

SUPREME COURT OF QUEENSLAND

CIVIL JURISDICTION

MULLINS J

No BS5452 of 2007

ATTORNEY-GENERAL FOR THE STATE OF  
QUEENSLAND

Applicant

and

WALTER FRANK BRIDSON

Respondent

BRISBANE

..DATE 13/11/2008

ORDER

HER HONOUR: On 26 October 2007 her Honour Justice White, pursuant to section 13 subsection (5) paragraph (a) of the Dangerous Prisoners Sexual Offenders Act 2003 ordered that at the expiration of the sentences that the respondent was then serving he be detained in custody for an indefinite period.

I have before me today the Attorney-General's application for a periodic review of the continuing detention order. That application is made pursuant to section 27 subsection (2) of the Act.

Pursuant to section 29 of the Act the respondent has been examined by two psychiatrists, Doctors Beech and Sundin, for the purpose of the application today.

When her Honour gave her reasons on 26 October 2007 for ordering the respondent be detained in custody for an indefinite term on the expiration of his imprisonment on 27 November 2007, her Honour observed: "It is plain from the many reports that have been prepared about the level of risk [the respondent] presents to the community and the oral evidence of the three psychiatrists that until Mr Bridson participates in appropriate therapy to address the sexual and violent nature of his offending he is at risk of reoffending in the ways in which he has done in the past."

As a result of the psychiatric evidence that was put before the Court in relation to the original application and the decision of her Honour, Mr Bridson participated in a Getting Started Program for sexual offenders.

He then was transferred to Brisbane to enable him to undertake the High Intensity Sexual Offending Program. He has undertaken that course between 11 February and 28 October 2008. It involved 102 sessions.

I have been provided with the Exit report from that program. That report summarises the participation and contribution made by the respondent to that program and gives some indication of how the respondent has responded to the program. The Exit report also deals with the respondent's future plan.

The material that is before me on this application is very different to that which was before her Honour Justice White.

In a period of 12 months the respondent has managed to come to a realisation about himself and the causes of his offending, which has given the psychiatrists material on which to moderate their previous opinions about the high risk of reoffending that he presented.

Before dealing with the opinions in the current reports I need to refer a little to the respondent's antecedents. They are dealt with in detail in her Honour Justice White's reasons, [2007] QSC 307.

The respondent was born in 1962. His father appeared to have an alcohol problem and was violent towards his mother. His mother left his father when he was aged seven years. Her new partner, however, was violent towards both the respondent's

mother and to the respondent.

The respondent left home at the age of 14 years. During that time he commenced abusing both alcohol and cannabis sativa. He was introduced to sexual relations through group sex with adults.

His childhood is described as problematic and dysfunctional and a contributor to the problems that then plagued him as he entered adulthood.

He committed a number of criminal offences. Relevantly, he was dealt with in 1984 for enter dwelling with intent and assault occasioning bodily harm and was sentenced to four and a half years' imprisonment.

He then was dealt with in the Supreme Court in Townsville for rape. He was sentenced in 1988 to seven years' imprisonment.

He was sentenced to 12 months' imprisonment in 1996 for assault occasioning bodily harm.

By this stage his problems with alcohol and substance-abuse were acute and his inability to form appropriate relationships with women was apparent.

He did not undertake any programs that enabled him to have insight into his criminal offending and his offending escalated.

In 1997 he was convicted of enter dwelling with intent and attempted indecent assault and was sentenced to five years' imprisonment.

The details of each of these offences are set out in the reasons for judgment of her Honour Justice White.

That offences, for which he was dealt with in November 1997, were committed on 15 July 1997. After he was convicted he was then dealt with in June 1999 for offences that he had committed earlier on 2 July 1997. They were offences of entering a dwelling in the night and robbery with violence. He was sentenced to five years' imprisonment cumulative on the sentence that was imposed in 1997 and a declaration that he was convicted in respect of a serious violent offence was made. That was why the respondent's full-time discharge date was not until 27 November 2007.

The respondent had refused to undertake a sexual offender treatment program during his imprisonment before it was due to expire in November 2007, hence the conclusion reached by her Honour Justice White in reliance on the three reports from psychiatrists that had been prepared in connection with the application that was made under the Act at that time.

Dr Beech interviewed the respondent again on 4 July 2008. Because he had done the report for the first application under the Act involving the respondent, he was in a good position to make comparisons between the respondent as he presented for

the purpose of the original application and how he presented for the purpose of the review application.

