

Crime prevention in residential services for people with disabilities

A discussion paper

Community Services Commission and
Intellectual Disability Rights Service

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The Community Services Commission is an independent State Government watchdog for consumers of community services. It is not part of the Department of Community Services. The Commission was established in 1994 with the aims of improving the culture, quality and reputation of community services in NSW. It does this by handling complaints; promoting local resolution of complaints; reviewing the circumstances of individuals in care; coordinating the Community Visitor Scheme; and undertaking inquiries into issues affecting community services. The Commission operates under the *Community Services (Complaints, Reviews and Monitoring) Act 1993*.

The Intellectual Disability Rights Service (IDRS) is a community legal centre in NSW working to advance the rights of people with intellectual disability. IDRS provides a free telephone legal advice service between 2pm and 5pm daily and a limited casework service for people with intellectual disability. It also develops and provides education and resources for people with intellectual disability; and engages in law and policy reform work where the rights of people with intellectual disability are affected.

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Executive Summary

Introduction

The discussion paper was prepared by the Community Services Commission and the Intellectual Disability Rights Service in response to concerns about abuse and crime victimisation of people with disabilities in residential services. The paper was prepared primarily by way of literature review, and draws on existing research in crime prevention and disability. It focuses primarily on people with an intellectual disability and on violence and abuses committed by staff and other residents.

The paper is intended to raise the issue for discussion and debate and to inform further work to refine, adapt and pilot crime prevention strategies in residential settings.

The provision of residential services

Data provided by ADD indicates that at 15 June 2000, there were 4,961 people in residential services provided or funded under the *Disability Services Act 1993*. Of these people, 47.5 per cent were residing in group homes; 46.8 per cent in large residential centres; and 5.6 per cent in hostels. The largest provider of residential services is the Department of Community Services, which provides 57 per cent of all services. People with an intellectual disability represent 86.2 per cent of all people with a disability in residential services.

Crime and abuse in residential settings

There is growing evidence that living in a formal care situation or using a disability specific service can increase the risk of crime victimisation for people with disabilities. Research indicates that the risks of crime victimisation differ across the range of residential settings, with the greatest risk being encountered in shared accommodation, including community residential units.

People with disabilities in residential services may be at particular risk of crimes such as sexual and physical assault, false imprisonment and theft. Research of abuse of people with disabilities highlights that most people with disabilities in residential settings are abused by other residents or by service providers.

Application of the theory and practice of criminology and crime prevention may enhance our understanding of, and capacity to respond to, the crime and

abuse experienced by people with disabilities within the environment of residential services. A crime prevention framework may assist through:

- providing a context within which acts of violence and abuse may be recognised as a crime against a person with a disability;
- ensuring a focus on how to reduce the risk of criminal acts occurring, rather than responding after the event;
- enabling disability services to draw on examples of effective crime prevention initiatives in other settings.

Factors that increase the risk of crime and abuse

Research and practice knowledge identifies three broad groups of factors that increase the risk of crimes within residential settings:

- *Features inherent in residential services themselves.* Such features include: overcrowding in the residence; low ratios of staff to residents, or poorly trained staff; lack of private space in the physical layout of the building; and lack of external accountability on the part of the service.
- *The circumstances associated with being in residential care.* For example, people in care are dependent on the service provider for their day-to-day needs and overall wellbeing; they may be isolated from supportive personal relationships; and/or they may have limited access to independent advocacy.
- *Characteristics and attributes of individuals in residential services.* For example, research indicates that people with intellectual disabilities may be more likely to have attributes that can be considered risk factors for crime victimisation, such as: vulnerability to offers of incentives or coercion; tendency to want to 'please' others, and/or act in compliance with requests or orders; and lack of knowledge about individual rights.

Crime prevention approaches and strategies

The literature reviewed identified four main categories of crime prevention approaches:

- *Law enforcement or criminal justice responses,* which incorporate traditional policing approaches, such as arrest and/or incarceration, to prevent repeat offending and act as a deterrent to other potential offenders. While not discounting the value of criminal justice responses, they are not a key focus. This is because a central concern is to address the circumstances which give rise to crime, which is not—and it is argued cannot be—a primary focus for law enforcement agencies.
- *Developmental or early intervention approaches,* which provide for intervention at critical times in an individual's social, physical and mental

development, in order to avert later offending. A developmental approach may, for example, focus on identifying and addressing challenging behaviour at an early stage, to prevent aggression escalating to the point where a criminal justice response is required. It could also incorporate the provision of staff training and development opportunities and instigation of mechanisms to ensure close monitoring of staff behaviour, in order to prevent offending by staff.

- *Situational or environmental approaches*, which focus on management or manipulation of the environment to reduce the opportunities for crime to occur. Strategies within this approach may, for example, include increasing the presence of supervisory staff at times known to be 'risk times' for crimes to occur; varying the service's routines to reduce opportunities for likely offenders and potential victims to be together; defining 'private areas' and spaces for socialising and minimising 'anonymous communal areas, such as stairways; and ensuring that the service has clear operational policies around issues such as roles and responsibilities of staff in relation to service activities and safety of consumers.
- *Community or social approaches*, which combine a range of approaches in order to reduce crime through strengthening communities, or changing communities to effect change in the behaviour of the people who live there. Such an approach might focus on strategies that address factors which impact on the risk of systemic abuse, particularly organisational factors, staff factors, level of consumer awareness and the extent of involvement of support organisations.

Crimes committed within residential settings are complex in nature and a range of factors influence the risk of crime. Therefore, the most strategic crime prevention programs are likely to be those that involve a range of approaches, carefully designed to match specific crimes and their contributing factors. The most effective crime prevention strategies appear to be those that have been based on a comprehensive analysis of the targeted crime problem, and developed to reflect local needs and characteristics.

Conclusion

The crime prevention literature provides a framework for a rigorous assessment of the nature of crime in a particular setting, and a systematic approach to developing relevant and holistic preventative programs, to enhance the risk management and quality improvement strategies which presently constitute the key responses to crime in residential disability services.

Progressing effective crime prevention within residential services will require the development of expertise and a body of knowledge specific to disability services. In this context, it is proposed that the most appropriate way to progress crime prevention within residential disability services would be to pilot a program that applies knowledge gained from crime prevention to residential services for people with a disability.

1. Introduction

1.1 Crime and disability in residential settings

Community attitudes, shortcomings in the broader community services system and systemic problems within the operation of residential services have been identified as contributing significantly to people with disabilities being both the victims and perpetrators of crime (Community Services Commission, 1999; NSW Legislative Council Standing Committee on Law and Justice, 1999). People with disabilities often experience discrimination and social marginalisation. They have generally more limited access to education and employment, and are thus more likely to experience poverty due to reliance on income support. In the service system, people with disabilities may face the disruption of multiple placements. As noted previously by the Commission:

.....if these factors are compounded by a lack of family or advocacy support and patterns of challenging or aberrant behaviour, such individuals are at high risk of contact with the criminal justice system (Community Services Commission, 1999, p. 15).

There is growing evidence that living in a formal care situation or using a disability specific service can increase the risk of crime victimisation for people with disabilities (Wilson 1990, 8). One Australian study conducted in 1996 identified over 20 types of abuse experienced by people with intellectual disabilities living in residential services. More than 260 incidents of actual abuse were reported by 130 survey respondents. These incidents included physical abuse (35 per cent of reported incidents); emotional/psychological/mental abuse (15 per cent); sexual abuse (14 per cent); failure to provide basic requirements (10 per cent); and abusive behaviour management (10 per cent) (Conway, et al 1996, 106).

Since its establishment in 1994, the Commission has encountered, and reported publicly on, findings of abuse and crimes committed against people with disabilities in a range of residential settings funded or provided under the NSW *Disability Services Act 1993* (DSA).

The work of the Commission shows that people with disabilities in residential services are at risk of crimes such as sexual and physical assault, false imprisonment and theft. The perpetrators of such offences can be either other residents or staff of the service (Community Services Commission: 1995, 1996, 1997, 1998a, 1998b; Audit Office of NSW & Community Services Commission 1997).

Similarly, the Intellectual Disability Rights Service has dealt with serious reports of abuse in care. In the 1999/2000 year, the Service received 19 calls for legal advice regarding abuse in care. 16 calls related to abuse by staff: seven were in regard to physical abuse; five to sexual abuse and 4 to financial abuse. Three calls related to abuse by residents, with two pertaining to physical abuse and one to sexual abuse.

In response to such issues, the Commission and IDRS resolved to undertake an initial exploration of approaches to crime prevention that could inform the development of effective strategies to prevent crimes against people with disabilities in residential settings.

This discussion paper draws on existing research in crime prevention and disability. It focuses largely on people with an intellectual disability, as this is the type of disability experienced by the majority of those living in residential services, and people with an intellectual disability are the subject of all the work of the IDRS and a significant amount of the Commission's work. Most of the issues raised and observations made are, however, likely to be relevant to people with other disabilities living in residential services. The paper focuses on adults and does not directly address specific issues relating to crime children with disabilities.

The Commission and IDRS acknowledge that property crimes; practices such as chemical or physical restraint and forced feeding; and cases of neglect and financial mismanagement can be criminal in nature and represent significant issues for people with disabilities in residential settings. However, the discussion paper focuses predominantly on crimes relating to violence and physical and sexual assault, and does not specifically address property crimes or practice issues. This reflects the finite capacity of the project and the focus of available primary research. Further exploration of these specific issues is clearly warranted.

The paper also concentrates largely on violence and abuses that are committed by those for whom the service has direct responsibility: staff and other residents.

1.2 Aims of the project

Although the abuse of people with disabilities in residential settings has been the subject of attention within the disability sector, there appears to have been no systematic attempt to apply the knowledge and discourse available from criminology to the analysis of crimes in residential care facilities (Hauritz, 1998). This may be in part due to the complexity around questions of whether all violence and abuse committed against people with disabilities is criminal in nature, particularly where the perpetrator is a person with an intellectual disability. Further, criminal behaviour—particularly violence and abuse—

within residential settings may be 'contained' within such settings, rather than being dealt with as criminal matters and referred to the criminal justice system.

