- 15% reduction in the rate of domestic violence re-offending among domestic violence offenders (aged 18-25)
- 48% reduction in the rate of domestic violence re-offending among domestic violence offenders (aged 26 and over).

For children and young people (10-25 year olds) the following changes occurred:

- 14% reduction in the rate of re-offending with a new offence within 12 months of release (2014 to 2016)
- 12% reduction in the total number of young people proceeded against for offences from 2015 to 2017
- 38% reduction in number of young people (up to 25 years) proceeded against for driving offences from 2015 to 2017
- 43% reduction in number of young people proceeded against for breaches of Apprehended Violence Orders from 2015 to 2017
- 43% reduction in number of young people proceeded against for domestic violence related assault from 2015 to 2017.

A driver licensing program, a key initiative under the Maranguka Justice Reinvestment Project resulted in:

- More than 300 people obtaining their driving licenses
- 72% reduction in the number of young people (up to 25 years) proceeded against for driving without a licence from 2015 to 2017.

The benefits, including the cost benefits, of this community led approach are clear. The decreased driving offences contributes to a direct cost savings from the Justice budget (from the Police, Courts and prison) and the benefit of having people licensed increases their economic participation in society.³ Similarly, the decrease in family violence offences not only reduces expenditure in the Justice budget, but also reduces the impact on the costs of emergency housing, Centrelink crisis payments and injury/health budget.

As part of the justice reinvestment approach an Aboriginal Employment and Prosperity Strategy has been initiated in Bourke. Coupled with the expanded TAFE in Bourke, this should create opportunities for better social and economic participation of Aboriginal people in Bourke. Maranguka Justice Reinvestment in Bourke is additionally convening a 2-day event in May 2019, the Maranguka Education, Employment, Training Community Summit (MEETCS) to discuss learning, employment and training opportunities across the life-span of people in Bourke.

The role and costs of trauma

The Productivity Commission's Issues Paper does not deeply interrogate the impact of individual or collective trauma on the mental health of Aboriginal and Torres Strait Islander people. To support Aboriginal people's

³ See Rebecca Ivers et al, *Driver licensing: descriptive epidemiology of a social determinant of Aboriginal and Torres Strait Islander health* at <https://onlinelibrary.wiley.com/doi/full/10.1111/1753-6405.12535>

mental health, the historic, social, cultural, collective, complex developmental trauma of First Nations people should be further explored and understood.

While trauma informed care is mentioned in the Issues Paper, it is deserving of a stronger focus. Given the impact that trauma has on mental health, we suggest the Productivity Commission engage with experts, research and consider the impact on Aboriginal communities. We also refer the Commission to the Australian Law Reform Commission *Pathways to Justice* Report that explores the role of trauma, the impact of the stolen generations on the collective and individual mental health of many Aboriginal people, and which also recommended a justice reinvestment approach to community-led, place-based initiatives.⁴

We note that earlier research confirmed that trauma and violence were common and pervasive experiences for Aboriginal people with mental and cognitive disabilities in the criminal justice system.⁵

The 2015 Young People in Custody Health Survey (YPICHS) confirms that young people in custody come from highly disadvantaged backgrounds, with family disruption and experiences of trauma, neglect and abuse commonplace.⁶ The Reports notes a major concern with the misuse of drugs and alcohol as does the dramatic increase in the use of methamphetamine.

The YPICHHS finds that “in 2015, 11.5% of participants met the threshold criteria for any mood disorder, which is more than double the population prevalence (5.0%). Close to one-quarter of young people were found to have at least one anxiety disorder (24.5%), which is more than three times the population prevalence (7.0%). The majority of anxiety disorders were post-traumatic stress disorder (PTSD) (13.5% of the sample). The high prevalence of PTSD in young people in juvenile custody correlates with their high prevalence of childhood abuse or trauma.”

