

SUPREME COURT OF QUEENSLAND

CIVIL JURISDICTION

MULLINS J

No 7913 of 2008

ATTORNEY-GENERAL FOR THE STATE OF
QUEENSLAND

Applicant

and

GRAEME PAUL HANCOCK

Respondent

BRISBANE

..DATE 18/12/2008

ORDER

HER HONOUR: This is an application by the Attorney-General
for the State of Queensland for a division 3 order under the
Dangerous Prisoners (Sexual Offenders) Act 2003 against the
respondent. Although the application as filed sought either a
detention order or a supervision order, Ms Maloney, of
counsel, who appears for the Attorney-General, has informed
the Court that in light of the psychiatric evidence placed
before the Court, the Attorney-General does not oppose the
making of a supervision order on the strict terms that have
been proposed in the draft order that has been the subject of
discussions between representatives of the Attorney-General
and the representatives of the respondent.

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Mr Briggs, of counsel, who appears on behalf of the
respondent, has discussed the terms of the proposed
supervision order with the respondent and advises the Court
that the respondent has instructed his lawyers that he accepts
the need for an appropriately structured supervision order to
facilitate both his reintegration into the community and his
ongoing rehabilitation. From the Attorney-General's point of
view the supervision order is essential to addressing the
risks of re-offending.

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The respondent has also instructed his lawyers that should he
be released under the supervision order on the terms proposed,
he is prepared to observe the conditions of the supervision
order. There is reference in the psychiatric evidence to the
insight that the respondent has developed during the course of

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his imprisonment as to his risk factors for offending against young children and the need for structures by way of supervision and other controls to be in place to assist him in his endeavour not to re-offend.

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The respondent is a relatively young man. He was born in 1984. He therefore is 24 years old.

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He committed sexual offences in 2000 that resulted in Court action. He was only 16 years old. He was placed on probation for two years. He was required, as a condition of probation, to undergo medical, psychiatric and psychological treatment. The respondent attended for 39 appointments at Griffith Adolescent Forensic Assessment and Treatment Centre.

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Unfortunately, soon after the end of this supervision, he committed the offences in January and February 2004 that have resulted in his present imprisonment. The victims were two young boys and a young girl.

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In general terms the offences involved showing pornographic material, oral sex, touching of a sexual nature, photographing genitalia and what is referred to as technically rape. The respondent pleaded guilty to 26 charges in total. There were three charges of rape for each of which offence the respondent was sentenced to five years' imprisonment.

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There were multiple charges of indecent dealing or treatment

of a child under 16 years with a circumstance of aggravation. On each of those charges the respondent was sentenced to four years' imprisonment. He was sentenced to 12 months' imprisonment for a charge of possession of an objectionable computer game. Each of the sentences was concurrent with the other sentences.

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His period of imprisonment commenced from the time he was arrested on 9 February 2004. The respondent's full-time discharge date is 8 February 2009.

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I will now refer to some of the personal details relating to the respondent. He was raped by an adult male at about the age of 10 years. He was sexually active with girls from about the age of 13 years. At age 15 the respondent has identified that he became aware of a strong sexual attraction towards children. It appears he was diagnosed as suffering from ADHD as a child and was treated for that condition until the age of 16 years. Although he was diagnosed as a child with a mild intellectual impairment the psychiatrists who have examined him for the purpose of this application note that he is functioning at a level above his noted IQ of 70. The respondent was a heavy user of cannabis sativa between the ages of 16 and 18 years.

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Whilst in prison he commenced the high intensity sexual offender treatment program in October 2005 but was excluded from that program in February 2006 because of behavioural problems.

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He was subsequently accepted in the Inclusion Sexual Offender Treatment Program which was completed over a period of six months, finishing in December 2007. Whilst in custody he has also undertaken the Transitions Program to assist him in moving from the institutional environment to a community environment.

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Psychiatrist, Dr Grant, interviewed the respondent in prison on 28 March 2008 for two hours for the purpose of a potential application under the Act. Dr Grant diagnosed the respondent as having paedophilia, bisexual type non-exclusive, and noted that the respondent experiences strong sexual attractions to young girls and boys generally between the ages of seven years and 10 years. Dr Grant assessed the respondent using a number of formal risk assessment instruments. They indicated that he was a moderate to high risk of sexually re-offending.

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Dr Grant noted that the respondent was able to express empathy for his victims and had showed willingness to receive treatment and assessment by his positive participation in ISOP. The respondent also expressed willingness to Dr Grant to undergo chemical treatment to control his paedophilic behaviour if that was what was recommended as treatment for him by appropriately qualified medical practitioners.

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Dr Grant noted that the respondent has yet to demonstrate that he can establish appropriate adult sexual relationships outside of prison and his ability to control his strong

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paedophilic drives, which Dr Grant considers are still present, has yet to be demonstrated outside the prison environment. Dr Grant identified as a negative factor for re-offending that the respondent is still of a relatively young age and that he had offended against both young boys and girls.

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Dr Grant rated the respondent's risk of re-offending against young children to be at least moderately high. Because of the respondent's age, Dr Grant recommended that the respondent's release from prison be under a supervision order but preferably for 15 years. The applicant relied on Dr Grant's report for the making of the application under the Act. It was ordered in this Court that the respondent undergo examinations by psychiatrists Professor James and Dr Lawrence. Those psychiatrists were requested to prepare independent reports in accordance with section 11 of the Act.

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Dr Lawrence examined the respondent for two and a-half hours on 17 October 2008. Dr Lawrence applied a number of risk assessment tools that confirmed Dr Lawrence's clinical impression that the respondent has a moderate to high risk of re-offending. Dr Lawrence diagnosed paedophilia, primarily female but non-exclusive, and noted the respondent is of bisexual orientation. Dr Lawrence also noted evidence of the respondent's impulsivity, possible manipulateness and some antisocial traits, including some diminished ability to control aggression at times and problems in inhibiting behaviours.

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Dr Lawrence considered it was of concern that the respondent had received extensive psychological, psychiatric and specific interventions in regards to his offending as a teenager before the offences for which he is currently imprisoned were committed. Dr Lawrence considered that the respondent's risk of re-offending is moderate to high and suggests that it may even be able to be characterised as a high risk in the longer term. Therefore, Dr Lawrence recommended close supervision and monitoring by Corrective Services to mitigate the moderate to high risk of re-offending.

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Professor James also examined the respondent for in excess of two hours. This examination took place on 24 October 2008. Professor James obtained similar results to the other psychiatrists on his assessment using various actuarial instruments. In reliance on those results and his clinical examination, Professor James concluded that the respondent was a moderately high risk of repetition of paedophilic behaviour. Professor James also recommended release subject to a supervision order that addressed the risk factors applying to the respondent's risk of re-offending. Because of the respondent's age, Professor James also supported a supervision order for a lengthy period such as 15 years.

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The evidence of Dr Grant, Dr Lawrence and Professor James is acceptable and cogent and satisfies me to the high degree of probability that is required under the Act that the respondent's moderate to high risk of sexual re-offending, unless appropriately supervised, is an unacceptable risk in

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terms of section 13(2) of the Act. In light of the
psychiatric evidence and the recommendations made by the
psychiatrists, which are supported on this application by both
the Attorney-General and the respondent, I am satisfied that
appropriate conditions can be formulated for a supervision
order that will address the need to ensure the adequate
protection of the community and that a supervision order
should be made for a period of 15 years.

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HER HONOUR: Order as per amended draft, initialled by me and
placed with the file.

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