Application of the theory and practice of criminology and crime prevention may enhance our understanding of, and capacity to respond to, the violence and abuse experienced by people with disabilities within the environment of residential services. A crime prevention framework may assist through:

- providing a context within which acts of violence and abuse may be recognised as a crime against a person with a disability;
- ensuring a focus on how to reduce the risk of criminal acts occurring, rather than responding after the event;
- enabling disability services to draw on examples of effective crime prevention initiatives in other settings.

The fact that people with disabilities are both the perpetrators and victims of crimes within residential settings means that residents should be considered as targets of crime prevention initiatives to minimise and reduce the likelihood of offending behaviour, as well as being considered the beneficiaries of crime prevention programs.

It is hoped that the discussion paper will be used to inform a later project which will refine, adapt and pilot crime prevention strategies in residential settings.

1.3 Scope and methodology

In its *Inquiry into Crime Prevention through Social Support*, the NSW Legislative Council's Standing Committee on Law and Justice clearly identifies the link between over-representation of people with intellectual disabilities in the criminal justice system and the failure of government agencies to respond to the challenge of providing support to these people. The Committee notes the difficulties faced by central funding agencies in providing sufficient funds for disability services; by human service agencies in providing adequate supports and safe environments; by criminal justice agencies in responding to the special needs of this group; and of criminal and human service agencies in ensuring effective coordination (1999, p165).

The Commission and IDRS acknowledge the fundamental importance of addressing these broad issues in order to enable people with disabilities to live with safety in residential services.

This discussion paper, however, focuses on the development of supports and safer environments through service level strategies. There is a particular emphasis on strategies that address environmental dynamics within residential settings as well as individual vulnerability or needs. however,

In the course of the project, it became apparent that there is a broader, discipline emerging around violence and prevention of violence. Violence prevention encompasses a broader range of actions and behaviours, including those that may not trigger a criminal justice response. These can include some forms of abuse of people with disabilities, such as emotional or psychological cruelty and neglect, which may not fall into the criminal domain (Chenoweth 1995). We note that key government and independent agencies involved in crime prevention include violence prevention initiatives and research within their brief, including the Crime Prevention Division of NSW Attorney-General's Department and the Australian Institute of Criminology. We have included violence prevention programs in our project.

This discussion paper was prepared primarily by way of a literature search, review and analysis. A particular focus of the literature search was for descriptions of crime prevention programs that had been empirically evaluated, as well as for more general literature on crime prevention and crimes against people with disabilities. We also conducted limited consultations with crime prevention practitioners and researchers, service providers, people with disabilities, and family members. The aim of the consultations was to obtain practice wisdom from the field, and to test the ideas and lessons learnt from the literature review. Details of the consultations are outlined in *Appendix 1*.

A project advisory committee was established to support the project. The committee met regularly to provide views on both the process of the project and content of the paper. Members of the advisory committee are listed at *Appendix 2*.

2. People with disabilities in residential settings

2.1 The provision of residential services

Primary responsibility for the funding and monitoring of residential services under the DSA rests with the NSW Ageing and Disability Department (ADD). These residential or supported accommodation services include large residential centres, group homes, supported accommodation with part-time support, and facility based respite care services.

Data provided by ADD indicates that at 15 June 2000, there were 4,961 people in residential services provided or funded under the DSA. Of these people, 2,360 (47.5 per cent) were residing in group homes and 2,322 (46.8 per cent) in large residential centres. A further 279 (5.6 per cent) were residing in hostels, which generally provide care for between 10 and 20 people with disabilities¹. The largest provider of residential services is the Department of Community Services, which provides 57 per cent of all services. The remainder of services are provided by a range of non-government agencies of varying sizes. The largest group of people with disabilities using residential services are people with an intellectual disability, who represent 86.2 per cent of all people with a disability in residential services².

People with disabilities in residential settings depend on the service not only for their physical accommodation, but also for the support services they require for the activities of daily living. These support services can include assistance with meals and physical care; support for community access and recreation; management of medication, health care, and finances; assistance with development of independent living skills; and assistance with—and sometimes regulation of—contact with people outside of the residential setting, including family members and advocates.

The exact nature and range of supports provided varies according to the type of residential service. For example, in large residential services, rostered staffing—primarily nursing staff—is generally provided on a 24 hour basis, and other staff are employed for ancillary services such as meal preparation, domestic services, laundry and building and ground maintenance. Residents generally spend their entire day with the same group of people, attending day programs on-site. Support services encompass all aspects of the person's life. In contrast, group homes may be staffed with sleepover staff overnight, with the majority of supports being provided by disability workers. In these

¹ Data Analysis Unit, Ageing and Disability Department. Data provided to the Commission in July 2000

² Data Analysis Unit, Ageing and Disability Department. Data provided to the Commission in July 2000

settings, residents may leave the house during the day to attend employment, training or day programs that may be run by different agencies. Other supported accommodation settings include those where people with disabilities receive part-time support for specific tasks, or those where a person without a disability who is not a staff member shares the accommodation.

2.2 Current approaches to protecting people with disabilities in care

In recent years, government has introduced a number of initiatives in response to the risks to personal safety faced by people with disabilities in residential settings. In NSW, as in other jurisdictions, disability services are provided within a legislative and policy framework designed to protect the rights of people with disabilities and regulate the provision of disability services. The components of this framework include the DSA standards; guardianship legislation and the existence of a statutory guardianship body; an external complaints body; and a Community Visitors scheme. However, the existence of legislative protections, regulatory and review bodies and monitoring mechanisms has not proved to be sufficient to prevent abuses and crimes against people with disabilities in residential settings (Hauritz, 1998:201).

To date, most approaches to dealing with the issue of abuse of, and crimes against, people with disabilities in residential settings have focused on risk management and quality improvement strategies. Specific strategies include staff training, administrative reforms around screening and recruitment of staff, policies and procedures for the reporting of and response to allegations and incidents of abuse, and education of consumers about protective behaviour and rights (Sobsey & Mansell, 1990; McCarthy & Thompson 1996; Roeher Institute, 1992).

Recent initiatives in NSW have included:

- The introduction of the *Standards in Action* Manual, which translates the DSA standards into policy and practice guidelines for disability services. *Standards in Action* includes minimum and enhanced practice requirements in relation to the management of abuse, injury and neglect (10.6). (ADD, 1998).
- The publication of *Preventing violence in the accommodation services of the social and community services industry* manual (joint initiative of the NSW Department of Community Services and Workcover Authority, 1996)
- Establishment of baseline requirements for disability services following the recommendation of the *Performance Audit of Large Residential Centres* (Audit Office of NSW & Community Services Commission, 1997). These requirements represent the minimum practices to protect safety and human and legal rights of residents and address issues such as

management of critical incidents, behaviour management and safety (*Standards in Action* Ageing and Disability Department, 1998)

- Introduction of the Supported Accommodation Risk Assessment (SARA) tool designed to regularly screen potential risks in supported accommodation services provided by the Department of Community Services (DoCS 1999)
- Conduct of a training program for disability service staff, 'Standard 10' training, on sexuality and the prevention of sexual abuse in disability services. The program, developed by the Family Planning Association, focused on assisting disability service staff to meet the requirements of standard 10 of the Disability Service Standards, to "*ensure that agencies identify and meet their duty of care to service users, while recognising service users' rights to make informed choices and to take calculated risks*" (ADD, 1996 - 1998).

The Ageing and Disability department informed the Commission and IDRS that it has developed a more detailed draft policy and guidelines on prevention and response to abuse and assault in funded services. At the time of completion of this discussion paper, the draft had not been released and was thus not included in the literature for this project. ADD, however, advised that the draft policy and guidelines have been developed to provide a framework for:

- the prevention of abuse and assault and to minimise the severity of any incidents;
- appropriate, timely and co-ordinated responses by mainstream and specialist disability services; and
- follow up and evaluation (to ensure response plans are implemented and to inform future practices).

ADD indicated its intention for the draft policy and guidelines to be tested in small area pilots along with strategies and resources to support their effective implementation and to promote positive outcomes.

There are very few studies of programs designed specifically to reduce abuse of people with disabilities in institutions, and even fewer evaluations of programs (Homel, R. in publication; and M. James, in consultation).

3. Crimes and abuse against people with disabilities

3.1 Violence and abuse against people with disabilities

Although there have been many reports of reviews, investigations and inquiries highlighting the problem of violence against and abuse of people with disabilities, gaining accurate data about the extent of violence and abuse remains notoriously difficult (Sobsey, 1994; Chenoweth 1995; Carmody, 1990; Department of Prime Minister and Cabinet, 1993; Conway et al, 1996). The problem is partly due to inconsistent definitions and divergent approaches to methodology and sampling in different studies, and issues associated with the reporting of violence, abuse and other crimes.

Even where the focus is on the incidence of defined crimes, it remains difficult to obtain accurate statistics about crimes against people with disabilities, as police and court records do not document whether the victim has a disability (Carmody,1990:11). Further, crimes against people with disabilities are likely to be significantly under-reported to the authorities. Reasons for this include:

- the hidden nature of many crimes against people with disabilities;
- the lack of recognition by people with disabilities themselves and those around them when crimes are committed against them;
- the inability of people with disabilities to report crimes on their own behalf;
- disguising criminal acts through the use of euphemisms or therapeutic justifications;
- decisions by service agencies or departments to deal with criminal acts through other processes such as disciplinary or grievance procedures.

(Chenoweth 1995; Hauritz, 1998; Sundram, 1984).

People with a disability who were consulted in the course of this project noted that police often failed to act on crimes committed by co-residents, due to issues related to lack of alternative accommodation options for the offender. They also described how property crimes against people with disabilities were less likely to be identified as crimes for reasons of poor staff supervision, and that crimes were often regarded as elements of 'challenging behaviour' rather than criminal acts.

Those consulted also raised issues with poor access to complaints processes, including management not taking complaints seriously, lack of access to external complaints mechanisms and lack of access to independent advocates to assist in making complaints. Issues with the legal system itself were also identified. Informants believed that the legal system failed to provide adequate supports to people with disabilities who reported crimes or were

witness to crime. Further, magistrates and police were perceived as having stereotyped and discriminatory attitudes towards people with disabilities.

There have been a number of research studies that have attempted to estimate or extrapolate the incidence of crimes against people with disabilities. Much of the research has focused on sexual assault and abuse, with some studies estimating that almost 80 per cent of people with disabilities experience sexual abuse (Sobsey, 1994: 71-73). Other research has indicated that children with disabilities are highly likely to be sexually abused before turning 18: Up to 68 per cent of girls and 30 per cent of boys (The Roeher Institute, 1992:25).