The YPICHHS notes the psychological impact of trauma on young people, with high scores on anxiety, depression, anger, PTSD, disassociation and sexual concerns - suggestive that the young people may have been prematurely sexualized or sexually traumatised.⁷

Bessel van der Kolk, in his study of adverse childhood experiences states, “childhood trauma including abuse and neglect is probably the single most important public health challenge ... a challenge that has the potential to be largely resolved by appropriate prevention and intervention.”⁸ The study also notes that people with childhood histories of trauma make up almost the entire criminal justice populations.⁹

⁴ see Australian Law Reform Commission, *Pathways to Justice—Inquiry into the Incarceration Rate of Aboriginal and Torres Strait Islander Peoples*, Final Report No 133 (2017), and in particular Chapter 3 of the Report at https://www.alrc.gov.au/sites/default/files/pdfs/publications/final_report_133_amended1.pdf

⁵ See Baldry, E., McCausland, R., Dowse, L. and McEntyre, E. 2015 *A predictable and preventable path: Aboriginal people with mental and cognitive disabilities in the criminal justice system*. UNSW, Sydney at <https://www.mhdc.d.unsw.edu.au> at p 11

⁶ <https://www.justicehealth.nsw.gov.au/publications/2015YPICHSReportwebreadyversion.PDF>

⁷ <https://www.justicehealth.nsw.gov.au/publications/2015YPICHSReportwebreadyversion.PDF> at p 79

⁸ Bessel van der Kolk building from the Adverse Childhood Experiences Study, 2007, p. 224 - van de Kolk, B. 2007 *Developmental impact of Childhood Trauma*, in *Understanding Trauma: integrating biological, clinical and cultural perspectives*, Kirmayer L, Lemelson R, Barad M (Editors) Cambridge University Press. New York.

⁹ *ibid.*

Grief and Loss

Grief and loss, related to but not synonymous to trauma, is not addressed in detail. In our experience grief and loss has a huge impact on mental and physical health and wellbeing. The impact of the well-documented comparative high rates of chronic illness and death in Aboriginal communities should be considered. The communities we work with have all identified this as a major issue and are seeking culturally responsive programmatic and systemic responses to grief and loss. We also note the disturbing “cluster” suicide rates of young Aboriginal people in some communities.

“Workforce” and the empowerment of local people

It is vital to acknowledge the importance of local Aboriginal leadership in delivering culturally appropriate initiatives to support community mental health and well being. Cultural strength and identity is a protective factor for mental health concerns. By empowering local people to support their communities – whether that is through men’s and women’s groups, cultural camps, yarning circles, employing trauma workers, healers¹⁰, community engagement workers and many other examples – communities will be able to achieve better mental health outcomes and more effective health promotion.

Mental health and young people

The 2015 Young People in Custody Health Survey (YPICHS) (and earlier YPICHS surveys) found that psychological disorders are prevalent among young people who come into contact with the juvenile justice system, and are substantially more common for those entering custody than young people in the general population¹¹. Young people in custody represented in YPICHS had high levels of mood, anxiety, substance-related, attention and behavioural, schizophrenic and other psychotic disorders – and many of these disorders had risen significantly since the earlier survey conducted in 2009.

Just under half of the surveyed young people in 2015 self-reported that they were aware of a current diagnosis for a mental health problem. Over half the young people (58.2%) reported having at least one family member with mental health or an AOD problem. Significantly more Aboriginal than non-Aboriginal young people had at least one family member with AOD problems (65.9% vs. 50.0%).¹² While suicide and self-harm ideation is also high in this cohort, participants in the YPICHS are less likely to self-harm and ideate, and more likely to make serious suicidal acts and attempts – particularly young males – than their counterparts in the general population.¹³ Moreover, research suggests, and the YPICHS study shows that the rates of self-harm among both juvenile and adults in custody are higher than among the general population.

The impact of racism and discrimination on mental health

Adverse childhood experiences leave long lasting impacts on the development of young people. Racism and discrimination form a critical part of these experiences.