Although Dr Beech is still guarded in his prognosis, he could now see the respondent showing some insight into not only his alcohol and cannabis sativa abuse, but his relationship problems that contributed to his sexual offending in a violent way in the past. Dr Beech has noted in his report that the respondent has had a positive attitude, and evinces a positive attitude, to intervention that will assist him in coping on his release. Although Dr Beech expresses the opinion that if the respondent were to be released at present he would still present in the group at high risk of reoffending unless certain conditions were placed around him, if the conditions that Dr Beech recommends are imposed in a supervision order, Dr Beech has expressed the opinion that the risk of reoffending would be reduced from a high risk to a moderate risk.

The conditions that Dr Beech recommends are the completion of the High Intensity Sexual Offending Programme, which the respondent has now completed. Dr Beech suggests that it is important that the respondent continue in the community with a Maintenance Sexual Offender Programme. Dr Beech considers it is mandatory that the respondent remains abstinent from alcohol and illicit substances, and that the respondent's adherence to this condition should be monitored. Dr Beech considers that the respondent should participate in a Drug and Alcohol Relapse Prevention Programme in the community, and that it would be helpful for him to be assessed for medical

treatment that could assist such a programme.

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Dr Beech also considers that the respondent would benefit from individual psychological support and assistance in making the transition to community living, and that he will need this support to help him face a number of challenges on his release. The respondent himself recognises some of these challenges, such as the care he will have to exercise in contact with his family, because of his understanding now that some of his family members themselves are abusing alcohol, and that he cannot allow that to induce him to slip from his resolve to avoid alcohol at any level.

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Dr Sundin reviewed the psychiatric reports that had been provided before Justice White, and also interviewed the respondent for three hours on 4 July 2008. Dr Sundin has expressed the opinion that the respondent continues to show features of an anti-social personality disorder, together with alcohol and cannabis abuse dependence, which has been in full remission whilst in prison. These diagnoses had been made in the earlier psychiatric reports and had not been departed from by Dr Beech in his updated report.

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Dr Sundin notes that the respondent's future in terms of recidivism looks brighter because of his participation in a positive way in the Getting Started Preparatory Programme and the HISOP Programme. Dr Sundin also supports supervision of the respondent on conditions similar to those recommended by Dr Beech. Dr Sundin undertook formal risk assessment using

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the instruments of assessment that had been applied by the psychiatrists for the purpose of the original application. These formal risk assessment results confirmed that the respondent is at a high risk of reoffending, but Dr Sundin's opinion is also positive in favour of a supervision order in the light of the proposals for the conditions on which the respondent could be released under a supervision order.

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The respondent has instructed his counsel to concede that he is a serious danger to the community in the absence of a Division 3 order. The respondent accepts that a supervision order will be necessary to ensure adequate protection of the community. Dr Beech recommends that in the light of the respondent's high risk of reoffending without monitoring in the short-term, and without the continued observance by the respondent of the conditions proposed for him as to complete abstinence from alcohol and cannabis sativa, that a period of ten years would be appropriate for the supervision order. The applicant does not oppose the release of the respondent on the supervision order that is proposed, after consideration of the psychiatric evidence.

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Even though I have been provided with a form of supervision order that the Attorney-General and the respondent consider is appropriate in the light of the evidence that is before the Court on this review, I am still required to have regard to the matters prescribed in section 13 subsection 4 of the Act in deciding whether the respondent is a serious danger to the community. The evidence of Doctors Beech and Sundin is

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acceptable and cogent and satisfies me to the high degree of probability that is required under the Act that the respondent's high risk of sexual reoffending is an unacceptable risk in terms of section 13 subsection 2 of the Act. It is therefore appropriate to affirm the decision that the respondent is a serious danger to the community in the absence of a Division 3 order.

I am satisfied, however, in the light of Doctors Beech and Sundin's reports, and the material that is before me for the purpose of this periodic review, that adequate protection of the community can be ensured by the release of the respondent on the supervision order on the conditions that are proposed, for a period of ten years. I am satisfied that the imposition of the proposed conditions for that period of time, in a supervision order that applies to the respondent, modifies the risk of sexual reoffending by the respondent from a high risk to a moderate to high risk. I therefore make an order in terms of the draft, initialled by me and placed with the file.

I should note that the formal order affirms the decision that the respondent is a serious danger to the community in the absence of a Division 3 order, and rescinds the continuing detention order made by her Honour Justice White on 26 October 2007. That will be order as per amended draft. The draft order also sets out the conditions to which the respondent will be subject until 13 November 2008.

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