Australian research findings are consistent with international studies. In Victoria, a number of disability agencies monitored all cases of alleged crime against people with an intellectual disability during a snapshot period. Physical and sexual offences were the two most frequently recorded crimes, with 130 of the 144 alleged crimes involving a sexual offence (Johnson, Andrew and Topp, 1988, cited in Carmody, 1990). Another study compared crime victimisation rates of people with disabilities to that of the general population and found that assaults against people with disabilities were three times the rate in the general population. People with disabilities were also one and a half times more likely to be victims of household/property crimes, including break and enter and property theft, than the general population (Wilson, 1990).

Despite limitations in data, the range of studies and estimates:

..... 'provide a forceful argument that people with disabilities face a higher risk of abuse and violence and are more likely to be abused or have been the victims of violence' (Chenoweth, 1995: 37).

3.2 Violence and abuse within service settings

Living in a formal care situation or using a disability specific service can pose a significant safety risk for people with disabilities. Importantly, the risks of crime victimisation differ across the range of residential settings:

Living arrangements can be ranked in terms of risk for crime victimisation, the least risky environment being the family home, with the greatest risk in shared accommodation, including community residential units. (Wilson, 1990:8)

This evidence is consistent with ABS crime survey results that found that victimisation rates for the general population were greatest for those respondents living in residential settings of some type. These included boarding schools, boarding houses and hostels (Wilson, 1990).

Other research highlights a number of important observations about the criminal victimisation of people with disabilities in formal service settings.

Examples of this research are at *Appendix 3*. The key observations include that:

- the perpetrator is known to the victim in nearly all cases;
- perpetrators can be other residents or staff of the service;
- victims can experience multiple episodes of abuse, particularly from perpetrators who are not other people with disabilities, including staff or volunteers;
- the risk of criminal victimisation varies according to the type of residential facility and residents, and the extent to which the facility takes steps to protect consumers.

Research of abuse of people with disabilities highlights that most people with disabilities are abused by other residents or by service providers (McCarthy and Thompson, 1996; Sobsey and Doe, 1991; Brown and Stein, 1997).

These observations are consistent with the findings and experiences of both the Commission and IDRS in matters relating to violence or crimes committed against people with disabilities in residential settings. For example, from the Commission's publicly reported Inquiries:

- In the performance audit of large residential centres, the Commission and the Audit Office found that residents in institutions were at high risk of injury, particularly as a result of resident-to-resident assault. In one institution, this form of assault accounted for 44 per cent of all injuries. This figure may be an under-estimation, given that the cause of an additional 26 per cent of injuries was unknown. Injuries sustained by residents in this institution included burns and scalds and fractures, and 38 per cent were classed as 'serious' (Audit Office of NSW and Community Services Commission, 1997:39).
- An inquiry into an institution for children with disabilities found a 'disturbing' level of resident-to-resident physical and sexual assaults, staff to resident assaults and resident to staff assaults (Community Services Commission, 1997).
- In a statewide survey of respite services, 52 per cent of residents with challenging behaviour who were residing in respite facilities on a long term basis were reported to have assaulted other residents. One quarter of these people had been physically restrained at least once, but in over half these cases there was no lawful consent (Community Services Commission, 1998b: 100).

These examples do not include group homes, as the Commission has not publicly released its work in this area. Group homes have been the subject of both reviews and complaint inquiries, and have identified serious incidents of abuse and assault. The NSW Audit Office identified assaultive behaviour as

an issue in eight of 13 group homes visited in the conduct of its performance audit of group homes for people with disabilities in NSW (Audit Office of NSW 2000, 30).

The Commission's work has also indicated that where assaults occur, there is a significant risk that it will involve sustained and multiple episodes of violence and crime (Audit Office and Community Services Commission, 1997: 42).

The above examples are predominantly about resident-to-resident assault or abuse. However, staff may also perpetrate abuse. As noted by Conway et al (1996),

"...the power and control staff exercise over clients and residents places them in a position where abuse can occur, either through deliberate, intentional actions or through failure to act, assist or intervene".

People with intellectual disabilities interviewed for the study described a range of crimes perpetrated by staff, including:

- abuse, incorporating verbal abuse, hitting, tying-up and locking residents in rooms. One participant related being dunked in a pool for 'misbehaving';
- forced feeding; and
- denial of food as a control mechanism.

As noted previously, of 19 calls received by IDRS in 1999/2000 requesting legal advice about abuse in care, 16 concerned alleged abuse by staff. Commission investigations have identified mistreatment of clients by staff in large residential facilities, primarily through physical and verbal abuse, neglect, failure to protect residents and wrongful imprisonment³. The Lachlan Report, for example, identified unlawful assault of residents in the form of physical force used by staff to place residents in exclusionary 'time-out' rooms (Community Services Commission, 1995).

These findings reinforce the importance of developing and implementing prevention strategies that specifically target crimes within residential settings.

³ For example, Community Services Commission (1998) *The Lachlan Inquiry*; (1996) *Peat Island*, (1996) *Who Cares?* (1997) *The Performance Audit into Large Residential Centres for People with a Disability in NSW*; (1997) *Suffer the Children*

4 Factors that increase the risk of crime and abuse within residential services

Research and practice knowledge identifies three broad groups of factors that increase the risk of crimes within residential settings:

- Features inherent in residential services themselves;
- the circumstances associated with being in residential care; and
- characteristics and attributes of individuals in residential services.

Understanding the risk factors is critical to the development of effective crime prevention strategies.

4.1 Features of residential services

The way in which some residential services are designed, organised, and managed can increase the risks that consumers will be subject to crimes or will commit crimes against other consumers. The variables within residential services that can have significant impact on the risk and incidence of crime include aspects of service culture; staffing profiles and patterns; staff roles and responsibilities; and the physical environment.

Service providers, families and residents interviewed for the study were asked about the features of residential settings that they considered to be conducive to crime. The issues raised referred mainly to group home or drop-in support settings, but are also likely to be applicable to large residences. They include:

- overcrowding
- the mix of residents in particular households, with people having little choice in housemates and being placed with others they may not particularly like;
- other residents exhibiting disturbing behaviour, particularly where there is a lack of personal space;
- limited ability for residents with restricted mobility to leave the residence;
- staff approaches which focus on 'managing' residents, including attempts to curb challenging behaviour through techniques such as confinement.

The Commission's work has identified further features of residential services that may act to increase the risk of crime:

- Impediments to ensuring that all staff have the necessary level of skill and integrity, including generally low rates of pay; limited career options; small recruitment pools; and lack of capacity to meet staff supervision and training needs;

- staff roles and arrangements that focus on managing and supervising residents rather than facilitating their developmental and lifestyle opportunities;
- low ratios of staff to residents, resulting in limited capacity of staff to work proactively and developmentally with residents, and reducing the capacity to provide adequate levels of supervision;
- isolation of staff from other staff members and from management, resulting in limited supervision and support;
- the mix of residents, particularly where there are a number of residents with challenging behaviour together, or where a person with high risk behaviour is placed with others who are less able to defend themselves;
- the physical layout of the residence, that may not allow enough private space for residents and/or does not allow staff to easily monitor the activities and safety of residents;
- absence of policies and management systems for the prevention and detection of crimes by staff against clients;
- high levels of casual and untrained staff working within residential services, and the absence of probity screening procedures;
- absence of rigorously applied procedures for recording of and responding to allegations of abuse or crime victimisation of residents by staff or other residents;
- failure to adequately address the challenging behaviour of people with disabilities;
- failure to provide timely intervention to assist people deal with and resolve issues such as any abuse they may have experienced.

(Audit Office and Community Services Commission, 1997; Community Services Commission, 1997, 1998a, 1999, and unpublished reports of complaint investigations and reviews of individuals in care).

Other researchers have identified the following characteristics of residential services that can contribute to the risk of crimes being committed against people with disabilities:

- extreme power inequities between staff and clients;
- high physical and emotional pressures on staff providing direct care;
- culture that attempts to cover-up or rationalise any incidents of violence or criminal behaviour;
- procedures that allow incidents of violence or crime to be treated 'in-house' using complaints or disciplinary processes;
- absence of external accountability, for individual clients or the service as a whole (Sobsey, 1994:89-93; Chenoweth).

Organisational features that increase the risk of crime and violence are not unique to residential services. A study of violence within psychiatric hospitals found that social organisation and staff behaviour were linked to differing levels of violence from ward to ward (Homel, R. in publication). Similarly, violence in prisons has been found to be related to poor prison

management and control, inexperienced staff, lack of discipline and morale amongst prison officers and a lack of grievance and dispute resolution processes. Over-crowding is another contributing factor (Homel, R., in publication).

There appears to be little empirical research on how different risk factors within residential services contribute to the incidence or nature of crimes against people with disabilities nor on how combinations of risk factors impact on rates of crime victimisation.

Institutions and large residential centres face a range of fundamental difficulties arising from accommodating a large number of people with a diverse mix of needs. These difficulties may result in, or contribute to, risk factors of crime victimisation. Institutions and large residential centres are more likely than other settings to:

- be overcrowded;
- lack private space for individual residents;
- have a limited capacity to easily monitor the safety of residents, particularly at times of busy activity and low staff numbers.

In contrast, group homes are more likely to be faced with risk factors such as lack of staff back-up, including at times of crisis, and staff being physically isolated from management and receiving limited supervision.

Many of the risk factors associated with residential services are, however, not unique to either large residential centres or group homes, but are dependent on an interaction of factors. For example, the location and living arrangements of people with disabilities can also impact on rates of crime victimisation. A study by Wilson and Brewer (1992) found that people with disabilities who had higher support needs and were living with other people with disabilities experienced higher rates of assault than people with disabilities with lower support needs. They attribute this to the fact that those with high support needs tend to be placed together, creating greater opportunity for assault by one person with a disability against another. In contrast, people with lower support needs living in less supervised residential settings experienced higher rates of property crime than the general population (Nettlebeck and Wilson 1996, 11-12).