¹⁰ See, for example, the work of Anangu Ngangkari Tjutaku Aboriginal Corporation (ANTAC) traditional healers in South Australia <https://www.antac.org.au/> working alongside doctors and nurses at Lyell McEwin Hospital staff

<https://www.abc.net.au/news/2019-02-20/aboriginal-healers-treat-patients-alongside-doctors-and-nurses/10826666>

¹¹ <https://www.justicehealth.nsw.gov.au/publications/2015YPICHSReportwebreadyversion.PDF> at p 65

¹² *ibid*, at p 68

¹³ *ibid*, at p 69

In the YPICHs survey, 61.2% of Aboriginal young people in custody had experienced some form of racism in the previous 12 months.¹⁴ This racism was felt both in the community and in custody.

Beyond Blue has reported on the negative impact of racism on youth mental health.¹⁵

- Racism can have negative effects on young people's health, education and social life and these effects can be carried for many years into adulthood.
- Around one in three young Australian adults aged 18-24 years report experiencing racial discrimination because of their skin colour, ethnic origin or religion.
- Around one in four Aboriginal and Torres Strait Islander young people aged 15–24 years report experiencing discrimination because they were of Aboriginal and/or Torres Strait Islander origin.

The Australian Institute of Health and Welfare report, *Aboriginal and Torres Strait Islander Adolescent and Youth Health and Wellbeing 2018* found that while Aboriginal Australians have reported good health on a range of measures, “experiences of unfair treatment or racism, mental health, injuries and experiences of violence were areas of concern.”¹⁶ The Report found that in 2014–15, about 33% of young Indigenous Australians reported experiencing high to very high levels of psychological distress in the previous month. Unfair treatment and discrimination occurred in various settings including school, and the impact of discrimination and racism on mental health was clear.¹⁷ The Report found that for Indigenous people aged 10–24, mental health-related conditions (suicide and self-inflicted injuries, anxiety disorders, alcohol use disorders and depressive disorders) were the top 4 conditions contributing to their overall burden of disease.

The impacts of racism and discrimination continue to impact heavily into adulthood. Victoria Heath undertook a study to ascertain the level of racism and its impacts on the mental health of Aboriginal Australians in a number of LGAs.¹⁸ It found that people who experienced the most racism also recorded the most severe psychological distress scores. This suggests that every incident of racism that is prevented can help reduce the risk of a person developing mental illnesses such as anxiety or depression.

The survey also found that more than 70% worried at least a few times a month that their family and friends would be victims of racism. This demonstrates that the impact of racism spreads beyond the person directly targeted. The Survey also found that 79% of the sample avoided situations where they predicted that racism would take place, indicating that this (large group) did not feel safe to participate in activities that many other Australians might take for granted, with three out of ten people avoiding these situations often or very often. Significantly, the Survey found that coping strategies that Aboriginal people adopted, such as accepting racism or just putting up with it, were associated with higher levels of psychological distress.

As a result of issues raised in community forums in Bourke, a key focus area of the Maranguka Education Employment and Training Community Summit will be on building cultural competency, addressing issues of racism and discrimination, and instilling in young people a strong sense of identity and belonging.

¹⁴ <https://www.justicehealth.nsw.gov.au/publications/2015YPICHsReportwebreadyversion.PDF> at p 24

¹⁵ See *Beyond Blue* at <https://www.youthbeyondblue.com/footer/stats-and-facts>.