In this context, it is useful to consider the model proposed by Morath, which aims to predict the occurrence of abuse, violence and neglect of people with disabilities within formal service settings (1997). The model identifies four main determinants that interact to either inhibit or promote abuse:

- organisational factors, such as governance, management practices and value base;
- staff factors, such as ratios, attitudes, knowledge and skills;
- level of consumer awareness and sophistication; and

- extent of involvement of support organisations and related organisations.

Morath notes that individual service providers will perform differently on each of these determinants, and suggests that it is the interaction between two or more of the determinants that leads to the conditions that can increase or decrease the risk to people with disabilities. This model helps to explicitly identify the components that together form the nature of the service. It can assist in predicting the relative risk for particular services, based on the strength of service performance in each of the four determinants.

For example, where a service has poor management together with low levels of consumer awareness about their rights, these conditions may combine to allow for abuse or violence to occur. In contrast, a strongly performing determinant can help counteract the effect of a poorly performing determinant. For example, low consumer awareness and lack of capacity to respond to poor service practices could be countered by a high level of involvement of an advocate from a support organisation.

Morath suggests that this model can be used to targeting prevention strategies, as well as identify the nature of risks (1997).

Understanding the differential rates of crime victimisation for different types of residential settings is important to ensure appropriate targeting and development of crime prevention strategies.

4.2 Circumstances of being in care

In addition to the nature of residential care itself, the circumstances of being in care also contribute to the risks of crime victimisation. For many people with disabilities, living in a residential setting increases their vulnerability to violence and crime because their circumstances can contribute to:

- physical, social or emotional dependence on the service provider for their day-to-day care and overall wellbeing;
- their needs and interests becoming secondary to other, competing, interests within the service;
- isolation from supportive personal relationships;
- limited access to independent advocacy;
- inability or reluctance to express their views or assert their rights.

Some situations can increase the risk of particular individuals becoming the victims of crime in particular circumstances. These situations are generally where:

- there is low level of security;
- there is limited protection of the 'target';
- there is limited control over the visibility of the offending behaviour;
- there is limited danger to the perpetrator in committing the offence;

- the potential perpetrator perceives there is little likelihood of police intervention or other sanctions if caught (Nettlebeck and Wilson, 1996 17-18)

The circumstances of being in residential care potentially provide the conditions for these risk factors. People with disabilities in residential settings are removed from those who might otherwise protect them from crime, such as family members. They provide 'easy targets' for potential offenders, both physically and in terms of the lower likelihood or ability to report crimes committed against them.

The constant and close presence of potential offenders is one of the most critical elements of living in a residential service setting that contributes to crime victimisation. One American study, for example, found that almost half the perpetrators of sexual abuse of people with disabilities had access to the victim through specialist disability services (Sobsey, 1994:75).

Crime prevention strategies would need to address as many of these factors as possible, in order to reduce the conditions favourable to victimising people with disabilities in particular residential settings.

4.3 Personal characteristics and attributes

In addition to understanding risk factors related to the particular features of residential settings and the circumstances of being in care, it is important to be aware of particular personal attributes or characteristics that may contribute to a higher risk of individuals becoming victims or perpetrators of crime or abuse.

4.3.1 Potential victims

The literature reviewed by the project focused largely on risk factors that increase the vulnerability of people with disabilities to sexual abuse (Roehrer Institute, 1992; Dept for Women 1995; Hayes, 1993). These factors have been identified as including:

- emotional deprivation;
- vulnerability to offers of incentives or coercion;
- tendency to want to 'please' others, and/or act in compliance with requests or orders;
- feelings of helplessness and powerlessness;
- ignorance of what is happening, and lack of knowledge about their rights;

These attributes also leave people with disabilities vulnerable to other types of abuse.

Vulnerability to criminal victimisation may also be exacerbated by other attributes or behaviours. One study by Wilson et al (1996) noted that people

with an intellectual disability who were the victims of assault were actively confrontative and tended to respond to difficult situations in a way that escalated the situation. The study found that physical assault was the main offence committed against those people with an intellectual disability in the study sample (Wilson et al, 1996:5).

The same attributes that increase the vulnerability of people with disabilities to crime victimisation also restrict their capacity to report the crime and to pursue redress through criminal or civil law. In many respects, people with disabilities make 'ideal' victims for offenders, as they are unlikely to resist or report offences, and are perceived as being powerless (Homel, R. in publication).

Even where crimes are reported, there are considerable barriers to a suspect being charged or prosecuted. An IDRS study noted that women with intellectual disabilities have less chance of being believed when reporting sexual assault or abuse than women without disabilities, and that police may be reluctant to prosecute when the case involves a person with an intellectual disability due to assumptions that their evidence will not stand up in court (IDRS, 2000, 10). The study revealed a tendency for police to ascribe to common myths that the complainants story lacked credibility and that women who have an intellectual disability are promiscuous (IDRS, 2000, 18).

4.3.2 Potential offenders

There is a significant body of work that attempts to identify and measure the influence of personal characteristics, personal social circumstances and broad societal factors that increase the risk of an individual developing criminal behaviours (National Crime Prevention 1999). Risk factors identified include those associated with biological traits, characteristics and circumstances of the family, stressful life events and transitions, and socio-economic and cultural factors. However, much of the research on identifying risk factors and evaluating intervention programs has focused on early childhood and there has been little attention to risk and protective factors for specific subgroups, such as people with disabilities (National Crime Prevention, 1999).

Hudson et al note that the risk factors for developing sexually offending behaviour in people with an intellectual disability are the same as those for the general population, although the impact of some risk factors may affect people with intellectual disabilities in a different way (1998: 44).

The NSW Law Reform Commission notes that factors such as having a background of abuse, discrimination, lack of education and isolation from peers may exacerbate the susceptibility of people with an intellectual disability to exploitation and to learning inappropriate behaviour and thus, to offending. The Law Reform Commission also indicates that pressures likely

to be experienced by people with an intellectual disability, such as poverty, unemployment or underemployment, sub standard accommodation, social rejection and alcohol abuse, were also linked to increased potential of contact with the criminal justice system (1992:18).

Further risk factors identified include:

- a desire for recognition and status;
- a yearning for acceptance and belonging – an unmet need for meaningful relationships;
- low self-esteem
- poor social skills and inability to deal with problems; and
- restricted social network and lack of family support

(NSW Law Reform Commission 1992:20, quoting the inter-Departmental Committee on Intellectually Handicapped Adult Offenders, 1985).

5. Crime prevention approaches and strategies

The literature reviewed identified four main categories of crime prevention approaches (National Crime Prevention, 1999; NSW Legislative Council Standing Committee on Law and Justice, 1999). These are:

- *law enforcement or criminal justice* responses, which incorporate traditional policing approaches, such as arrest and/or incarceration, to prevent repeat offending and act as a deterrent to other potential offenders;
- *developmental or early intervention* approaches, which provide for intervention at critical times in an individual's social, physical and mental development, in order to avert later offending;
- *situational or environmental* approaches, which focus on management or manipulation of the environment to reduce the opportunities for crime to occur; and
- *community or social* approaches, which combine a range of approaches in order to reduce crime through strengthening communities, or changing communities to effect change in the behaviour of the people who live there (Tonry and Farrington, 1995: 9).

Each of these approaches and their application is discussed in more detail below. While not discounting the value of criminal justice responses, the discussion focuses on crime prevention approaches that can be classified within the latter three of the above categories. This is because a central concern is to address the circumstances which give rise to crime, which is not—and it is argued cannot be—a primary focus for law enforcement agencies (Fattah: 4).

Crime prevention strategies developed within the classifications of developmental, situational, or community models will reflect the different theories about causes of crime and assumptions about how to prevent or reduce crime. Determination of which model is most appropriate reflects a judgement about the relative importance of each of the contributing factors in causing criminal behaviour, and about the relative effectiveness of different points of intervention (Sutton & Hazlehurst 1996: 433-434).

As with any classification system however, there is some blurring and overlap of the boundaries between the three models or approaches, and some crime prevention programs encompass strategies drawn from two or more of these classifications. Indeed, as no single theory of crime is likely to be comprehensive enough to account for all the factors that contribute to crime, it is also highly unlikely that any prevention programs or strategies based on a single model will be effective in preventing crime. As discussed later, the most effective programs have incorporated strategies that reflect at least two of the four major approaches to crime prevention.

5.1 Criminal justice responses

Some aspects of a criminal justice response may be important as an adjunct to, or a component of, a broader prevention program. In particular, promotion and application of criminal justice responses will have some impact on the normative context and on shaping the values and behaviours of people and may well prevent some crimes through a general deterrence effect. As noted by Tonry and Farrington (1995):

...no reasonable or informed person can doubt that some potential offenders are deterred by fear of sanctions or that some crimes are prevented by confining some offenders or otherwise controlling their movements or activities. (1995, 36).

A deterrence effect created by the fear of criminal sanctions may be particularly important in residential services in relation to staff. Strategies applicable to residential settings would include ensuring measures exist to monitor staff interaction with residents and fostering a culture and values where abuses are readily identified, reported and responded to. In order to be effective, however, such strategies must be applied in the context of appropriate and timely responses from external agencies, particularly Police (IDRS, 2000).

A criminal justice response may be less effective in preventing crimes perpetrated by residents. It is often the environment in which people with disabilities live which exacerbates or fails to prevent behaviour that could constitute a crime against another person. In the absence of addressing underlying issues which may have led to unacceptable behaviour and its damaging consequences, a criminal justice approach is unlikely to lead to substantial reduction of crime.

5.2 Developmental or early intervention prevention

5.2.1 Overview of developmental crime prevention approaches

Developmental crime prevention programs and strategies are based on interventions that are designed to prevent the development of criminal behaviour in individuals. These approaches use a concept of pathways and key transition points in a person's life. The theory is that at any of these transition points, circumstances may lead the person to develop behaviour that brings them into contact with the criminal justice system. The key to developmental crime prevention is therefore to intervene early in the pathway and at key life stages to prevent the development of offending behaviour (National Crime Prevention, 1999: 8-9).

A developmental approach to crime prevention conjectures that:

- There are identifiable pathways or routes for behaviours, and these can be used to anticipate the likelihood of criminal potential. Understanding these pathways is also important when trying to understand the history of specific offenders.
- Throughout the lifespan of an individual there are transition points where people are at higher risk of moving onto a harmful path, but also where preventive intervention may be more effective.
- There are clusters of personal and contextual factors that lead to and sustain patterns of behaviour (both acceptable and unacceptable). Understanding and identifying these factors provide leads for intervention.
- The impact of risk factors can be mediated by identifying and strengthening factors that can protect a person's resilience in risky situations (National Crime Prevention, 1999:13).

In this context, early intervention is distinguished from 'early childhood intervention' as the focus is intervening early in the pathway to developing criminal behaviour. Although recognized that it is easier and more effective to intervene early in life, early pathways intervention can also occur later in life, for example to respond to a new risk behaviour or situation. Despite this, developmental prevention programs that have been subject to empirical evaluation have been those that target children from infancy to primary school age (National Crime Prevention, 1999).

The examples below illustrate how developmental approaches have been applied in different environments.

Theories about the role of risk factors in individuals alone are, however, unlikely to provide a useful basis for the development of effective crime prevention strategies. Tonry and Farrington suggest that in addition to development of risk or protective factors, there is a need to understand the interaction between individuals and environments and the group and community contexts that provide opportunity and desire to offend (1995: 11). Fattah notes the inadequacies of biological and psychological approaches to crime causation and highlights the need for structural, environmental and situational explanations of criminality (1993: 32).

Examples of developmental prevention programs:

The *Montreal Prevention Project* targeted boys who were identified by preschool teachers as being disruptive. The project aimed to reduce disruptive behaviour of the young boys to achieve long-term improvement in their social and academic competence.

The program involved two years of intervention when the boys were aged 7, until they were about 9 years old. Intervention was aimed at teaching social skills and coping strategies for the boys. Training covered topics such as 'how to make contact' and 'how to help' as well as coping topics such as 'how to react to teasing' and 'what to do when I'm angry'. Methods of training included small group discussions, role-playing, coaching and rewards. At the same time, parents were trained to enable them to effectively monitor their child's behaviour, use discipline effectively and provide rewards for prosocial behaviour.

Follow-up on outcomes was conducted at completion of the program, and annually for the subsequent two years. Evaluations showed that boys who had participated in the program were significantly less likely to engage in bullying and fighting (both self-reported and teacher rated measures) and less likely to be involved in other delinquent behaviour (theft, burglary or alcohol abuse).

from National Crime Prevention (1999: 154) and Grabosky and James (1995: 38-39)

Parent training programs provided by the *Oregon Social Learning Centre* are based on the understanding that aggression in children can be fostered by failure of parents to use effective child-rearing and communication techniques. Programs targeted parents of pre-adolescent children who had been identified as anti-social, high rate social aggressors. Programs focused on the parent-child relationship and teaching parents to use positive, non-coercive methods of discipline and to deal consistently and decisively with anti-social behaviour. Specific strategies included teaching parents to monitor behaviour over long periods, clarify communication rules and expectations, clearly link rewards and punishment to behaviour and to negotiate acceptable standards of behaviour. Problem solving and conflict resolution skills were also addressed.

From National Crime Prevention (1999: 154-155) and Grabosky and James (1995: 36-37)

5.2.2 Applying developmental crime prevention approaches

In the context of preventing crimes committed against people with disabilities in care, a developmental or early intervention approach would focus on identifying factors and indicators that may be a precursor to offending behaviour, and on strengthening those attributes that protect people against the development of offending behaviour. It also suggests that equal attention needs to be given to training and supporting staff to respond to early indicators of offending behaviour in a consistent and productive way. This approach is not new to the disability sector. For example, Byrnes (1997) reported that resident-to-resident violence is generally the culmination of previous challenging behaviour that had not been adequately addressed. A developmental approach to crime prevention would focus on identifying and addressing challenging behaviour at an early stage, to prevent aggression escalating to the stage of requiring a criminal response.

Another important prevention strategy suggested by a developmental approach is to provide specific support around key transition points in the life of a person with a disability, particularly those people demonstrating risk indicators. These transition points may include when a person moves into or out of a residential setting, when there is a change of household members or regular activities, or when new staff are introduced to the residents.

Similarly, there is some potential for early pathways intervention for staff that demonstrate risk indicators for offending behaviour. This would involve screening and early identification of risk indicators in potential and existing staff, and rigorous responses to risk indicators. Some of the key elements of developmental prevention programs are also relevant to preventing crimes by staff. For instance, strategies could include clearly communicated expectations of staff behaviour; clearly articulated rules and policies about actions which would be regarded as criminal; staff training and development; close monitoring of staff behaviour; and prompt and unambiguous sanctions for breaches.

Developmental prevention and potential victims

A significant amount of literature and much practice relating to prevention of abuse, particularly sexual abuse, of people with disabilities has focused on education programs and protective behaviours. This is a logical response, given that one of the factors identified as contributing to abuse of people with disabilities is their lack of knowledge and understanding of their rights and what constitutes abuse.

A number of studies have confirmed the low level of knowledge amongst people with intellectual disabilities about fundamental sexuality issues and sexual rights. One study found that compared to people without disabilities, people with an intellectual disability are less likely to understand key terms describing types of sexual assault including 'incest' and 'rape, and to know what to do if they encountered situations of unwanted touching. They were also more likely to believe that someone other than themselves should decide if they should have sex (McCabe et al,1994). Another study examined records of allegations of sexual abuse of adults with intellectual disability by other service consumers. The study found that the majority of victims had no communication or mobility restrictions, and concluded that "*the majority of the victims were quite capable of reporting sexual abuse if they recognised it as such*" (Furey and Neisen, 1994: 293). They attribute the low reporting rate to lack of knowledge about sexual abuse, and recommend programs to ensure that people with an intellectual disability are able to identify sexual abuse and action they should take.

Educative prevention programs tend to focus on informing people with disabilities about sexual and other abuse, personal safety training,

assertiveness and sex education. Protective behaviours training programs reflect a developmental or early pathways intervention approach to crime prevention, by focussing on changing the personal characteristics that place people at risk of criminal victimisation.⁴

In NSW, there have been several projects aimed at increasing the awareness of women with disabilities about abuse and assault, provide them with information about where to get assistance, and increase their ability to defend themselves. These include:

- the development of information resources for women with disabilities as part of the Partnerships Against Domestic Violence initiative⁵;
- a program in South-West Sydney for women with disabilities that consisted of workshops on self-defence and protective behaviours and the distribution of personal alarms to participants⁶; and
- the development of an information package for women with intellectual disabilities on abuse and violence and where to get help in the Central West Region⁷
- development of *'Taking Care of Me, A Training Manual on Violence Prevention'*, a joint initiative by the NSW Strategy to Reduce Violence Against Women, the Illawarra Disability Trust and the Disability Workers Cross-Services Committee⁸

Although widely seen as a positive approach, there are some dangers with relying on protective behaviours training of potential victims as a sole strategy for crime prevention. Key issues include:

- Over-reliance on protective behaviours training can lead participants – and the community – to believe that violence can be prevented by individual behaviours and actions, and supports the attitude that victims are responsible for the violence when it occurs (Department of Prime Minister and Cabinet, 1993:15).
- Such programs generally focus on teaching the person to identify inappropriate requests or behaviours, such as abusive and non-consensual sexual behaviours. They tend to assume that by teaching participants the skills to refuse or resist such incidents is sufficient to protect them from harm.
- The use of an education program on its own fails to address the many other factors that increase the risk of people with disabilities being victimised. Most of these factors relate to the nature of the service and the

⁴ Communication with Marianne James, Australian Institute of Criminology, 4 May 2000

⁵ Communication with Margaret Russell, Office of the Status of Women 14 April 2000

⁶ Communication with Regional Violence Prevention Specialist for South-West Sydney (Attorney-General's Department), Lilian Gomez 20 April 2000

⁷ Communication with Regional Violence Prevention Specialist for Central West (Attorney-General's Department), Helen Kay 26 April 2000

⁸ Information provided by ADD, 28 November 2000

circumstances of being in care, and are not within the control of the individual (McCarthy and Thompson, 1996).

- Very few abuse prevention education programs have been rigorously evaluated (Sobsey 1994, McCabe et al 1994, Muccigrosso, 1991).
- Increasing an individual's capacity to report crime without increasing the capacity of services and criminal justice agencies to respond adequately to such reports (see IDRS, 2000) is likely to result in additional trauma to the individual, and to compromise the effects of education.

Given the above, it appears that the most appropriate role for protective behaviours programs are as a necessary, but not sole, component of a broader program of strategies to prevent crimes against people with disabilities in residential settings (Sobsey and Doe, 1991; Roeher Institute, 1992).

Developmental prevention and potential offenders

The literature reviewed by the project in relation to offenders related primarily to sexual assault. A developmental or early pathways intervention approach to preventing sexual assault relies on the early identification and response to those people with a disability who are at risk of offending. Failure to intervene places other residents at significant risk, as there is strong evidence that *"sexual abuse is almost always repeated unless action is taken and vulnerable people are protected"* (Brown and Stein, 1997: 216).

One system using this approach categorises behaviours on a continuum from 'normal' to 'abusive' and provides a corresponding intervention response. Behaviour categories range from:

- those are of concern and may be viewed as warning signs, but are not abusive;
- those that constitute abusive and potentially illegal behaviours; and
- those that are clearly illegal

(Ryan, 1991 in Hudson et al, 1998).

The levels of intervention in order of escalating severity are:

- 'label and react' by specifically describing the inappropriate behaviour to the person and indicate that the behaviour can be upsetting to others;
- 'confront and prohibit' where the person continues to exhibit behaviours of concern, by again specifically describing the behaviour and prohibiting the person from engaging in the behaviour;
- 'report and refer' for an appropriate treatment program where the person's behaviour progresses to a serious level

(Hudson et al, 1998).

While this regime provides a process for identifying and eliminating behavioural indicators of sexual offending, it does not offer positive developmental strategies for potential offenders. As with protective

behaviours, early pathways intervention approaches are unlikely to be effective on their own.

Within service settings, there are a number of strategies that may prove effective in preventing the escalation of sexually inappropriate behaviour. Identified risk factors for sexually offending behaviour include underemployment, poor social skills, poor problem solving skills and social isolation. Strategies for addressing these risk factors generally fall into the scope of service provision, and should be dealt with as part of planning for supports and activities for each individual. A range of situational measures could also be implemented to reduce the opportunities for a high-risk individual to commit a sexual offence. These include minimising the extent of unsupervised contact with likely victims and ensuring the provision of appropriate, meaningful activities. Such measures may be particularly useful in the short-term while strategies associated with longer-term behavioural change and skill development are being implemented.