¹⁶ <https://www.aihw.gov.au/getmedia/b40149b6-d133-4f16-a1e8-5a98617b8488/ihw-202-aihw.pdf.aspx?inline=true>

¹⁷ <https://www.aihw.gov.au/getmedia/b40149b6-d133-4f16-a1e8-5a98617b8488/ihw-202-aihw.pdf.aspx?inline=true>

¹⁸ see Vic Health (Victoria) Report: <https://www.vichealth.vic.gov.au/search/mental-health-impacts-of-racial-discrimination-in-victorian-aboriginal-communities>

Putting the views of young people on mental health at the centre

As part of our practice in implementing justice reinvestment strategies and actions with communities, Just Reinvest NSW advocates that young people need to be at the centre of decision making around issues that directly affect them. Young people themselves are identifying mental health as a priority issue.¹⁹

The Commission notes that many costs of mental ill-health are intangible, such as stigma,²⁰ and acknowledges the “...significant stigma and discrimination around mental ill-health, particularly compared with physical illness.”²¹ It is our view that the Commission should engage directly with young people as strong advocates and experts around mental health, including those with lived experience of mental health issues.

There is a strong role for people with lived experience to assist to break down the stigma around mental health. Weave Youth and Community Service’s Youth Advocate Program is an excellent example of this working well.²²

A predictable and preventable path: Aboriginal people with mental and cognitive disabilities in the criminal justice system

(The Indigenous Australians with Mental Health Disorders and Cognitive Disability in the Criminal Justice System (IAMHDCD) Project)

We refer the Commission to the IAMHDCD research project that provides a comprehensive critical analysis of systems interactions and responses to the complex needs of Aboriginal people with disability in the criminal justice system, including Aboriginal people with mental health and co-morbidity issues.²³

We commend the Report, and refer the Commission to its findings and recommendations.

Just Reinvest NSW supports the overarching principles set out in the Report’s recommendations. That is, that the principles of:

- Self-determination
- Person-centred support
- Holistic and flexible approach
- Integrated services
- Culture, disability and gender-informed practice

which should underpin strategies for policy review, implementation and practice.

Just Reinvest NSW refers to and supports the implementation of the recommendations from that Report, some of which are included below. Implementation of these measures and practices will lower the avoidable incarceration of Aboriginal people with mental health issues.

¹⁹ In Mission Australia’s 2018 Annual Youth Survey, mental health was ranked the third highest rated issue of personal concern for young people. Over four in ten respondents indicated that they were either extremely or very concerned about coping with stress (43.1%). One third of young people were either extremely or very concerned about school or study problems (33.8%), while around three in ten were concerned about mental health (30.9%) and body image (30.4%). Between 2016 and 2018, the proportion of those indicating mental health as an important national issue has more than doubled: from 20.6% in 2016 to 43.0% this year <https://www.missionaustralia.com.au/publications/youth-survey>

²⁰ PC MH Inquiry Issues Paper at p 8 – referencing Knapp, McDaid and Curran 2003

²¹ PC MH Inquiry Issues Paper at p 1

²² See Weave Youth and Community Services at <https://www.weave.org.au/programs/youth-advocates/>

²³ See Baldry, E., McCausland, R., Dowse, L. and McEntyre, E. 2015 *A predictable and preventable path: Aboriginal people with mental and cognitive disabilities in the criminal justice system*. UNSW, Sydney at <https://www.mhdcd.unsw.edu.au>