5.3 Situational crime prevention

5.3.1 Overview of situational crime prevention approaches

Situational crime prevention aims to remove the opportunity to commit crime, and to make the costs of a crime greater than the benefits (Geason and Wilson, 1988: 2). Situational crime prevention generally:

- targets specific types of crime;
- incorporates strategies that involve the management, design or manipulation of the immediate environment where the crime occurs, in a systematic and permanent way;
- focuses on strategies that reduce the opportunity for criminal acts to occur;
- aims to increase the efforts, risks and costs to potential offenders of committing the crime;
- focuses on modifying the environment, rather than the individuals who may commit the offences or the potential victims (Geason & Wilson, 1988:4; Clarke, 1997; Hazlehurst, 1992; Hauritz, 1998).

Situational crime prevention developed from research that demonstrated the influence of the situational circumstances such as location, time, opportunity and institutional regimes on offences and criminal victimisation. These findings meant that opportunities for criminal acts could be 'designed out' (Clarke, 1997; Hauritz, 1998). Specific research into crime victimisation of people with intellectual disabilities is consistent with this theory of crime (Wilson et al 1996), and several commentators have advocated the need to alter the design and operation of formal service systems as a way of protecting people with disabilities. Strategies that are suggested include rigorous screening in recruitment, separation of people using respite from

long term residents, and more careful consideration of combinations of residents placed together (McCarthy & Thompson, 1996; Sobsey, 1994).

There are a number of theories about the causes of crime that support a situational approach to crime prevention. The following theories are relevant to crimes committed against people with disabilities in residential settings:

- *Routine activity analysis* is pertinent to crimes of a predatory or exploitative nature, where the combination of the presence of likely offenders, the presence of suitable targets of crime, and the absence of 'capable guardians' against crime – a person who, by authority or by presence, is likely to inhibit the occurrence of a crime and/or take steps to intervene in an incident of violence or abuse – provides the opportunity for crimes to be committed. This is particularly so where these conditions are typical routines experienced as part of everyday life.
- *Rational choice theory* assumes that offenders are rational decision-makers who only commit offences when the conditions are such that the benefits from the offence outweigh the risks and costs to them.
- *Pattern theory* is based on research on repeat victimisation in crimes, such as domestic violence and property crimes. This research shows that knowledge about patterns and trends in criminal acts can be used to modify the conditions relating to the time, location or other situational characteristics of the 'hot spot' (Hauritz, 1998).

Routine activity analysis provides a compelling explanation for the vulnerability of people in residential settings. The daily routines and living arrangements mean that people with disabilities are almost constantly in the presence of potential offenders (staff and other residents). There are many opportunities in routine activities such as personal care, single staff shifts, and forced close proximity of people with disabilities with each other, for the occurrence of assaults and violence. Arrangements in residential services also provide many 'routine activity' opportunities for theft, including the presence of people who may not be able to manage their own money, discretionary arrangements for expenditure of client funds, and the limited capacity to keep personal belongings secure. Many residential services may lack the physical presence of a 'capable guardian'. The fact that people with disabilities residing in formal services are either unlikely or unable to take steps to report crimes committed against them also presents potential offenders with low risk opportunities for crime.

The rational choice theory is particularly applicable to crimes committed by staff, and suggests that staff are more likely to commit crimes – whether they be theft or assault – in situations where it will be easy to do so, with little risk or effort. Examples include situations where an absence of accountability procedures makes it easy for staff to misuse residents' personal funds, or where the lack of supervision makes it easy for staff to sexually or physically assault a resident with little chance of detection.

A review of successful case studies of situational crime prevention has shown that the following strategies are effective in preventing crimes using a routine activity approach:

- reducing the convergence of potential offenders and potential victims;
- constrain potential offenders by increasing social controls, restricting access to the means of crime, and restricting access to disinhibitors;
- restricting access to places where crimes are committed or reducing the visibility of residents who may be potential 'targets' of abuse or criminal behaviour;
- enhancing guardianship over potential targets by increasing surveillance (real or apparent), assigning responsibility to challenge potential offenders, and increasing capability to intervene (Geason and Wilson, 1988).

The following examples illustrate the application of situational approaches to crime prevention.

Situational prevention programs

Strategic physical design of environments can prevent crimes by capitalising on the opportunities for 'natural surveillance'. Natural surveillance relies on people who can see what goes on and will act to prevent crimes in particular environments. This approach has been used to prevent crimes in large public housing estates, where although there is a high level presence of people, much of the space was not protected by anyone because it was not considered to belong to any particular individuals. Situational prevention strategies based on physical design focus on increasing ownership and surveillance of certain territory for the potential victims, and a system of barriers, or access controls, for potential offenders. Practical measures to achieve this include:

- creating defensible and defined private areas
 - minimising anonymous common areas
 - assigning amenities and recreational areas for different groups to create their own area for socialising
 - creating 'zones of transition' to alert strangers that they are entering private areas while making it easier for people to keep an eye on the area and challenge others who intrude
- from Sutton and Hazlehurst (1996: 439-440)*

Studies into violence and violence prevention in prisons have identified environmental effects on prisoner behaviour that can be altered using situational prevention measures (Suedfeld, 1980). The stress caused to inmates by spatial intrusions, monotony and external controls are likely to increase violent reactions in individuals. Specific strategies to reduce these environmental effects include:

- understanding and accommodating the different needs of inmates for 'personal space';
- changes in architectural and interior design and variety in food and recreation to reduce monotony; and
- increasing options for inmate control over simple aspects of daily life.

From Homel, R (in publication) Chapter Eight – Violence in Institutional Settings - Prisons

Situational crime prevention offers an immediate impact on crime and is highly targeted to specific crimes and circumstances. However, there are two significant factors to consider in the application of situational crime prevention strategies. The first is the risk that situational measures may have only localized effectiveness and may result in the crime being 'displaced'. That is, the offender will try again, either at the same place or elsewhere, or may turn to another type of crime. Some early research has indicated, however, that this risk of displacement is greatest where the offender is strongly motivated to commit the crime and where the costs and risks of the crime are not high. If situational crime prevention measures are concentrated on those target groups that are least likely to be able to protect themselves from the crimes, the risk of displacement can be minimised (Hazlehurst, 1992; Geason and Wilson, 1988). More recent research, however, provides "*convincing evidence...of net preventive effects even after displacement of various kinds is taken into account*" (Tonry and Farrington, 1995).

The second factor is that research to date appears to indicate that situational crime prevention is more effective against particular types of crime such as burglary, vandalism and those crimes that can be shown to occur in 'clusters' of time and space or occur at a high rate. Whether situational measures are effective against violent crimes is less clear (Geason and Wilson, 1988). Further research is also needed to clearly identify whether situational crime prevention is more effective with certain types of offenders, for example, opportunistic rather than committed offenders, or rational rather than impulsive or compulsive offenders (Tonry and Farrington, 1995).

5.3.2 Applying situational crime prevention strategies

Much of the literature on situational crime prevention deals with measures that change the physical environment by increasing security measures and surveillance, or redesigning the physical layout of locations where crimes occur.

Situational crime prevention strategies can take many forms, and need to be developed through an understanding of the dynamics and patterns of the crime being targeted. However, all situational crime prevention strategies need to be designed to either increase the effort required to commit the crime, increase the risks of being apprehended, or reduce the reward to the offender (Clarke, 1997). Broadly speaking, situational crime prevention strategies focus on:

- 'target hardening' ie making it more difficult for offenders to access places where crimes can be committed, and making potential victims less vulnerable;
- increased real or apparent surveillance and guardianship over potential targets and locations of crime, through increased vigilance at community or institutional level or through environmental modifications;

- management of physical or social factors in the environment to eliminate or reduce targets of crime (Swanton, 1989; Hazlehurst, 1992)

Based on these strategies, situational measures in residential settings might include:

- increasing the presence of 'capable guardians' either by increasing the presence of supervisory staff or increasing staff-to-resident ratios;
- arranging activities and routines to reduce opportunities for likely offenders and potential victims to be together. For example, Pattern theory of crime prevention could be applied in residential settings through an analysis of critical incidents, to identify any patterns in terms of time of occurrence, people involved (staff or residents), precipitating events and location. Specific strategies could then be developed to address the situational characteristic. In one study, Sundram (1984) noted that the majority of abuse incidents in residential settings tended to occur during those hours of the day where service management were no longer on duty, but residents were still awake. He suggested that managers and supervisors should ensure a regular 'after-hours' presence within residential settings. This is consistent also with the routine activity approach in that it would provide the presence of a 'capable guardian'.
- increasing the likelihood that an offence will be detected and punished, through the use of rigorous monitoring and follow-up of incidents;
- reducing routine activity opportunities for crimes associated with unlawful behaviour management techniques, by ensuring staff are able to use alternative methods of behaviour management.
- Addressing issues related to service design, such as the size of the service and the use of physical space within the facility. For example, defining 'private areas' and spaces for socialising, providing individual bedrooms, and minimising 'anonymous communal areas' such as stairways and walkways where people are not able to be easily challenged (Sutton and Hazelhurst 1996: 439);
- Considering gender segregation within residential services, at least in part of the service (Macarthy and Thompson, 1996); and
- ensuring location of respite services away from permanent accommodation, in order to minimise the vulnerability of respite service users resulting from them from 'being new' to a service (McCarthy and Thompson, 1996).

Crime prevention programs must encompass measures that promote a service culture, environment and practices that explicitly acknowledge the dignity and rights of consumers. The Commission has identified the following as components of a rights based organisational culture:

- clear operational policies and procedures around issues of rights, safety, prevention of abuse, duty of care and responsibilities of staff to intervene;
- clearly identified roles and responsibilities of staff in relation to service activities, duties, and safety and care of consumers;

- thorough induction, in-service training and professional development for staff to ensure an understanding of the service culture and expectations and consumer rights issues;
- rigorous accountability and monitoring systems;
- rights-based service practices that encourage consumer participation, access to advocacy and responsive complaints systems (Community Services Commission 1999).