- The principle of prison as last resort should apply to everyone and particular care must be taken to apply this principle to Aboriginal and Torres Strait Islander people with mental health/cognitive impairment and people considered unfit to plead under mental health legislation.
- Police Local Area Commands/Districts should be accountable for demonstrating community liaison and collaboration with Elders and other Aboriginal community members
- More resourcing should be provided to the Aboriginal Legal Service NSW/ACT and Legal Aid NSW to allow time to take adequate instructions and build relationships with a client to establish their background and any indication of mental or cognitive disability. We refer the Commission to the Productivity Commission's earlier report on Access to Justice arrangements that recommended a significant injection of funds into the sector, albeit for civil law services.²⁴ We also refer to the Australian Law Reform Commission *Pathways to Justice* Report that recommended a justice reinvestment approach to community-led, place-based initiatives.²⁵
- Diversionary programs that divert people out of the criminal justice system and into support, should be activated – noting that in many jurisdictions, diversionary programs are theoretically available but in reality do not exist because of poor understanding of diversions from Police and the Courts, insufficient funding of solicitors and program staff and appropriate training. We refer the inability of solicitors to divert people in NSW under the *Mental Health (Forensic Procedures) Act* because there are no professionals available to do reports in many areas, and in particularly in remote areas.
- We support the recommendation of the IAMHDCD Report that specialised disability case managers should be funded to work with solicitors to assist in making applications (such as s 32 in NSW) for diversionary programs or non-custodial sentencing options for Aboriginal and Torres Strait Islander people with mental and cognitive disability.
- We also support the IAMHDCD Report recommendation that diversionary programs that can address underlying causes of offending for Aboriginal and Torres Strait Islander people with mental and cognitive disability, including AOD dependency should be developed.
- We also support the IAMHDCD Report recommendation that the Expansion of diversionary options appropriate for Aboriginal and Torres Strait Islander people with mental disability, in particular specialise women's programs and greater options for people living in regional or remote areas are urgently required.

Just Reinvest NSW further supports the following IAMHDCD Report recommendations in relation to corrections:

- Screening tools, such as those available for mental health, for cognitive disability including for all people on remand as well as those being received on sentence.
- Aboriginal and Torres Strait islander people with cognitive impairment under mental health legislation must be accompanied by a justice plan that identifies pathways from high security to low security detention and to community and from the most restrictive to the least restrictive arrangement.
- Specialist long-term accommodation, wrap-around services and case management support should be provided post-release for Aboriginal and Torres Strait Islander people with mental and cognitive disability across the country.

²⁴ See Productivity Commission Report into Access to Justice Arrangements
<https://www.pc.gov.au/inquiries/completed/access-justice/report>

²⁵ See Australian Law Reform Commission, *Pathways to Justice—Inquiry into the Incarceration Rate of Aboriginal and Torres Strait Islander Peoples*, Final Report No 133 (2017) Recommendation 4.1 of the Inquiry at
https://www.alrc.gov.au/sites/default/files/pdfs/publications/final_report_133_amended1.pdf

Just Reinvest NSW supports the following actions from the IAMHDCD Report that relate to the delivery of human services for people with disability including mental health issues that will go some way to addressing the drivers of interactions in the criminal justice system.

- Aboriginal and Torres Strait Islander children with disability who are in out of home care must be provided with appropriate community and school based support to promote wellbeing and positive life pathways.
- Schools where there are enrolments of Aboriginal and Torres Strait Islander children with cognitive impairments should be linked with agencies to provide specialist behaviour interventions where those behaviours are assessed as of concern.
- Specialist Aboriginal and Torres Strait Islander violence interventions programs should be linked with disability supports in Aboriginal and Torres Strait Islander communities.
- Culturally appropriate, community-based holistic specialised mental health services about how to address a whole range of complex support needs should be available in all areas and communities with significant Aboriginal and Torres Strait Islander people.
- A range of appropriate supporting housing, depending on need, should be available in their communities for Aboriginal and Torres Strait Islander people with mental and cognitive disability and complex needs.
- Step down supported housing should be available for Aboriginal and Torres Strait Islander people with mental health disorders and cognitive disability leaving prisons.

Support for justice reinvestment initiatives

Finally, we reiterate that more resourcing and support should be provided directly to communities and to Aboriginal community-controlled organisations to advance justice reinvestment and community-led, place-based initiatives. These initiatives will then be enabled to generate place-based, community-led solutions that support trauma informed practice, combat racism and discrimination and address the mental health issues so commonly associated with higher interactions with the criminal justice system.

Contacting Just Reinvest NSW

We welcome the opportunity to provide further information to the Inquiry, including providing oral evidence should the Inquiry hold sittings. Our contact details are: Nicole Mekler or Jenny Lovric