Findings from crime prevention research provide some support to adopting these broad strategies. For example, successful situational prevention strategies have included those that constrain potential offenders by increasing social controls, suggesting that strong policies and procedures and clear roles and responsibilities may contribute to a reduction of the risk of staff offending. Similarly, the introduction of monitoring and accountability systems and structured staff supervision is likely to have the same effect as increased surveillance, which has been shown to be a successful crime prevention strategy. Providing explicit responsibilities to staff in relation to intervening and reporting incidents of assault effectively increases the presence of a 'capable guardian' against crime, thus addressing a significant risk factor identified by routine activity crime analysis.

The implementation of environmental strategies such as these would provide an important base for any crime prevention program in a residential service.

5.4 Community or social prevention

5.4.1 Overview of community or social prevention approaches

Community or social crime prevention encompasses a broad approach to programs and other interventions that focus on changing the social conditions, patterns of behaviour or institutions that influence offending behaviour. This approach is based on an assumption that there is a relationship between social conditions and the motive, desire or will to offend, and that by changing these conditions, the behaviour of those within that environment will be altered (Hazlehurst, 1992; Hauritz, 1998; National Crime Prevention, 1999).

Programs tend to involve strategies to change the culture and operation of an institution or community, and focus largely on empowerment and strengthening social infrastructure. Community or social crime prevention programs also include those which target groups that are at risk of offending or vulnerable to developing offending behaviour or being the victims of crime.

Community or social prevention approaches may combine organisational or social strategies which attempt to address cultural and organisational factors

and promote shared understanding and commitment to the goal of violence prevention; developmental or early intervention strategies to deal with individual offenders or victims; and situational strategies to reduce the opportunities for violence to occur.

The following examples illustrate how community or social approaches have been applied in different environments.

Examples of community or social crime prevention programs:

The organisational development approach focuses on changing the 'organisational culture and climate' by improving systems and procedures of an organisation, improving communication, trust and co-operation amongst members of the community. The approach has been used in settings such as schools to reduce disorder.

The Program Development Evaluation approach used in a Baltimore school has been subject to empirical evaluation and found to be successful in reducing student disorder and bullying within schools, although the improvements were not sustained in the long term. The program used multiple strategies, targeting the awareness and behaviours of all parties involved, and focused on encouraging and rewarding desired behaviours, as well as identifying and responding to behaviours targeted for elimination.

From Gottfredson, (1987).

A social or organisational approach to crime prevention acknowledges the impact of risk factors that are related to the nature of the service itself, the care circumstances and the personal attributes of those within the environment who are potential offenders, potential victims or both. These types of programs may be one of the most effective options for preventing crimes committed by staff, as they attempt to change the culture and practices of an organisation and include strategies targeted to all levels of an organisation.

The features of an organisational or social prevention approach are similar to proposals and recommendations for preventing abuse from the disability literature. These have advocated a systematic range of measures that should address the design and organisation of services, policies and procedures, recruitment and training, orientation and in-service training for staff, counseling and support programs for victims and offenders and supervision and leadership (Sobsey, 1994).

Although social crime prevention programs have been shown to be effective, one limitation is that there is an extended period between implementation and any impact on crime rates (Hazlehurst 1992).

5.4.2 Applying community/social crime prevention strategies

Community or social crime prevention approaches could be applied within residential settings through the development of a program that addresses the social and organisational aspects of risk within these settings. As outlined in section 4.2, such an approach might focus on strategies that address factors that impact on the risk of systemic abuse, particularly:

- organisational factors;
- staff factors;
- level of consumer awareness and sophistication; and
- extent of involvement of support organisations.

(Morath, 1997).

In recent years, there has been increasing focus on the prevention of violence in settings such as schools, psychiatric units and prisons. A number of these programs have been subject to empirical evaluation with positive results. These programs are worth considering for adaptation in residential settings for people with disabilities, because the environments share a number of common features:

- users of the environment exercise little choice about their presence in the environment;
- the environment is characterised by power imbalances between staff and users, and amongst users;
- there is a fiduciary duty of care from the staff to the users of the service, and a responsibility of the government for the provision of a safe environment.

School based programs

Two programs in particular feature strongly in the crime and violence protection literature. These are the anti-bullying program implemented in schools throughout Norway (reported in Grabosky and James, 1995 and QCOSS Bulletin, 1995), and an organisational development approach to reducing school disorder in the USA (Gottfredson, 1987).

Anti-bullying program

The anti-bullying program was implemented on a national basis, with the aim of reducing the prevalence of bullying and victimisation amongst school students, using a combination of situational and social prevention approaches. The program incorporated three levels of intervention:

- a 'whole-of-school' strategy for increasing awareness, developing strategies for monitoring and intervening in bullying behaviour and creating a social and physical environment less conducive to bullying;
- class-based strategies focused on setting rules and guidelines around appropriate and inappropriate behaviour, and fostering positive relationships while applying sanctions to inappropriate behaviours; and
- individual level intervention with counseling for victims and bullies, and provision of information for parents of bullies to help them promote more appropriate behaviour in their children (QCOSS, 1995)

Evaluation of the program found a 50 per cent reduction in the prevalence of bullying, and a significant reduction in the number of offences recorded. A decline in associated undesirable behaviours such as truancy, vandalism and theft was also noted, as well as an increase in positive attitudes to school and schooling amongst the students (Grabosky and James, 1995; QCOSS, 1995).

Specific aspects of the program that may hold potential for crime prevention strategies in disability residential settings include:

- staff participation in discussion groups on how to alter the physical and social environment to reduce bullying;
- policies requiring staff to intervene quickly and decisively in any bullying situations;
- practices ensuring that pro-social behaviour was rewarded with generous praise;
- consistent application of non-violent sanctions for undesirable behaviours;
- arranging groups of students so that bullies were placed with children who were considered strong and secure, rather than with potential victims;
- regular discussions and meetings with all parties about bullying.

Reducing school disorder

Gottfredson describes another multi-component approach to preventing violence in school settings (1987). Gottfredson argues that in order to reduce school disorder and enhance the effectiveness of education, it is necessary to take an organisational development approach to prevention. This requires examining the school culture and climate and developing strategies for improving communication, building trust and co-operation and enhancing the organisation's problem-solving and decision-making capabilities.

This approach was used in a school that had a history of considerable student disorder. The school was considered at high risk for continued disorder on measures of student demographics and the socio-economic characteristics of the local community. The program involved eight components, implemented over a two year intervention period. Key strategies included:

- thorough training for all participating teachers in implementing strategies;
- establishment and consistent application of clear and consistent limits and consequences for student behaviour and offering students encouragement and rewards for appropriate behaviour;
- provision of structured opportunities for students to express their views on classroom management and options for changing student behaviour;
- identification and targeting of most troublesome classes for intensive positive reinforcement;
- promotion of group co-operative learning efforts.

Other program strategies aimed to increase parental involvement in school activities, increase community support for the school and introduce extracurricular activities for students. Implementation of the program also involved establishing a standard set of school rules and a disciplinary referral system, and exposing students to positive role models from the community.

Outcome measures showed improvements in organisational health, particularly teacher morale, and in student attitudes about school and education. A decline in measures of rebellious behaviour was also identified.

A key consideration in the application of community or social approaches to crime prevention is the time needed for implementation. A high level of commitment and dedication of time, attention and resources is required for effective organisational development, and staff turnover and the changing priorities of administrators and managers can hinder the successful implementation of programs. In the case of the Baltimore school, positive results were achieved even under very difficult circumstances, but the school was unable to sustain the improvements after the intervention period (Gottfredson, 1987).

Hospital and prison settings

Homel et al (in publication) report that a whole-of-organisation approach has also been successfully applied in a children's psychiatric hospital to reduce the incidence of restraint and seclusion, violence amongst the children and conflict amongst the staff. The program involved planned organisational change to reduce institutional violence using a combination of strategies including education of staff, improving intra-staff communication, revising policy on behaviour management, and involving family members in the care of patients (Goren, Abraham and Doyle, 1996; cited in Homel et al in publication).

This whole-of-organisation approach has also been adopted in the area of corrective services, where violence and assault amongst prisoners and between prisoners and staff has been an endemic problem. As in residential care for people with disabilities, many factors contribute to the levels of violence in prisons. These factors are interrelated and include personal characteristics of inmates and aspects of the prison environment and management such as staffing models, staff skills, prison culture, and management style (Homel, R. in publication).

Various programs within prisons have attempted to deal with particular factors that contribute to violence. These include programs addressing the violent behaviour of inmates, staff training programs, use of segregated units within prisons for vulnerable inmates and enhanced educational programs for inmates. While individually some programs have been found to be effective or promising in reducing violence, research indicates that *"a whole-of-prison approach that thoughtfully combines situational and social prevention strategies appears to offer the most likely recipe for reducing interpersonal violence in prisons"* (Homel, R, in publication).

An example of such an approach is the Victorian prisons anti-violence strategy (Victorian Prison Service, 1995).

Victorian anti-violence strategy

The strategy aims to change those aspects of the environment and social climate that contribute to the potential for violence. Recommended strategies included:

- creating and reinforcing a norm of anti-violence within prisons;
- individual prisons identifying the location of, and aggressors involved in, violent incidents and subsequent increased supervision of or restricted access to these locations, and increased surveillance of the aggressors;
- training of staff in non-violent crisis intervention, communication skills, conflict resolution, and prosocial interventions.

The broad framework adopted by these whole-of-organisation prevention programs could be adapted for use in residential settings. While the programs described above are for a different target group in different environments, there are some common features of the described programs that are of relevance to the risk factors for crime in residential settings. For example, the programs described all included components that:

- address issues of organisational culture and staff understanding of and commitment to prevention of violence;
- address developmental strategies for individuals at risk of offending;
- provide for developmental strategies and support for those who have been victimised or are at risk of victimisation;
- provide for strategies to promote positive alternatives to violence and crime, through development of social cohesion and developmental learning opportunities and activities;
- ensure clear roles and responsibilities of staff to prevent violence and intervene with individuals.

These features individually echo those discussed earlier in this report, and collectively, provide a combination of strategies that draw from all the major approaches to crime prevention.

6. Selecting crime prevention approaches and strategies

6.1 Selecting approaches

Crimes committed within residential settings are complex in nature and a range of factors influence the risk of crime. Therefore, the most strategic crime prevention programs are likely to be those that involve a range of approaches, carefully designed to match specific crimes and their contributing factors.

The developmental or early pathways understanding of crime is useful in its focus on identifying risk factors in individuals, and for directing attention to preventing or reducing the impact of these factors. However, a developmental or early pathways intervention approach alone is unlikely to be effective in preventing crime. Many of the risk factors and dynamics that lead to the development of offending behaviour are not easily addressed in the short term. For example, people with disabilities whose life history involves long term institutionalisation, absence of positive socialising influences and experience of personal abuse may require intensive support and structured positive experiences over a lengthy period to counteract the impact of these risk factors. Under these circumstances, a situational approach should be applied to enable more immediate results. A situational approach would enable identification of environmental factors that allow crimes to occur, and introduction of strategies for limiting these opportunities. Community or social approaches provide a mechanism for developing strategies that use the knowledge from both developmental and situational crime analysis, to address both immediate and longer-term prevention. This organisational approach also seeks to address the range of factors within a system that contribute to crime victimisation within that setting.

6.2 Developing strategies

The most effective crime prevention strategies appear to be those that have been based on a comprehensive analysis of the targeted crime problem, and developed to reflect local needs and characteristics (Hazlehurst, 1992; Geason and Wilson, 1988). Although research in the area of crime prevention provides many examples of programs, crime prevention experts caution against “*selecting random packages from the worlds supermarket of ideas*” (Sutton and Hazlehurst, 1996:435). It is noted that crime prevention projects that have been less effective are those that adopt strategies or programs from elsewhere without any consideration of their applicability in a particular situation and local context (Geason and Wilson, 1988; Sutton and Hazlehurst 1996).

Geason and Wilson (1988) outline the stages involved in developing an effective crime prevention program:

1. Search for local crime problems
2. Select specific crime problem
3. Analyse the crime problem selected
4. Consider a range of possible measures
5. Identify who will implement the measure
6. Document the implementation process
7. Monitor the changes in the crime situation over a long period
8. Evaluate the program.

Other elements or stages identified in crime prevention research and evaluation as contributing to effective crime prevention strategies include:

- focusing on specific crime problems, rather than 'crime' in general;
- understanding the physical and social environment and tailoring strategies to match these;
- identifying the demographic and cultural features of the environment and ensuring that program strategies are relevant to the target group;
- ensuring the proposal reflects local needs and priorities, particularly where there are a range of stakeholders involved;
- applying both situational and social crime prevention strategies, to enable a more effective outcome in the short and long term;
- including strategies that focus on developing positive outcomes as well as those that aim to eliminate the criminal behaviour;
- anticipating the possibility of displacement or other unintended consequences from the strategy;

(Hazlehurst, 1992; Grabosky and James, 1995; Geason and Wilson, 1988; Sutton and Hazlehurst, 1996)

7. Conclusion and recommendations

This discussion paper was prepared by the Commission and IDRS as a first step in the development of a project which would refine, adapt and pilot crime prevention strategies in residential settings.

People with disabilities in residential settings are at risk of becoming victims of a range of crimes, perpetrated in the majority of instances by other residents or service staff. These crimes include physical and sexual assault, property crimes and in some instances, service practices which involve use of excessive force.

The paper has identified a considerable amount of research which is relevant to the prevention of crimes in residential settings for people with disabilities. Much of the research reviewed focuses on sexual and physical assault, crimes which represent a significant and direct threat to the basic safety and well-being of people with a disability in care. There is little, however, which directly addresses service practices which may constitute criminal acts, including restraint, forced feeding, neglect and financial mismanagement. These matters require further consideration.

Preventing abuse and violence against people with disabilities in residential settings is an issue of paramount importance within the disability sector. However, the language and discourse available from criminology has not featured systematically in attempts to address these issues. The crime prevention literature provides a framework for a rigorous assessment of the nature of crime in a particular setting, and a systematic approach to developing relevant and holistic preventative programs, to enhance the risk management and quality improvement strategies which presently constitute the key responses to crime in residential disability services.

Progressing effective crime prevention within residential services will require the development of expertise and a body of knowledge specific to disability services. A key indication from crime prevention literature is that the most effective crime prevention programs are those developed in response to specific crime situations using a relevant combination of the range of identified approaches. In this context, it is proposed that the most appropriate way to progress crime prevention within residential disability services would be to pilot a program that applies knowledge gained from crime prevention to residential services for people with a disability.

Recommendation 1

The Ageing and Disability Department, with support and assistance from the NSW Crime Prevention Division (Attorney General's Department) and the Department of Community Services, should facilitate and commit resources to the development, implementation and evaluation of a pilot crime prevention program for people with disabilities in residential facilities.

In the first instance, ADD should convene a panel of key stakeholders and experts in crime prevention, including the Crime Prevention Division, DoCS, non-government service provider representatives, mainstream agencies, crime prevention experts, advocates and consumer representatives. The role of the panel should be to determine the specific scope and nature of a demonstration crime prevention program targeting people with disabilities in residential care. In doing so, the panel should take into account:

- current crime prevention projects and initiatives being undertaken by ADD and other relevant agencies;
- sites and crimes which represent high risk to people with disabilities;
- available resources; and
- the findings of this project, particularly that the most effective crime prevention programs are likely to be those which:
 - are developed in response to specific crime situations;
 - draw on a relevant combination of the range of approaches to crime prevention (developmental, situational, social); and
 - adopt a whole-of-organisation approach to crime prevention.

The panel should consider whether a pilot program should be focused on one facility or involve a range of components or projects in a number of facilities.

Following determination of the scope and nature of the program, the panel should provide ongoing advice on its development, implementation and evaluation.

Recommendation 2

An evaluation strategy, incorporating process and outcome measures, should be developed in parallel to the development of the crime prevention program and/or each specific initiative. An evaluation should be conducted by a party independent of all stakeholders in the program.

Recommendation 3

Subsequent to evaluation, an information and resources 'package' should be developed for wider distribution within the disability services sector. The package should articulate those strategies which may be broadly applicable within a range of residential services for people with a disability, and be based on a review of the information and support needs of the broader disability services sector. As required, strategies should be identified and

resources developed to support implementation of crime prevention strategies across the sector.

Recommendation 4

The Community Services Commission and the Intellectual Disability Rights Service should, subject to available funding, conduct or facilitate the conduct of further research and development of preventative strategies regarding service practices which may constitute criminal acts. Such service practices include chemical and physical restraint, forced feeding, neglect and mismanagement of residents' funds.

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Appendix 1: Consultations

The following individuals and organisations were consulted during the course of the project, through either face-to-face contact or via phone discussions.

Australian Institute of Criminology (Marianne James)
Community Council Against Violence (Vic)
Office on the Status of Women, Department of Prime Minister and Cabinet
Regional Violence Prevention Specialists, Attorney-General's Department
(Lilian Gomez, South West Sydney and Helen Kay, Orange)
Michael Bleasedale, Coordinator, Supported Living, Uniting Church
Freda Hilson, Disability Services, Jewish Welfare Association
Margaret Millard, Coordinator, Silverlea Education and Accommodation
Services Inc., Broken Hill
Vivienne Clear, Family Planning NSW
Anne MacRae, The Deaf Society
Dr Helen Beange
Dr Meredith Martin
Dr Sandra Egger, University of NSW
Intellectual Disability Rights Service Rights Forum
NSW Council for Intellectual Disability Support Group
The Disability Complaints Service

The Community Services Commission and IDRS appreciate the time and comments provided by those contacted.

Appendix 2: Advisory Committee

The project advisory committee included:

Craig McIntosh (Pauline Barry)	Crime Prevention Division, Attorney Generals Department
Helen Seares	Council for Intellectual Disability
Darren Fittler	People with Disabilities NSW
Margaret Andersen (Anne Campbell)	Department of Community Services
Merry Coote Pearce (John Le Breton)	Office of the Public Guardian
Georgina Connelly	Intellectual Disability Rights Service
Suzanne Pierce	Ageing and Disability Department

Appendix 3: Research on nature of crimes

Nature of crimes committed against people with disabilities in service settings

Author (year)	Basis of research	Relevant findings
Sobsey and Doe (1991)	Reports on sexual abuse and assault of people with disabilities provided through sexual assault clinics and disability advocacy groups. Sample of 162 reports.	<ul style="list-style-type: none"> • Offender known to victim in 95.6% of cases • 44% of perpetrators had access to victim through specialist disability services - 27.7% of perpetrators were service staff; 6.5% were other people with disabilities using the same disability program • 12.7% of abuses occurred within institutions, 6.3% within group homes and 10.1% in specialised transport vehicles
Brown and Stein (1997)	Data on cases of sexual abuse of adults with intellectual disabilities that had been reported through statutory agencies, and judged by researchers as being strongly corroborated.	<ul style="list-style-type: none"> • Perpetrator was part of victims everyday circle in 83% of cases • Perpetrator was another service user in almost half the cases (80 of 169) • Staff or volunteer of service were perpetrators in 18% of cases • Those abused by non-disabled perpetrators are at greater risk in their own or the perpetrators home • Abuses by perpetrators without intellectual disabilities more likely to involve multiple incidents against the same victim, than for perpetrators with an intellectual disability, although one-third of perpetrators with intellectual disability abused several victims.

Furey and Niesen (1994)	Data on 72 cases of sexual abuse of adults with mental retardation where the perpetrator was a person with mental retardation. All cases had been substantiated by the relevant statutory authority	<ul style="list-style-type: none"> • 82% of victims had been sexually abused in their residence • Perpetrator deemed culpable in only 43% of cases, and facility found to have failed to protect victims in 49% of cases • Majority of victims did not have mobility, communication or sensory difficulties • 75% of sexual abuse took place in the institution or group homes, perpetrated by another person with a disability who lived there
Wilson (1990)		<ul style="list-style-type: none"> • most common crimes against people with disabilities was assault • in all cases of sexual assault, offender was known to victim (compared to 42.2% of sexual assault cases amongst general population)
Wilson et al (1996)	Sample of 174 people with an intellectual disability, using three different disability services (Wilson and Brewer, 1992)	<ul style="list-style-type: none"> • victimisation rates for crimes against the person higher in those residential services for people with higher support needs • rates of victimisation involving household/property crimes lower in residential arrangements for people with higher support needs • more severely disabled individuals and those living with other people with disabilities are those at highest risk of criminal victimisation